EASTER	N Di	istrict of	WASHINGTON
Michael Enga	ine Swenson	SUM	MONS IN A CIVIL CASE
Michael Engr V. United States	of America,	CASE NUMBER:	
·		CV-	07-305-EFS
TO: (Name and ac			
Defe	ndants all.		
	IMMONED and required to		ATTORNEY (name and address)
Michael P.O. E Dove	l Swenson ox 129 r, 10 8382	5	
this summons on you, exclusive	of the day of service. If you answer that you s	ou fail to do so, judgme	nt by default will be taken against you for a section must be filed with the Clerk of this
James R. La	rsen		P 37 (* *) 2317
STÉVIE J.	DEDDV	DATE	
(By) DEPUTY CLERK	KINI	•	

is in a Civil Action			
	RETURN OF SI	ERVICE	
ad complaint was made by me <sup>(1)</sup>	DATE OCT	05,2007	
Swenson	TITLE		
dicate appropriate method of se	rvice		
ly upon the defendant. Place wh	nere		
esiding therein.		of abode with a person of	of suitable age and
with whom the summons and co	omplaint were		
Coxtified 12	Mail / 8	etwn Rese	vo4
STA	ATEMENT OF SEI	RVICE FEES	
SERVICES			TOTAL
I	ECLARATION O	FSERVER	
105/2007	and the	~	
ervice "		129 Doney,	LD 83825
lly, No Insurance Coverage Pro ion visit our website at www.usps.	come		
61			
2656VEN. 101	•		
05	· )		
9. 40 2007			
N Michigan Av Ste	2700		
	Instructions		
	Steel Son  dicate appropriate method of set  ly upon the defendant. Place where the set of at the defendant's dwelling he esiding therein.  with whom the summons and continuous and set of set	RETURN OF SIND DATE OF TITLE  Swellson  dicate appropriate method of service  ly upon the defendant. Place where  eof at the defendant's dwelling house or usual place desiding therein.  with whom the summons and complaint were  STATEMENT OF SERVICES  DECLARATION OF  SERVICES  DECLARATION OF  Under penalty of perjury under the laws of the United Statement of Service Fees is true  Address of Server  Ervice  MAIL	RETURN OF SERVICE  and complaint was made by me <sup>(1)</sup> SIMMS on  dicate appropriate method of service  ly upon the defendant. Place where  eof at the defendant's dwelling house or usual place of abode with a person of service in the summons and complaint were  STATEMENT OF SERVICE FEES  SERVICES  DECLARATION OF SERVER  under penalty of perjury under the laws of the United States of America the sturn of Service and Statement of Service Fees is true and correct.    OS   2007     Date   Signature of Service

EASTER	N	District of	WASHINGTON
Michael Engr v. United States	ne Swenson		SUMMONS IN A CIVIL CASE
United States	of America,	CASE N	umber: CV-07-305-EFS
TO: (Name and ad	dants al	<b>Ц</b> .	
	IMMONED and required to sweenson ox 129 mg. 10 83°		INTIFF'S ATTORNEY (name and address)
	of the day of service laint. Any answer that	. If you fail to do	within <u>nine +y (90)</u> days after service of so, judgment by default will be taken against you for arties to this action must be filed with the Clerk of this
James R. Le	rsen		nor on 227
STEVIE.	J. PERRY	DATE	

<b>₹</b> AO 440 (	Rev. 8/01) Summons in a Civil Action		
 		RETURN OF SERVICE	
Service o	of the Summons and complaint was made by me(1)	DATE Oct 05, 2007	
	ERVER (PRINT) (1 Chap) Swenson	TITLE	
Check o	ne box below to indicate appropriate method of ser	vice	
۵	Served personally upon the defendant. Place wh	ere	
٥	Left copies thereof at the defendant's dwelling he discretion then residing therein.		suitable age and
	Name of person with whom the summons and co	omplaint were	
	Returned		
Ø	Other (specify): Cortified US	Mail / Resturn Reces	pot
	STA	TEMENT OF SERVICE FEES	<u>,</u>
TRAVEL	SERVICES		TOTAL
	1	ECLARATION OF SERVER	<u></u>
	executed on $\frac{10/05/2007}{\text{Date}}$	Service Fees is true and correct.	
	O.S. Postal Service in GERTIFIED WAIL. RECEI (Domestic Mail Only: No insurance Covernment of delivery information with our website at in	age Provided)	<u>ID_83825</u>
	Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)	Office 2007	
	Sent TC Brian Sec. SPD  Street. Co. Street. St	de Reverse for Instructions	

EASTER	N Di	strict of	WASHINGTON
Michael Enge V. United States	ne Swenson	SUM	IMONS IN A CIVIL CASE
United States	of America,	CASE NUMBER:	07-305-EFS
TO: (Name and add	dants all.		
	IMMONED and required to a Swenson ox 129 m, 10 83823		S ATTORNEY (name and address)
an answer to the complaint which this summons on you, exclusive	ch is served on you with this of the day of service. If yo laint. Any answer that you se	summons, within	nine + y (90) days after service of ent by default will be taken against you for is action must be filed with the Clerk of this
James R.		DATE	007 o a 2097
STEVIE J	. PERRY		

RETURN OF SERVICE
f the Summons and complaint was made by me" DATE
FRVER (PRINT)
ne box below to indicate appropriate method of service
E INA IEION IN MINICULE MODIFICIPIE MEMBE OF SETVICE
Served personally upon the defendant. Place where
Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.
Name of person with whom the summons and complaint were
Returned
Other (specify): Cartified US Mail / Return Receipt
STATEMENT OF SERVICE FEES  SERVICES TOTAL
DECLARATION OF SERVER
entained in the Return of Service and Statement of Service Fees is true and correct.
xecuted on 10/05/2007 Signature of Server
Signature of Server  R.D. Box 129 Dower, LD 83825  Address of Server
Signature of Server  R. D. Box 129 Dower, LD 83825  Address of Server  CERTIFIED MAIL RECEIPT  Concess: Mail Cast. We insurance Coverage Provided)  For delivery information visit our website at wine usps-soons
Address of Server  Signature of Server  R. D. Box 129 Dower, LD 83825  Address of Server  CERTIFIED MAIL, RECEIPT  Comestic Mail Only, No Insurance Coverage Provided)
Postage 5 4.60
Recuted on 10/05/2007    Date   Signature of Server
Recuted on 10/05/2007 Date Signature of Server  R. D. Box 129 Dower 10 83825  Address of Server  CERTIFIED WALL, RECEIPT Domestic Mail Only, No Insulant Courage Provided  Postage Certified Fee Courage Provided  Postage S 4:60  Certified Fee 2.65  Return Receipt Fee Endorsement Required  2.65  Return Receipt Fee Courage Provided
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Restricted Delivery Fee Endorsement Required)  R. D. Base 129 Daney, ID 83825  Address of Server  R. D. Base 129 Daney, ID 83825  Address of Server  Postal Service  CERTIFIED WAIL RECEIPT  Library Mail Only, No Insurance Coverns Provided)  For Delivery Information visits  Postage S 47.60  Certified Fee Endorsement Recuired  Restricted Delivery Fee Endorsement Recuired  OCT  OS
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EASTER	IN	District of	WASHINGTON
Michael Engi V. United States e	que Swenson		SUMMONS IN A CIVIL CASE
United States	of America,	CASE NU	JMBER:
Ū		(	CV-07-305-EFS
TO: (Name and a	denum of Defendent)		
Defo	y dants al	<b>U</b> .	
_			
YOU ARE HEREBY S	MMONED and requi	ired to serve on PLA	INTIFF'S ATTORNEY (name and address)
M:cha	l Swenson	_	
P.O. 6	l Swenson 30x 129 r, 10 83°	825	,
Dove	, 10 0-		
			•
	of the day of service	. If you fail to do s	o, judgment by default will be taken against you for
the relief demanded in the comp Court within a reasonable period		t you serve on the par	rties to this action must be filed with the Clerk of this
ames R.	Lare:		OCT 0 0 2007
CLERK STEVIE	PERRY	DATE	

AO 440 (Rev. 8/01) Summons in a Civil Action	
	RETURN OF SERVICE
Service of the Summons and complaint was made by me <sup>(1)</sup>	DATE Oct 05,2007
NAME OF SERVER (PRINT) Swenson	TITLE
Check one box below to indicate appropriate method of set	rvice
☐ Served personally upon the defendant. Place wh	ете
discretion then residing therein.	ouse or usual place of abode with a person of suitable age and
Name of person with whom the summons and co	omplaint were
☐ Returned	
Other (specify): Cortified US	5 Mail / Resturn Receipt
STA	ATEMENT OF SERVICE FEES
TRAVEL SERVICES	TOTAL
ŭ	ECLARATION OF SERVER
contained in the Return of Service and Statement of Executed on $\frac{10/05/2007}{}$	he laws of the United States of America that the foregoing information Service Fees is true and correct.
Fostage S 4.60 Certified Fee Certified Fee (Endorsement Required) Festricted Delivery Fee (Endorsement Required) Total Postage & Tees Seet Apt. No: or PO Box No. City, State, 2IP-2	R.D. Box 129 Down ID 83825  direct of Server  Description  OF 2007  B3825  SW  Server for Instructions

ONITED	SIATES DISTRICT COOK!
EASTERN	District of WASHINGTON
Michael Engene Swens	
United States of America	CV-07-305-EFS

TO: (Name and adaptes of Defendant)

Defendants all.

YOU ARE HEREBY SUMMONED and required to serve on PLAINTIFF'S ATTORNEY (more and address)

Michael Swenson P.O. Box 129 Doner, 10 83825

Jamos R Larse:

OCT 0 9 2007

CLERK

STEVIE J. PERRY

DATE

AU 440	(Rev. 8/01) Summons in a Civil Action
	RETURN OF SERVICE
Service	of the Summons and complaint was made by me(1) DATE Oct 05, 2007
	SERVER (PRINT) SWENSON
Check	one box below to indicate appropriate method of service
ε	Served personally upon the defendant. Place where
C	Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.
	Name of person with whom the summons and complaint were
c	Returned
Ċ	other (specify): Cartified US Mail/Return Receipt
TRAVEL	STATEMENT OF SERVICE FEES SERVICES TOTAL
	DECLARATION OF SERVER
	Executed on
	R.D. Box 129 Dower, ID 83825  I.S. Postal Service: GERTIFIED MAIL:, RECEIPT (Bonnestic Mail Cally, No Insurance Coverage Provided)  General Control of the Medical at Management Coverage (Coverage Provided)
1	Certified Fee  Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  Total Postage & Feer  Sent To  Sireet, Apt. No.: or PO Box No. City, State, ZIP+4  Cory, State, ZIP+
	See Reverse for Instructions

EASTER	N	District of	WASHINGTON
Michael Euge V. United States	ne Swensm		SUMMONS IN A CIVIL CASE
United States	of America,	CASE N	UMBER: CV-07-305-EFS
TO: (Name and ad		4	
	dants al		INTIFF'S ATTORNEY (name and address)
Michae P.O. B Dove	l Swenson $129$ r, 10 $83$	825	·
	of the day of service. sint. Any answer that	. If you fail to do s	within
'ames R.	_arsen		OCT 0 0 2007
STEVIÉ.	J. PERRY	DATE	

(Rev. 5/01) Summons in a Civil Action			
	RETURN OF SER	VICE	
of the Summons and complaint was made by me <sup>(1)</sup>	DATE Och (	5.200)	
ERVER (PRINT)	TITLE	13,200	
	vice		
Served personally upon the defendant. Place who	ете		
Left copies thereof at the defendant's dwelling ho	ouse or usual place of al	pode with a person of suitab	ole age and
Name of person with whom the summons and co	mplaint were	<del></del>	
Returned			
Other (specify): Cathfiel US	Mail/Res	wn Receipt	
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SERVICES	TEMENT OF SERVI	CE PERS	TOTAL
	TOTAL PARTICIPATION OF ST	TOTAL .	
Executed on $\frac{10/05/2007}{}$	Service ross is true aix	C.	
Date Sig	mature of Server	3	
	R.O. Bas 12	9 Dover, LD	83825
(Domestic Mail Only, No Insurance Coverage	Provided)		
The state of the s			
Pristage 3 4.60 DOVER	I. IDANO		
Return Roceipt Fee (Endorsement Required)	)5		
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Street Apt. No.: Stephen Puller Street Apt. No.: Sol N 2 AV			
	of the Summons and complaint was made by method of server (PRINT)  Served personally upon the defendant. Place who discretion then residing therein.  Name of person with whom the summons and concentrated in the Return of Service and Statement of Services and Statement of Service and Service a	RETURN OF SERVER of the Summons and complaint was made by me <sup>th</sup> DATE Oct (REVER (PRINT) ITTLE  Server (PRINT) ITTLE  SERVICES  DECLARATION OF SERVICE  SERVICES  DECLARATION OF SERVICE  Server (PRINT) ITTLE  SERVICES  DECLARATION OF SERVICE  Server (PRINT) ITTLE  SERVICES  DECLARATION OF SERVICE  Server (PRINT) ITTLE  SERVICES  DECLARATION OF SERVICE  Service (PRINT) ITTLE  Service (PRINT) ITTLE  Service (PRINT) ITTLE  SERVICES  Server (PRINT) ITTLE  SERVICES  SERVICE	RETURN OF SERVICE  of the Summons and complaint was made by me <sup>10</sup> CRYPER (PRINT)  Succession  The box below to indicate appropriate method of service  Served personally upon the defendant. Place where  Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suital discretion then residing therein.  Name of person with whom the summons and complaint were  Returned  Other (specify):  STATEMENT OF SERVICE FEES  SERVICES  DECLARATION OF SERVER  I declare under penalty of perjury under the laws of the United States of America that the foontained in the Return of Service and Statement of Service Fees is true and correct.  Secuted on 10/05/2007  Date  R. D. Box 129 Down 10  U.S. Postal Services  Signature of Server  R. D. Box 129 Down 10  U.S. Postal Services  Signature of Server  R. D. Box 129 Down 10  U.S. Postal Services  Signature of Server  R. D. Box 129 Down 10  U.S. Postal Services  Signature of Server  R. D. Box 129 Down 10  U.S. Postal Services  Signature of Server  R. D. Box 129 Down 10  U.S. Postal Services  Signature of Server  R. D. Box 129 Down 10  U.S. Postal Services  Signature of Server  R. D. Box 129 Down 10  U.S. Postal Services  Signature of Server  R. D. Box 129 Down 10  Signature of Server  R. D. Box 129 Down 10  Signature of Server  R. D. Box 129 Down 10  Signature of Server  R. D. Box 129 Down 10  Signature of Server  R. D. Box 129 Down 10  Signature of Server  R. D. Box 129 Down 10  Signature of Server  R. D. Box 129 Down 10  Signature of Server  R. D. Box 129 Down 10  Signature of Server  R. D. Box 129 Down 10  Signature of Server  R. D. Box 129 Down 10  Signature of Server  R. D. Box 129 Down 10  Signature of Server  R. D. Box 129 Down 10  Signature of Server  R. D. Box 129 Down 10  Signature of Server  R. D. Box 129 Down 10  Signature of Server

EASTER	Dis	trict of	WASHINGTON
Michael Engr V. United States e	ne Swenson	<b>S</b> U	IMMONS IN A CIVIL CASE
United States	of America,	CASE NUMBER	ti
		Cv	-07-305-EFS
TO: (Name and ad			
Deter	adants all.		•
YOU ARE HEREBY S	IMMONED and required to s	erve on PLAINTIFF	'S ATTORNEY (name and address)
M: chae	l Swenson		
P.O. B Dove	l Swenson $129$ $r$ , $1083825$	<b>-</b>	
this summons on you, exclusive	of the day of service. If you aint. Any answer that you ser	fail to do so, judgo	nine 1 (90) days after service of nent by default will be taken against you for his action must be filed with the Clerk of this
-lames R	Larsen		OCT 0 0 2007
STEVIE	J. PERRY	DATE	

- CALO 440 (	Rev. 6/01) Summons in a Civil Action		
		RETURN OF SERVICE	
Service o	of the Summons and complaint was made by me <sup>(1)</sup>	DATE Oct 05,2007	
	GERVER (PRINT) Swenson	TITLE	
Check o	ne box below to indicate appropriate method of ser	vice	
	Served personally upon the defendant. Place who	ere	
	Left copies thereof at the defendant's dwelling ho discretion then residing therein.  Name of person with whom the summons and co		suitable age and
	Returned	прин жее	
080	Other (specify): Cartified US	Mail / Resturn Recen	ot
	STA	TEMENT OF SERVICE FEES	<u> </u>
TRAVEL	SERVICES	TEMENT OF BERNICE PORCE	TOTAL
		NOT A DATE OF SERVED	
	<u></u>	ECLARATION OF SERVER	
	contained in the Return of Service and Statement of Executed on $\frac{10/05/2007}{}$	ne laws of the United States of America that the Service Fees is true and correct.	
10Eh	U.S. Postal Service 1.4 CERTIFIED MAIL 1.6 RECEIPT (Bolgestic Mail Only, No Insurance Coverage I For delivery information vial our website at www.us	R.O. Box 129 Doner	ID 83825
425E 4000 0520 2002	Total Postage & Fees \$ 9, 40  Sen:	CT 05 IN7 1825	

	DIVITED BIRTLES DISTRICT		
EASTER	V	District of	WASHINGTON
Michael Euge V.			SUMMONS IN A CIVIL CASE
United States	of America,	CASE	NUMBER: CV-07-305-EFS

TO: (Name and address of Defendent)

Defendants all.

YOU ARE HEREBY SUMMONED and required to serve on PLAINTIFF'S ATTORNEY (more and address)

M: chael Swenson P.O. Box 129 Dover, 10 83825

James R. Larsen

OST () () 2007

**CLERK** 

STEVIE J. PERRY

DATE

AO 440 (Rev. 8/01) Summons in a Civil Action
RETURN OF SERVICE
Service of the Summons and complaint was made by me <sup>(1)</sup> DATE  DC + 05, 2007
NAME OF SERVER (PRINT)  NICHAE SWENSON  TITLE
Check one box below to indicate appropriate method of service
☐ Served personally upon the defendant. Place where
<ul> <li>Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.</li> </ul>
Name of person with whom the summons and complaint were
☐ Returned
Other (specify): Cartified US Mail/Resturn Receipt
STATEMENT OF SERVICE FEES
TRAVEL SERVICES TOTAL
DECLARATION OF SERVER
I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.  Executed on
Q.O. Box 129 Dover 10 83825  Address of Server  U.S. Postal Service  CERTIFIED MAIL RECEIPT  Cornestic Mail Only, No Insulative Coverage Provided)
T Core was addressed out the same of the s
Postage & GO
Return Receipt Fee (Endorsement Receipt Fee (E
Total Postage & Sees \$ 9.40 2
Street, Apt. No.; or PO Box No. 350 Church St.
PS Form 3800, August 2006 See Reverse for Instructions

UNITED STATES DISTRICT COURT			
EASTER	<b>N</b>	District of	WASHINGTON
Michael Enga V. United States et	ne Swenson		SUMMONS IN A CIVIL CASE
United States	of America,	CASE NU	MBER: CV-07-305-EFS
TO: (Nume and add			
Defor	dants all	•	
			NTIFF'S ATTORNEY (numbe and address)
Michael P.O. B. Dove	l Swenson $000$ $129$ $10$ $838$	25	
this summons on you, exclusive of	of the day of service. In int. Any answer that yo	f you fail to do so	hin 100 (90) days after service of judgment by default will be taken against you for less to this action must be filed with the Clerk of this

James R. Larsen

OCT 0 0 2007

CLERK

STEVIE J. PERRY

DATE

	RETURN OF SERVICE
Service	of the Summons and complaint was made by me <sup>(1)</sup> DATE Oct 05, 2007
	SERVER (PRINT) SWENSON
Check o	one box below to indicate appropriate method of service
C	Served personally upon the defendant. Place where
	Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.
	Name of person with whom the summons and complaint were
	Returned
02	r Other (specify): Cartified U.S Mail/Resturn Receipt
	STATEMENT OF SERVICE FEES
TRAVEL	SERVICES TOTAL
	DECLARATION OF SERVER
	I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.  Executed on
	R.D. Box 129 Doney, ID 83825 Address of Server

	UNITED STATES DISTRICT COURT			
EASTER	N	District of _	WASHINGTON	
Michael Engr V. United States	ne Swenson		SUMMONS IN A CIVIL CASE	
United States	of America,	CASE N	UMBER: CV-07-305-EFS	
TO: (Narra and ac	dants a	U.		
P.O. E  Dove  an answer to the complaint white this summons on you, exclusive	ch is served on you we of the day of service sint. Any answer the	with this summons, we all you fail to do set you serve on the pe	ithin	
James R.	Larser		<b>O</b> OT O O <b>2007</b>	
STEVI	J. PERRY	DATE		

AO 440 (Rev. 8/01) Summons in a Civil Action	
	RETURN OF SERVICE
Service of the Summons and complaint was made by me <sup>(1)</sup>	DATE OCT OS 2000
NAME OF SERVER (PRINT) Swenson	TITLE
Check one box below to indicate appropriate method of ser	vice
☐ Served personally upon the defendant. Place wh	aro .
Server personally upon the determine Prace will	
☐ Left copies thereof at the defendant's dwelling he discretion then residing therein.	ouse or usual place of abode with a person of suitable age and
Name of person with whom the summons and co	omplaint were
□ Returned	
Or Other (specify): Cartified US	Mail / Return Receipt
STA	ATEMENT OF SERVICE FEES
TRAVEL SERVICES	TOTAL
n i	DECLARATION OF SERVER
contained in the Return of Service and Statement of Executed on	he laws of the United States of America that the foregoing information Service Fees is true and correct.
SECTION TO SECTION OF THE PROPERTY OF THE PROP	Provided)
Certified Fee  Gentlined Fee  Gentlined Fee  Gentlined Delivery Fee  (Endorsement Required)  Rostricted Delivery Fee  (Endorsement Required)  Total Postage & Fees  Sent To  Sent To  Sineal, Apt. No.; or PO Box No.  City, State, ZiP+4  Description  PS Form 3800, August 2006  See	83925 87 NTW

EASTER	N	District of	WASHINGTON
		_	SUMMONS IN A CIVIL CASE
Michael Enga v. United States e-	of America,	CASE N	MBER: CV-07-305-EFS
TO: (Name and ad	dants ab	(.	
YOU ARE HEREBY S	UMMONED and requir	red to serve on PLA	INTIFF'S ATTORNEY (name and address)
M:chae P.O. B Dove	l Swenson ox 129 r, 10 839	325	
	of the day of service. aint. Any answer that	If you fail to do s	ithin
James R.	Larsen		00T 0 0 2007
STEVIE	J. PERRY	DATE	

AO 440 (Rev. 8/01) Summons in a Civil Action
RETURN OF SERVICE
Service of the Summons and complaint was made by me"  DATE  Oct 05, 2007
NAME OF SERVER (PRINT)  TITLE
Check one box below to indicate appropriate method of service
☐ Served personally upon the defendant. Place where
☐ Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.
Name of person with whom the summons and complaint were
☐ Returned
08 Other (specify): Cartified US Mail/Resturn Receipt
STATEMENT OF SERVICE FEES
TRAVEL SERVICES TOTAL
DECLARATION OF SERVER
I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.  Executed on
9.0. Box 129 Doney, 10 83825
CERTIBED WAIL FIESEPS  Sportessic Man Only, no lucurence soureinge Province)  Contessic Man Only no lucurence soureinge Province)
Certified Fee 265 Ros Frank
(Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  2007
Some To Borney Court General Hopping Many
PS Form 3800, August 2006 See Reverse for Instructions

EASTER	N	District of _	WASHINGTON
Michael Euge V.	ne Swenson		SUMMONS IN A CIVIL CASE
Michael Euge v. United States et	of America,	CASE N	UMBER: CV-07-305-EFS
TO: (Name and add	iress of Defeadant) dants all	•	
YOU ARE HEREBY S	JMMONED and require	d to serve on PL	AINTIFF'S ATTORNEY (name and address)
M:chae P.O. B Dove	l Swenson ox 129 r, 10 838	25	
this summons on you, exclusive	of the day of service. laint. Any answer that y	If you fail to do	within <u>nine</u> + y (90) days after service of so, judgment by default will be taken against you for arties to this action must be filed with the Clerk of this
James R	. Lärsen		007 0 0 2007
STÉVIE J	. PERRY	DATE	<u> </u>

₩AU 440	(Rev. 8/01) Summons in a Civil Action				
<u></u>		RETURN OF SERVICE			
	of the Summons and complaint was made by me"	Date Oct 05,2007			
	SERVER (PRINT) Swenson	TITLE (			
Check o	ne box below to indicate appropriate method of ser	vice			
	Served personally upon the defendant. Place wh	ere			
	☐ Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.				
	Name of person with whom the summons and co	mplaint were			
	Returned				
035	Other (specify): Cartified US	Mail / Return Receip	4		
TRAVEL	STA SERVICES	TEMENT OF SERVICE FEES	TOTAL		
	SERVICES				
	<u></u>	ECLARATION OF SERVER			
	contained in the Return of Service and Statement of Executed on $\frac{10/05/2007}{}$	ne laws of the United States of America that the Service Fees is true and correct.  The service fees is true and correct.  The service fees is true and correct.	e foregoing information		
	TS. Postal Service.	R.O. Box 129 Doney 1	D 83825		
	Postage \$ 4.00  Certified Fee 2.65  Restim Receipt Fee (Endorsement Required)  Restificted Defivery Fee (Endorsement: Recuired)  Total Postage & Fees \$ 9.40  Street Apt No. or PO Box No. 20 3 Macch Wa City, State, ZIP+4  D 03885	FIPT  SOUTER, IDAN  Postmark  Held T  05  2007  83825			

**EASTERN** 

#### SPOKANE WA 99210

WASHINGTON

#### UNITED STATES DISTRICT COURT

District of

Michael Eugene Swenson	SUMMONS IN A CIVIL CASE
United States of America, et al.	CASE NUMBER:
TO: (Name and address of Defendant)	
Defendants all.	
Dr. Frank Joy, 1415 N Houk Rd Ste A, Spo	
YOU ARE HEREBY SUMMONED and required to M: chael Swenson P.O. Box 129 Dover, 10 8382	serve on PLAINTIFF'S ATTORNEY (name and address)
this summons on you, exclusive of the day of service. If you	s summons, within <u>nine + y (90)</u> days after service of ou fail to do so, judgment by default will be taken against you for serve on the parties to this action must be filed with the Clerk of this
amos D. Loros	OCT 0 9 2007
ames R. Larsu	DATE
Sture of Lucy	ODICINAT
By) DEPUTY CLERK	ORIGINAL

AU 440	(Rev. 8/01) Summons in a Civil Action			
		RETURN OF SERVICE		
Service	e of the Summons and complaint was made by me <sup>(1)</sup>	DATE Oct 05.200)		
	SERVER (PRINT) Swenson	TITLE		
Check	one box below to indicate appropriate method of ser	vice		
1	Served personally upon the defendant. Place wh	ere		
1	☐ Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.			
	Name of person with whom the summons and co	mplaint were		
ı	Returned		*	
1	Other (specify): Cortified US	mail / Resturn Receipt	<u> </u>	
	STEA	TEMENT OF SERVICE FEES		
TRAVEL	SERVICES	TEMENT OF SERVICE PEES	TOTAL	
		ECLARATION OF SERVER	,	
	I declare under penalty of perjury under the contained in the Return of Service and Statement of Executed on	te laws of the United States of America that the Service Fees is true and correct.	foregoing information	
	/ Date Sig	nature of Server		
		R.O. Box 129 Doner, 11	83825	
	Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) Total Postage & Fees \$ 9, L/O  Sent To Sineet, Api. No.; or FO Box No. 1415 / N Hauk & Sc. City, State, ZiP+4 Sedime, WA 99740			
ł	PS Form 3800. August 2006 See Revi	erse for Instructions		

<u>EASTERN</u>

### RETURN TO CLERK USDC P.O. BOX 1493 SPOKANE, WA 99210

WASHINGTON

#### UNITED STATES DISTRICT COURT

District of

Michael Eng v. United States e	ene Swenson	SUMMONS IN A CIVIL CASE
United States	of America,	CV-07-305-EFS
TO: (Name and a	deites of Defendant)	
Johnson-Roundtree	Center, 800 W. Fifth Av., Collection Agency, 711 E. 9-473-4260 fax 509-473-4	Spokane, WA 99204 509-458-5800 and owned 3 <sup>rd</sup> Av, P.O. Box 264, Spokane, WA 99210-0264 262
	MMONED and required to a large	erve on PLAINTIFF'S ATTORNEY (name and address)
this summons on you, exclusive	of the day of service. If you laint. Any answer that you set	summons, withinnine + v (90) days after service of a fail to do so, judgment by default will be taken against you for two on the parties to this action must be filed with the Clerk of this
sames R.	Larse:_	OCT 0 9 2007
(By) DEPUTY CLERK	1 Parcy	ORIGINAL

<b>₹</b> AU 44	() ()	Rev. 8/01) Summons in a Civil Action	
			RETURN OF SERVICE
·	_	f the Summons and complaint was made by me <sup>(1)</sup>	Date Oct 05,2007
<u> </u>	M	schae Swenson	TITLE (
Chec	k or	te box below to indicate appropriate method of ser	rice
		Served personally upon the defendant. Place who	те
	0	Left copies thereof at the defendant's dwelling ho discretion then residing therein.	use or usual place of abode with a person of suitable age and
		Name of person with whom the summons and con	mplaint were
		Returned	
	<b>(3</b> )	Other (specify): Cartified US	Mail / Resturn Receipt
<u> </u>			
TRAVEL	_	STA SERVICES	TEMENT OF SERVICE FEES
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	_	Ď	ECLARATION OF SERVER
	co	I declare under penalty of perjury under the national in the Return of Service and Statement of	e laws of the United States of America that the foregoing information Service Fees is true and correct.
	E	secuted on 10/05/2007 Date Sign	nature of Server
		U.S. Postal Service CERTIFIED MAIL RECEI (D. (Pomestic Mail Only: No fristrance Cover	2.0.1800 129 Doney, LD 83825
		T C S T S S S S S S S S S S S S S S S S	waters com.
		Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  Total Postage & Feee \$ 9.40	05 2007
		Street Apt. No.: 800 W 5 AV  Ohy, State ZIPLA Spokene, WA 992	04
			reverse for instructions

P.O. BOX 1493

### SPOKANE, WA 99210 [INITED STATES DISTRICT COURT]

UNITED STA	TES DIST	RICI COURI
EASTERN	District of	WASHINGTON
Michael Eugene Swenson V.		SUMMONS IN A CIVIL CASE
United States of America, et al.	CASE	IUMBER:
		CV-07-305-EFS
TO: (Name and address of Defandam)  Defandants al		
Dr. William Corell, 3424 S Grand Av, S	Spokane, WA 9	9210 509-838-5800
YOU ARE HEREBY SUMMONED and requir		AINTIFF'S ATTORNEY (name and address)
Michael Swenson P.O. Box 129 Dover, 10 838	325	
an answer to the complaint which is served on you wit this summons on you, exclusive of the day of service. the relief demanded in the complaint. Any answer that Court within a reasonable period of time after service.	If you fail to do	so, judgment by default will be taken against you for
lames R. Larso:		OCT 0 9 2007
Stario di Recini	DATE	ORIGINAL

<b>№</b> AO 440 (	Rev. 8/01) Summons in a Civil Action		
		RETURN OF SERVICE	
Service o	of the Summons and complaint was made by me <sup>(1)</sup>	DATE Oct 05,20	707
NAME OF S	erver (PRINT) (Ichae) Swenson	TITLE	
Chec <u>k o</u>	ne box below to indicate appropriate method of ser	vice	
۵	Served personally upon the defendant. Place wh	ere	
٥	Left copies thereof at the defendant's dwelling he discretion then residing therein.	•	person of suitable age and
_	Name of person with whom the summons and co	omplaint were	
Ц	Returned		
ĊS	Other (specify): Cortified US	: Mail / Resturn A	ecesp#
		TEMENT OF SERVICE FEES	
TRAVEL	SERVICES	•	TOTAL
	Ď	ECLARATION OF SERVER	
	I declare under penalty of perjury under the contained in the Return of Service and Statement of Executed on $\frac{10/05/2007}{Date}$		rica that the foregoing information
	Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees \$ 9.40  Sined. Apl. No.: 3424 S Grand A 971	Bob 29 De	wer, 1D 83825
	#\$ 500m 3800. August 2006 See	Reversions	

AO 440 (Rev. 8/01) Summons in a Civil Action
RETURN OF SERVICE
Service of the Summons and complaint was made by me <sup>(1)</sup> DATE  Oct 05, 2007
NAME OF SERVER (PRINT) Swenson
Check one box below to indicate appropriate method of service
☐ Served personally upon the defendant. Place where
Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.
Name of person with whom the summons and complaint were
□ Returned
Other (specify): Cartified US Mail/Resturn Receipt
STATEMENT OF SERVICE FEES
TRAVEL SERVICES TOTAL
DECLARATION OF SERVER
DECLARATION OF SERVER
I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.
Executed on 10/05/2007
Date Signature of Server
9.0.Bas 129 Doner, 1D 83825
GERTIFIED MAIL RECEIPT  Danies In: Med Lonly: No Insurance Coverage Provided)  Receivery Information visit our measure at when aspectants
Postage S 4/60 DOVER, IDANO
Ty Postage \$ 4.60 SOVER, IDANIO
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Total Postage & Fees \$ 9.40 83828
Sent To My has Crue
Sheel Apt. No.: 2/1 W Cataldo Av
City, State, ZIP+8 Spokene WA 99210

#### RETURN TO CLERK USDC P.O BOX 1493

SPOKANE, WA 99210

WASHINGTON

### UNITED STATES DISTRICT COURT

District of

EASTERN	District of	WASHINGTON
Michael Engene Swenson	•	SUMMONS IN A CIVIL CASE
United States of America, et al.		NUMBER: CV-07-305-EFS
TO: (Name and address of Defendant)  Defendants al  Dr. Michael Cruz, 217 W Cataldo Av, Sp		210 509-624-2326
YOU ARE HEREBY SUMMONED and requision  P.O. Box 129  Dover, 10 839		AINTIFF'S ATTORNEY (userno and address)
an answer to the complaint which is served on you wi this summons on you, exclusive of the day of service, the relief demanded in the complaint. Any answer that Court within a reasonable period of time after service.	If you fail to do	so, judgment by default will be taken against you for
ranes R. Laiser		OCT 0 9 2007
(By) DEPUTY CLERK	DATE	ORIGINAL

#### P.O. BOX 1493

### UNITED STATES DISTRICT COURT

EASTERN	District of	WASHINGTON
Michael Eugene Swenson V.		SUMMONS IN A CIVIL CASE
United States of America, et al.	CASE N	UMBER: <b>CV-07-305-EFS</b>
TO: 6:		
TO: (Name and address of Defendant)  Defendants al	1.	
Dr. Timothy Chestnut, 801 W 5th Ste 50		99210 509-625-1915
YOU ARE HEREBY SUMMONED and requi		AINTIFF'S ATTORNEY (name and address)
Michael Swenson P.O. Box 129 Dover, 10 839	825	
an answer to the complaint which is served on you we this summons on you, exclusive of the day of service the relief demanded in the complaint. Any answer that Court within a reasonable period of time after service.	. If you fail to do	so, judgment by default will be taken against you for
ames R. Larson		OCT 0 9 2007
CLERK	DATE	

**ORIGINAL** 

		RETURN OF SERVICE	
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	ly upon the defendant. Place wh		
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Name of person	with whom the summons and co	mplaint were	
☐ Returned			
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/>	1 /		
Executed on	) /05/2007   Date   Sig	mature of Server	
Executed on		_	Doner, 10 83825
ThT	THEO MALL SE	R.O. Box 129  dress of Server  CEIPT  Serverage Provision	Doner, 10 83825
ር ከ ፲ ክ	FIFED MAIL RE	R.O. 1800 129 dress of Server	Doner, 1D 83825
1 4 1 4 1 2 5 1 1 1 1 1 1 2 5 1 1 1 1 1 1 1 2 5 1 1 1 1	Add	R.O. Box 129  dress of Server  CEIPT  The Control of the Control o	Doner, 10 83825
4 3524 4141	FIFED MALL SE  Sector of the s	R.D. Box 129  dress of Server  PEIPI  PARTIES COME  OVER, 10an	Doner, 10 83825
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Ehth h25E h000 0220 Conference (Endorsem Conference	20stage 5 4.60 Certified Fige 2.657 In Recept Fage 2.157 Id Delivery Fee tent Prequired) Stage & Feec \$ 9.40  Timothy Chester  No.	CEIPT  CEIPT  COMPANY  OFFOSTORIA  OFFOSTO	Doner, 10 83825
ThTh h25E h000 Gendersem Total Pes	Certified Fee 2.657 The Receipt Fee Per Required Peeus Peeus Peeus S. 9.40  Timothy Clust No. 80  Addition of the period of the peeus Peeus Peeus S. 9.40	CEIPT  CEIPT  COMPANY  OFFOSTORIA  OFFOSTO	Doner, 1D 83825

#### RETURN TO CLERK USDC

P.O. BOX 1493

# UNITED STATES PRISTRICTS COURT

EASTERN		District of	<u> </u>
Michael Engen	e Swenson		SUMMONS IN A CIVIL CASE
Michael Eugen V. United States of	Aperica, al.	CASE NU	MBER: CV-07-305-EFS
	dants all.	sistant Linda (	Bnaith, 12615 E. Mission Av Ste.
200, Spokane, WA 9921	0 509-228-1200		INTIFF'S ATTORNEY (name and attiron)
	Swenson ox 129 -, 10 8382		
this summons on you, exclusive o	of the day of service. If int. Any answer that you	you fail to do se	ithin <u>nine</u> + y (90) days after service of the judgment by default will be taken against you for ties to this action must be filed with the Clerk of this
James R. La		DATE	OCT 0 9 2007
VA CIL	1.1		

**ORIGINAL** 

AO 440 (Rev. 8/01) Summons in a Civil Action	
RETURN OF SE	RVICE
Service of the Summons and complaint was made by me <sup>(1)</sup>	05,2007
NAME OF SERVER (PRINT)  Swenson  TITLE	7 (
Check one box below to indicate appropriate method of service	
☐ Served personally upon the defendant. Place where	
<ul> <li>Left copies thereof at the defendant's dwelling house or usual place of discretion then residing therein.</li> <li>Name of person with whom the summons and complaint were</li> </ul>	abode with a person of suitable age and
☐ Returned	
DX Other (specify): Cartified U.S Mail/Re	two Receipt
TRAVEL SERVICES	TOTAL
TIGATED SERVICES	IOIAL
DECLARATION OF	SERVER
I declare under penalty of perjury under the laws of the United contained in the Return of Service and Statement of Service Fees is true a  Executed on	
9,0.1800 1	29 Doner, 10 83825
CERTIFIED MAIL., RECEIPT (Domestic Mail Only, No Insurance Coverage Provided) For delivery Information Visit our mediate at www.uspectante.	
Prostage \$ 4.66	
Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  OCT  O5	
Total Postage & Fees \$ 9.40 2007	/ ¬
Street, Apr. No.: 12615 & Mission Ste 200 City: State, ZIP-4 Sakane, WA 99210	

See Reverse for Instructions

PS Form 3800, August 2006

(By) DEPUTY CLERK

TATTAL	STATES	DISTRICT	Court
L MALLECLY	DIALED		$\sim$

UNITED STATES DISTRICT COURT			
EASTER	N Distri	ct of	WASHINGTON
Michael Enge V. United States	ne Swenson	SUMM	ONS IN A CIVIL CASE
United States	of America,	CASE NUMBER:	,
		CV-0	7-305-EFS
TO: (Name and ad			
Defen	dants all.		
	JMMONED and required to se	rve on PLAINTIFF'S A'	TTORNEY (manne and address)
M:chae	l Swenson		
P.O. E	l Swenson ox 129 r, 10 83825	•	
	of the day of service. If you aint. Any answer that you serv	fail to do so, judgment	trety (90) days after service of by default will be taken against you for ction must be filed with the Clerk of this
James R.	_arsen		PT 0 3 22 <b>3</b> 7
STEVIE	J. PERRY	DATE	

AO 440	(Rev. 8/01) Summons in a Civil Action				
		RETURN OF SERV	VICE		
Service o	of the Summons and complaint was made by me <sup>(1)</sup>	DATE Oct (	55.2	007	
	SERVER (PRINT) Swenson	TITLE		-(	
Check o	m <u>e box below to indicate appropriate method of ser</u>	vice			
ם	Served personally upon the defendant. Place wh	ere			
	Left copies thereof at the defendant's dwelling he discretion then residing therein.	· .	ode with	a person of suita	ble age and
	Name of person with whom the summons and co	omplaint were			
	Returned		<u></u>		<u>.                                    </u>
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TRAVEL	SERVICES				TOTAL
	D	ECLARATION OF SE	RVER		<del></del>
	executed on $\frac{10/05/2007}{Date}$	gnature of Server	2		
_	_	R.O. Boo 12	9 D	over, LD	83825
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1 8	Postage \$ 4.60	Postmerk			
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ļ	Street Api. No.: 19960	ولما			
Г	City. State. ZIP+4 Pallos, TX 1526	1-7850			
	PS Form 3800, August 2006 See Re	verse for Instructions			

(Rev. 8/01) Summons in a Civil Ad	UNITED STATES D	
Michael Engi	ne Swenson	SUMMONS IN A CIVIL CASE
Michael Engi V United States	of America,	CV-07-305-EFS
TO: (Name of	endants all.	
		erve on PLAINTIFF'S ATTORNEY (name and address)
YOU ARE HEREE	suerson	
P(:c) P.O.	Box 129 ver, 10 83823	
il1:-5 demanded in the	t which is served on you with this lusive of the day of service. If yo compaint. Any answer that you speriod of time after service.	s summons, within
		907 o ≥ 2097
James	R. Lársen	
CLERK STE	VIE J. PERRY	DATE

AND DEM LLA VI BOR

ZAU 440 (K	ev. 8/01) Summons in a Civil Action		
		RETURN OF SERVICE	
Service of	the Summons and complaint was made by me <sup>(1)</sup>	DATE Oct 05, 2007	
	RVER (PRINT) Swenson	TITLE	
Check one	e box below to indicate appropriate method of ser	vice	
	Served personally upon the defendant. Place who	cre	
}	Left copies thereof at the defendant's dwelling ho discretion then residing therein.		itable age and
]	Name of person with whom the summons and co	inplaint were	
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<b>∤</b> -			
	STA	TEMENT OF SERVICE FEES	
TRAVEL	SERVICES		TOTAL
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	ecuted on $\frac{D/05/2007}{}$	se laws of the United States of America that the Service Fees is true and correct.  **The Company of Server**  **The Company of S	foregoing information
		R.O. Box 129 Doner, 1	0 83825
7 0220 0004 3524 41.89	Return Receipt Fee (Endorservent Required)  Restricted Delivery Fee (Endorsement Rectured)  Total Postage & Fees \$ 9,40	JER. IDALIO DE 2007 CELON	
200	Street Api. No.: Rop 40100/1125 Works or PO Box No.: Rop 40100/1125 Works Thy State, ZIPLA Olymp by WA 9850	16-0100	
	PS Form 3800 August 2006 See Rev	erse for Instructions	

EASTERI	N .	District of	WASHINGTON
Michael Euge V. United States e	ne Swenson		SUMMONS IN A CIVIL CASE
United States	of America,	CASE 1	TUMBER:
	•		CV-07-305-EFS
TO: (Name and adj	non of Dubraina)		•
• }	dants all		
YOU ARE HEREBY SUI	MMONED and required	l to serve on PLA	INTIFF'S ATTORNEY (name and address)
M: charl	Swenson		
P.O. Ba Dover	Swenson ox 129 -, 10 838:	25	
Jour Section A	the day of service. It is Any answer that you	Von fail to de a	ithin
James R. Lá	ırsen		00T 0 0 ZC37
CLERK			
STEVIE J.	PERRY	DATE	

AO 440 (Rev. 8/01) Summons in a Civil Action	
	RETURN OF SERVICE
Service of the Summons and complaint was made by me <sup>(1)</sup>	DATE Oct 05,2007
NAME OF SERVER (PRINT) Swenson	TITLE
Check one box below to indicate appropriate method of ser	rvice
☐ Served personally upon the defendant. Place who	нете
Left copies thereof at the defendant's dwelling he discretion then residing therein.  Name of person with whom the summons and co	nouse or usual place of abode with a person of suitable age and
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STA	ATEMENT OF SERVICE FEES
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ď	DECLARATION OF SERVER
contained in the Return of Service and Statement of Executed on $\frac{10/05/2007}{}$	the laws of the United States of America that the foregoing information f Service Fees is true and correct.
CERTIFIED MAIL FIED Only: No Insurance Cool of weeking afformation visit our weeking a	Wee de Provided)
Postage \$ 4.60  Service Fee 2.65  Return Recorpt Fee (Endorsement Required)  Restricted Delivery F. 9 (Endorsement Required)	SOVER. IDANIO OS 2007
	57 Namie St.

UNITED STATES DISTRICT COURT					
EASTER	N D	strict of	WASHINGTON		
Michael Enga	ne Swensm	SU	MMONS IN A CIVIL CASE		
Michael Euge v. United States e-	of America,	CASE NUMBER:			
		CV.	-07-305-EFS		
TO: (Name and ad					
Defor	dants all.				
			S ATTORNEY (name and address)		
P.O. B	) Swenson ox 129 -, 10 83825	<u>-</u>			
Dove	-, 10 620	·			
Jou, exclusive o	i ine day of service. If you nt. Any answer that you ser	fail to do as indemin	nt by default will be taken against you for action must be filed with the Clerk of this		
James R. La	arsen		00T 0 0 229/		
STEVIE J.	PERRY	DATE			

vil Action			
RE	TURN OF SERVIC	CIE	
laint was made by me <sup>(1)</sup>	TE Oct 05	(200)	<u> </u>
	TLE	<del>/                                    </del>	
ppropriate method of service			
the defendant. Place where	<u></u>		
herein.	· .	e with a person of suital	ole age and
nom the summons and compl	aint were		
rtified USI	noil/Restru	rn Receipt	
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Service and Statement of Scr	vice Fees is true and co		regoing information
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2.65 2.65 8.15 601 8 9.40 2 5 15	OCT 05 007		
	laint was made by me"  It is a service the defendant. Place where therein.  Inom the summons and complete therein.  STATE  SERVICES  DECI  Constitution visit of perjury under the last service and Statement of Service and Ser	RETURN OF SERVICE  Islaint was made by me <sup>(1)</sup> DATE  OCT 0:5  TITLE  US on  Uppropriate method of service  the defendant. Place where  e defendant's dwelling house or usual place of abod therein.  How the summons and complaint were  STATEMENT OF SERVICE  SERVICES  DECLARATION OF SERVICE  Service and Statement of Service Fees is true and complaint of Service and Statement of Service Fees is true and complaint of Service fees is true and complaint of Service fees in the United Statement of Service fees in true and complaint of Service fees in true and complai	RETURN OF SERVICE  DATE Oct 05, 2007  TITLE  WS-m  Uppropriate method of service  the defendant. Place where  e defendant's dwelling house or usual place of abode with a person of suitable therein.  How the summons and complaint were  STATEMENT OF SERVICE FEES  SERVICES  DECLARATION OF SERVER  enalty of perjury under the laws of the United States of America that the for Service and Statement of Service Fees is true and correct.    2007

	UNITED STATE	22 DIZIKICI (	JOURI
EASTER	N D	istrict of	WASHINGTON
Michael Euge V. United States	ne Swenson	SUM	IMONS IN A CIVIL CASE
United States	of America,	CASE NUMBER:	
	ļ	CV-	07-305-EFS
TO: (Name and a	l		
Defo	dants all.		
		o serve on PLAINTIFF'S	S ATTORNEY (name and address)
M:che	Swenson		
P.O. E	l Swenson ox 129 r, 10 8382	.5 ·	•
this summons on you, exclusive	of the day of service. If y aint. Any answer that you	ou fail to do so, judgmo	nine 1 (90) days after service of ent by default will be taken against you for is action must be filed with the Clerk of this
James R.			OCT 0 0 2097
STEVIE	J. PERRY	DATE	
Designation of RDA		_	

SAU 440 (Rev. 8/01) Summons in a Civil Action
RETURN OF SERVICE
Service of the Summons and complaint was made by me <sup>(1)</sup> DATE  DC + 0.5, 2007
NAME OF SERVER (PRINT) Swenson
Check one box below to indicate appropriate method of service
☐ Served personally upon the defendant. Place where
Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.
Name of person with whom the summons and complaint were
□ Returned
Other (specify): Cartified US Mail/Resturn Receipt
STATEMENT OF SERVICE FEES
TRAVEL SERVICES TOTAL
DECLARATION OF SERVER
I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.  Executed on 10/05/2007 Signature of Server
Q.O. Box 129 Down, ID 83825  OFFICE OF THE PERSONS  CERTIFIED AT PERSONS  CONTRACTOR OF THE PERSONS  T.Z. T.
Total Pastage & Fses \$ 9.40
Street, Apt. No., 279 Brow Mol Way  City, State, ZiP+4  PS Form 3800, August 2046  See Reverse for Institutions

EASTE	RN	District of	WASHINGTON
Michael Eu	gene Swensm v.		SUMMONS IN A CIVIL CASE
United State	etal.	CASE NU	MBBR: _V-07-305-EFS
		. (	_V -0 1- 305 - EF3
TO: (Name and	address of Dokadest)		
Def	m dants all.		
VOT ATE STREET			
	h.		VITIFF'S ATTORNEY (name and address)
M:cha	el Swenson		
P.O. Don	el Swenson Box 129 cr, 10 8382	.5	
an answer to the complaint wh	ich is served on you with thi	s summons, with	nin_nine+v(90) days after service of
semmions our you' exclusion	4 Of the day of service. If v	ou fail to do eo	judgment by default will be taken against you for es to this action must be filed with the Clerk of this
Court within a reasonable period	of time after service.	The one was present	es to this section minst be then will the clear of this
James R.			00T 0 0 229/
STEVIE	J. PERRY	DATE	
A GOS IN ALL MAN			

€AU 440 (	Rev. 8/01) Summons in a Civil Action		
		RETURN OF SERVICE	
Service o	of the Summons and complaint was made by me <sup>(1)</sup>	DATE Oct 05.200	7
	erver (PRINT) (Ichae) Swenson	TITLE	-
Check o	ne box below to indicate appropriate method of ser	rrice	
٥	Served personally upon the defendant. Place wh		
_	Left copies thereof at the defendant's dwelling he discretion then residing therein.  Name of person with whom the summons and co	•	on of suitable age and
	Returned		
287	Other (specify): Cortified US	5 Mail/Resturn Re	cerpot
	STA	ATEMENT OF SERVICE FEES	
TRAVEL	SERVICES		TOTAL
		ECLARATION OF SERVER	
	I declare under penalty of perjury under the ontained in the Return of Service and Statement of Executed on $\frac{10/05/2007}{Date}$		
	U.S. Postat Service	9.0.1800 129 Done	r, 10 83825
	Example of the Contract of the	EIPT Vérage Provided) Mariuspaconia	
	Fostage \$ 4.60	Postrack Postrack	
	(Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees \$ 9,40	05 2007 83825	
	Sinset Apt. No.: 1095 Av & Am		
	City, State, ZIP+4 NY, NY (5036)	(4.4	

PS Form 3800. August 2006 See Reverse for Instructions

	CHIED SIAL	וו מועד מיד	der cooki
EASTE	RN I	District of	WASHINGTON
Michael English Warted States	une Swenson		SUMMONS IN A CIVIL CASE
United State	of America,	CASE NIL	MBER:
		. (	CV-07-305-EFS
TO: (Name and a	diens of Defendant)		
Defo	ndants all.		
	1.		VTIFF'S ATTORNEY (name: and address)
M:chae	l Swenson		
P.O. B Dove	l Swenson ox 129 r, 10 83823	5	
	tint. Any answer that you se		in nine ty (90) days after service of judgment by default will be taken against you for as to this action must be filed with the Clerk of this
James R. L	arsen		OCT 0 3 2097
STEVIE J	. PERRY	DATE	

AO 440 (Rev. 8/01) Summons in a Civil Action	
RETURN OF SERVICE	
Service of the Summons and complaint was made by me <sup>(1)</sup>	2007
NAME OF SERVER (PRINT) Swenson TITLE	
Check one box below to indicate appropriate method of service	
Served personally upon the defendant. Place where	
☐ Left copies thereof at the defendant's dwelling house or usual place of abode w discretion then residing therein.	rith a person of suitable age and
Name of person with whom the summons and complaint were	
□ Returned	
18 Other (specify): Cartified U.S Mail/Restur	2 Receipt
STATEMENT OF SERVICE FE	ES
TRAVEL SERVICES	TOTAL
DECLARATION OF SERVER	R
I declare under penalty of perjury under the laws of the United States of contained in the Return of Service and Statement of Service Fees is true and correct Executed on 10/05/2007    Date   Signature of Server   Signature of Server	
Address of Section 129  Address of Section 129  Address of Section 129  Extended Fee Central Required Pee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees 9.40 05  Sept To Book Mar 207 Charles St. No. 207 Charles St. Reverse Mc. Instructions:	Doner, 1D 83825

EASTER	N	District of	WASHINGTON
Michael Engr	ne Swensn	S	SUMMONS IN A CIVIL CASE
Michael Engr V. United States e	of America,	CASE NUMBI	
		C	1-07-305-EFS
TO: (Name and ad	ross of Defeadent)		
Defen	dants all.		
YOU ARE HEREBY S	MMONED and required to	serve on PLAINTIF	F'S ATTORNEY (name and address)
	•		
P.O. B.	l Swenson ox 129 r, 10 8382	5	
	nt. Any answer that you se		nine ty (90) days after service of ment by default will be taken against you for this action must be filed with the Clerk of this
James R. La	arsen		<b>0</b> 0T 0 0 2297
STEVIE J.	PERRY	DATE	

RETURN OF SERVICE
DATE
f the Summons and complaint was made by me <sup>(1)</sup>
(Chae) Swenson
ne box below to indicate appropriate method of service
Served personally upon the defendant. Place where
Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.
Name of person with whom the summons and complaint were  Returned
Other (specify): Cartified US Mail/Return Receipt
STATEMENT OF SERVICE FEES
SERVICES TOTAL
DECLARATION OF SERVER
executed on
Address of Server  Cossage of GO  Control fee  Control fe

UNITED STATES DISTRICT COURT
Michael Eugene District of Idaho
SUMMONS IN A CIVIL ACTION V.
United States Gart, et al. CASE NUMBER:
TO: (Name and address of Defendant)
Brian Koch of Sandpoint Police Department, 1123 Lake St. Sandpoint, ID 83864 208-265-1482
YOU ARE HEREBY SUMMONED and required to serve on PLAINTIFF'S ATTORNEY (name and address)
Michael Sweuson P-0B0x 129
Daver, 10 83825
an answer to the complaint which is served on you with this summons, within days after service of this summons on you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. Any answer that you serve on the parties to this action must be filed with the Clerk of this Court within a reasonable period of time after service.

DATE

(By) DEPUTY CLERK

CLERK

Michael Eugene Swenson	District of Idaho
v. United States Gart, et	SUMMONS IN A CIVIL ACTION  (a).  CASE NUMBER:
TO: (Name and address of Defendant)	
Dr. Scott Burgstanier, 207 Church S	St., Sandpoint, ID 83864 208-263-6876
	ired to serve on PLAINTIFF'S ATTORNEY (name and address)
Michael Sweuson P.OBOD 129 Dover, 10 83825	
Daver, 10 83825	
of this summons on you, exclusive of the day of service	th this summons, within ————————————————————————————————————
CLERK	DATE
(By) DEPUTY CLERK	

#### RETURN TO CLERK USDC P.O. BOX 1493

FILED IN THE U.S. DISTRICT COURT ASHINGTON

SPOKANE, WA 99210

#### UNITED STATES DISTRICT COURT

OCT 18 2007

EASTERN	District of	WASHINGTONSEN, CLERK
		SPOKANE, WASHINGTON
Michael Eugene Swenson v.		SUMMONS IN A CIVIL CASE
United States of America, et al.	CASE N	IMBER: CV-07-305-EFS

TO: (Name and address of Defendant)

Defendants all.

Dr. Michael Cruz, 217 W Cataldo Av, Spokane, WA 99210 509-624-2326

YOU ARE HEREBY SUMMONED and required to serve on PLAINTIFF'S ATTORNEY (name and address)

Michael Swenson P.O. Box 129 Dover, 10 83825

ninety (90) days after service of an answer to the complaint which is served on you with this summons, within this summons on you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. Any answer that you serve on the parties to this action must be filed with the Clerk of this Court within a reasonable period of time after service.

DATE

Lillies R. Laren

OCT 0 9 2007

CLERK

(By) DEPUTY CLERK

**ORIGINAL** 

		RETURN OF SERVICE	
Service of	of the Summons and complaint was made by me <sup>(1)</sup>	DATE	<del>-</del>
	SERVER (PRINT)	70/16/07	
Chack	colleen Casey one box below to indicate appropriate method of ser		
Æ	Served personally upon the defendant. Place wh		4 217 W.
	Cataldo, Spokane, WA 9921	0	
	Left copies thereof at the defendant's dwelling he discretion then residing therein.	ouse or usual place of abode with a person of suita	ble age and
	Name of person with whom the summons and co	omplaint were	_ <u></u>
	Returned		
	Other (specify):	<del></del>	
	STA	ATEMENT OF SERVICE FEES	
AVEL	SERVICES 4	40.00	10TAL \$40.00
		ECLARATION OF SERVER	7-10/100
-	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Cell G	
F	<u>6</u>	201 W. Main, 203 A, Spokane, WA.	9920]
F	Date Sig	Ol W. Main, 203A, Spokane, WA	<u>9920 </u>
F	Date Sig	Ol W. Main, 203A, Spokane, WA	<u>9920 </u>
F	Date Sig	Ol W. Main, 203A, Spokane, WA	<u>9920 </u>
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F	Date Sig	Ol W. Main, 203A, Spokane, WA	<u>9920 </u>
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F	Date Sig	Ol W. Main, 203A, Spokane, WA	99201
F	Date Sig	Ol W. Main, 203A, Spokane, WA	99201
F	Date Sig	Ol W. Main, 203A, Spokane, WA	9920]

<b>⊗</b> A(	2 440	(Rev.	8/011	Summons	in s	a Civil	Action

_	RETURN OF SERVICE				
Service of t	DATE				
NAME OF SER	70/18/87				
	Collect Casey Process Server				
Check one	box below to indicate appropriate rethod of service				
<b>≠</b> \$	Houk Rd., Stc. A, Spokane, WA  1				
d	☐ Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.				
r	ame of person with whom the summons and complaint were				
□ F	eturned				
_					
	ther (specify):				
_					
	STATEMENT OF SERVICE FEES				
TRAVEL	SERVICES TOTAL \$ 40.00				
	DECLARATION OF SERVER				
	I declare under penalty of perjury under the laws of the United States of America that the foregoing information tined in the Return of Service and Statement of Service Fees is true and correct.  Signature of Server  A Control of America that the foregoing information tined in the Return of Service Fees is true and correct.  Signature of Server				
	601 W. Main, 203A, Spokene, WA 99201  Address of Server				
	Wrong				

#### RETURN TO CLERK USDC P.O. BOX 1493

FILED IN THE U.S. DISTRICT COURT EASTERN DISTRICT OF WASHINGTON

WASHIN LARSEN, CLERK

SPOKANE, WA 99210

#### OCT 18 2007 UNITED STATES DISTRICT COURT

EASTERN	District of	WASHINGTON DEBUTY
Michael Engene Swenson V.		SPOKANE WASHINGTON SUMMONS IN A CIVIL CASE
United States of America, et al.	CASE N	IMBER: CV-07-305-EFS
TO: (Name and address of Defendant)		
Defendants al Dr. Frank Joy, 1415 N Houk Rd Ste A		Jones Joy! 99210 509-924-1990 So o certa had
YOU ARE HEREBY SUMMONED and requir	red to serve on PLA	INTIFF'S ATTORNEY (parme and address)
Michael Swenson P.O. Box 129 Dover, 10 839	325	
an answer to the complaint which is served on you wi this summons on you, exclusive of the day of service. the relief demanded in the complaint. Any answer that Court within a reasonable period of time after service.	If you fail to do s	o, judgment by default will be taken against you for
James R. Larson		OCT 0 9 2007
CLERK / / / /	DATE	
(By) DEPUTY CLERK		ORIGINAL

AO 440 (Rev. 8/01) Summons in a Civil Action
RETURN OF SERVICE
Service of the Summons and complaint was made by me" DATE / U ~ 18 -07
AME OF SERVER (PRINT)  TITLE Plant of
Check one box below to indicate appropriate method of service
☐ Served personally upon the defendant. Place where
Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.  Name of person with whom the summons and complaint were  Lante Ragan for lands Joy
Returned
Other (specify): Jamie Ragan at Deacaness Modball (enter at 4:15 p.m. 805 w 5th Ar Spokens
STATEMENT OF SERVICE FEES
AVEL SERVICES TOTAL
DECLARATION OF SERVER
I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.  Executed on     C -   C - D -
Box 129 Dover, 10 83825
Correct

CLERK

(By) DEPUTY CLERK

(By) DEPUTY CLERK

James R. Larson

DATE

**ORIGINAL** 

OCT 0 9 2007

AO 440 (Rev. 8/01) Summons in a Civil Action		
	RETURN OF SERVICE	
Service of the Summons and complaint was made by me'	DATE /0/15/07	
NAME OF SERVER (PRINT) Colleen Casey	Process Server	
Check one box below to indicate appropriate method of ser	vice	
☐ Served personally upon the defendant. Place who	ere	
<ul> <li>Left copies thereof at the defendant's dwelling he discretion then residing therein.</li> </ul>	ouse or usual place of abode with a person of suitable	e age and
Name of person with whom the summons and co	omplaint were	
☐ Returned		
Other (specify): <u>Served Carrer</u> with Lorales Laranic of	Care Northwest by leaving Give manager at 12615 E. Mi	paperwork.
Valley, WA		
STA	TEMENT OF SERVICE FEES	
TRAVEL SERVICES サイク	. <del> </del>	TOTAL <b>\$40.00</b>
	ECLARATION OF SERVER	<u> </u>
G	consture of Server  OI W. Main St., Sk. 703 A, Spelea	ne, WA 99701

### RETURN TO CLERK USDC

P.O. BOX 1493

# SPOKANE, WA 99210 STATES DISTRICT COURT

OCT 1 8 2007

UNITED ST	AIES DIST	MCI COOKI	001 10 2001
EASTERN	District of	WASH	ri Frik Lis District Court It hokane mashington
Michael Engene Swenson V.		SUMMONS IN A	CIVIL CASE
United States of America, et al.	CASE N	имвек: CV - 07-30	5-EFS
TO: (Name and address of Defendant)  Defendants a	U.		
Dr. William Corell, 3424 S Grand Av	, Spokane, WA 99	2210 509-838-5800	
YOU ARE HEREBY SUMMONED and req	uired to serve on PLA	AINTIFF'S ATTORNEY	(name and address)
Michael Swenson P.O. Box 129 Dover, 10 83	n 825		
an answer to the complaint which is served on you this summons on you, exclusive of the day of service the relief demanded in the complaint. Any answer the Court within a reasonable period of time after services	e. If you fail to do at you serve on the p	so, judgment by default	-
iames R. Larse:		OCT 0 9	2007

CLERK

Itario d' Resign (No) DEPUTY CI ERK

DATE

**ORIGINAL** 

<u>.</u>		RETURN OF SERVICE	
ervice of the Summons a	and complaint was made by me <sup>(1)</sup>	DATE	
ME OF SERVER (PRINT)		TITLE	
	Jason Wilson		
<u>Check one box below to i</u>	ndicate appropriate method of ser	vice	
	lly upon the defendant. Place who	Dr. William Con	rell at .3424 s.
	reof at the defendant's dwelling horesiding therein.	ouse or usual place of abode with a person	of suitable age and
Name of persor	with whom the summons and co	mplaint were	
☐ Returned			
☐ Other (specify)	:		
	STA	TEMENT OF SERVICE FEES	
	SERVICES	\$40.00	TOTAL
AVEL	,	470,00	1 940.0D
I declare	D	ECLARATION OF SERVER ne laws of the United States of America th	TOTAL \$40.00
I declare	under penalty of perjury under the	ne laws of the United States of America the Service Fees is true and correct.	
I declare	under penalty of perjury under the	ECLARATION OF SERVER ne laws of the United States of America th	
I declare	under penalty of perjury under the eturn of Service and Statement of Solution Date Sig	ne laws of the United States of America the Service Fees is true and correct.	nat the foregoing information
I declare	under penalty of perjury under the eturn of Service and Statement of Solution Date Sig	e laws of the United States of America the Service Fees is true and correct.  In full formature of perver	nat the foregoing information
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I declare	under penalty of perjury under the eturn of Service and Statement of Solution Date Sig	e laws of the United States of America the Service Fees is true and correct.  In full formature of perver	nat the foregoing information
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I declare	under penalty of perjury under the eturn of Service and Statement of Solution Date Sig	e laws of the United States of America the Service Fees is true and correct.  In full formature of perver	nat the foregoing information
I declare	under penalty of perjury under the eturn of Service and Statement of Solution Date Sig	e laws of the United States of America the Service Fees is true and correct.  In full formature of perver	nat the foregoing information
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I declare	under penalty of perjury under the eturn of Service and Statement of Solution Date Sig	e laws of the United States of America the Service Fees is true and correct.  In full formature of perver	nat the foregoing information
I declare	under penalty of perjury under the eturn of Service and Statement of Solution Date Sig	e laws of the United States of America the Service Fees is true and correct.  In full formature of perver	nat the foregoing information

### RETURN TO CLERK USDC

P.O. BOX 1493

SPOKANE, WA 99210

### UNITED STATES DISTRICT COURT

OCT 18 2007

SPOKANE, WASHINGTON

EASTERN

District of

WASHINGTON

SUMMONS IN A CIVIL CASE

Michael Eugene Swenson V. United States of America, et al.

CASE NUMBER:

CV-07-305-EFS

TO: (Name and address of Defendant)

Deaconess Medical Center, 800 W. Fifth Av., Spokane, WA 99204 509-458-5800 and owned Johnson-Roundtree Collection Agency, 711 E. 3<sup>rd</sup> Av, P.O. Box 264, Spokane, WA 99210-0264 800-729-8111 or 509-473-4260 fax 509-473-4262

YOU ARE HEREBY SUMMONED and required to serve on PLAINTIFF'S ATTORNEY (name and address)

Michael Swenson P.O. Box 129 Dover, 10 83825

an answer to the complaint which is served on you with this summons, within \_\_nine+y(90) days after service of this summons on you, exclusive of the day of service. If you fail to do so, judgment by default will be taken against you for the relief demanded in the complaint. Any answer that you serve on the parties to this action must be filed with the Clerk of this Court within a reasonable period of time after service.

iemes R. Larso

OCT 0 9 2007

CLERK

(By) DEPUTY CLERK

DATE

ORIGINAL

Served personally upon the defendant. Place where					
Served personally upon the defendant. Place where   Served personally upon the defendant. Place where   Served personally upon the defendant. Place where   Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.    Name of person with whom the summons and complaint were   Returned			RETURN OF SERVICE		
Served personally upon the defendant. Place where	Service of the Summons an	nd complaint was made by me(1)	DATE 10/16/07		
Served personally upon the defendant. Place where   Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.   Name of person with whom the summons and complaint were   Returned   Returned   Served Deaconess Medical Center (800 to 5th two., Spokene what by leaving with Robert Wamsley	ME OF SERVER (PRINT)	Callana Carry			
Served personally upon the defendant. Place where   Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.   Name of person with whom the summons and complaint were   Returned   Returned   Served Dearconess Medical Center (800 w 5th ive., Spokane who by leaving with Robert Wamsley   STATEMENT OF SERVICE FEES				<del></del>	
Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.    Name of person with whom the summons and complaint were	CHECK ONE DOX DEIDW 10 IN	arcuse appropriate memou of ser	мсе		
discretion then residing therein.  Name of person with whom the summons and complaint were    Returned	□ Served personal!	ly upon the defendant. Place wh			
discretion then residing therein.  Name of person with whom the summons and complaint were    Returned			<del></del> _		
Name of person with whom the summons and complaint were    Returned		_	ouse or usual place of abode with a p	person of suitable age and	
Other (specify): Served Dear one 55 Medical Center (800 W 5th Ive., Spokane WA)  by leaving with Robert Wamsley  STATEMENT OF SERVICE FEES  VEL — SERVICES \$40.00 TOTAL \$40.00  DECLARATION OF SERVER  I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.  Executed on 10/15/07  Date Signature of Server		_			
Other (specify): Served Dear one 55 Medical Center (800 W 5th Inc., Spokane WA)  by leaving with Robert Wartsley  STATEMENT OF SERVICE FEES  VEL SERVICES \$40.00 TOTAL \$40.00  DECLARATION OF SERVER  I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.  Executed on 10/15/07  Date Signature of Server	Name of person	with whom the summons and co	omplaint were		
SERVICES \$40.00 TOTAL \$40.00  DECLARATION OF SERVER  I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.  Executed on 10/15/07  Date Signature of Server  GOLW. Maio, 203 A. Sookane, WA 9920	□ Returned				
SERVICES \$40.00 TOTAL \$40.00  DECLARATION OF SERVER  I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.  Executed on 10/15/07  Date Signature of Server  GOLW. Maio, 203 A. Sookane, WA 9920					
SERVICES \$40.00 TOTAL \$40.00  DECLARATION OF SERVER  I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.  Executed on 10/15/07  Date Signature of Server  GOLW. Maio, 203 A. Sookane, WA 9920					
SERVICES \$40.00 TOTAL \$40.00  DECLARATION OF SERVER  I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.  Executed on 10/15/07  Date Signature of Server  GOLW. Maio, 203 A. Sookane, WA 9920	Other (specify):	Served Dearones	<u>55 Midical (enler (80</u> mslev	10 W 5th live., Spokane WA	}
DECLARATION OF SERVER  I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.  Executed on 10/15/07  Date Signature of Server  GOLW. Main, 203 A. Spokane, WA 99201	- y reaving	3 444 1000			
DECLARATION OF SERVER  I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.  Executed on 10/15/07  Date Signature of Server  GOLW. Main, 203 A. Spokane, WA 99201			TEMENT OF SERVICE FEES		
I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.  Executed on	AVEL	CEDVICES			
I declare under penalty of perjury under the laws of the United States of America that the foregoing information contained in the Return of Service and Statement of Service Fees is true and correct.  Executed on				<u> </u>	
GOIW. Main, 203 A, Spokane, WA 99201  Address of Server	Executed on _/O	/15/07 Date Sig	gnature of Server	<del></del>	
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AO 440 (Rev. 8/01) Summons		RETURN OF SERVICE	
Service of the Summers and	complaint was made by me <sup>(1)</sup>	DATE O + SEC 2	
NAME OF SERVER (PRINT)	Complaint was made by me.	TITLE	00/
Michael &	wenson		
Check one box below to indi	cate appropriate method of ser	rice	
☐ Served personally	upon the defendant. Place who		
☐ Left copies thereof		use or usual place of abode with a	person of suitable age and
Name of person w	ith whom the summons and con	nplaint were	
□ Returned			
Other (specify):	Contified US	Moil/Return	Receipt
	STA	TEMENT OF SERVICE FEES	
RAVEL	SERVICES	,	TOTAL
		CLARATION OF SERVER	
Executed on		ance of Server	
	. —	0.120	400-
		PLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
U.S. Post CERTII		3 1, 2, and 3. Also complete ted Delivery is desired.	A. Signature
(Domestic V	al Only: I. Print your name so that we can	and address on the reverse return the card to you.	B. Heperved by (Printed Name) C. Date of Deliv
To delivery		I to the back of the mailpiece, f space permits.	D. Is delivery address different from item 1?   Yes
M Canada	stage 8 1. Article Addressed		If YES, enter delivery address below:
Return Recei	pt Fee 207	takler Curch St not, 10	
(Endorsement Rec	<b>.</b>	8386A 8386A	3. Service Type  XI Certified Mail
Ci Sent To	rashda		☐ Insured Mail ☐ C.O.D.  4. Restricted Delivery? (Extra Fee) ☐ Yes
Street, Apr. No.: or PO Bax No.	2 Article Number	vice labell 7007 0220	37 Mrs
City, State, ZIP.	PS Form 3811, F	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Return Receipt 102595-0
P3 Form 3800.	1 or a cost 2006 - N		
1) AS IO WIN May serve a sum			

	mons in a Civil Action			
	]	RETURN OF SERVICE		
	s and complaint was made by me <sup>(1)</sup>	Date Oct 05,2	2007	
NAME OF SERVER (PRINT		TITLE	•	
	indicate appropriate method of serv	vice		
☐ Served person	nally upon the defendant. Place who	же		
	ereof at the defendant's dwelling ho n residing therein.	use or usual place of abode with	h a person of suitable age and	
Name of pers	on with whom the summons and cor	mplaint were		
Tother (specify	a Contified US	Mail/Return	Receipt	
RAVEL	STA*	TEMENT OF SERVICE FEE	TOTAL	
NVEL	SERVICES			
	DI	CLARATION OF SERVER	•	
Executed on	0/05/2007 Sign	ature of Server		
	SENDER: COMPLE	TE THIS SECTION	COMPLETE THIS SECTION ON DE	EUVEDV
CEF (Dome	Complete items 1, item 4 if Restricted Print your name ar	2, and 3. Also complete d Delivery is desired. and address on the reverse	A Signature X R Territo	☐ Agent
T	Attach this card to or on the front if sp	<del></del>	B. Received by (Printed Name) TERRITO D. Is delivery address different from in	C. Date of Deliver
352	Postage 1. Article Addressed to:		If YES, enter delivery address bea	ow: 🛮 No
	Cartifled See Uuton in Peocept Fee ent Required) in Delivery Fee erri Stequired) it delivery Fee erri Stequired)	of America		
反	stage & Fees / NY, NY	10036	S. Selfic 1979  Consoling 2 Second 1  Provided 1979  Elicate (1981)	Morchandise
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or PO Box		label 7007 0220	9004 3524 4264	
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PS Form 3	PS Form 3811, Febru	zry 2004 Domestic Re	turn Receipt	

►AO 440 (Rev. 8/01) Summ	ons in a Civil Action	·
	RETURN OF S	ERVICE
Service of the Summons	and complaint was made by me <sup>0</sup> ) DATE	05,2007
NAME OF SERVER (PRINT)	Swenson	
Check one box below to	ndicate appropriate method of service	
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discretion then	reof at the defendant's dwelling house or usual place residing therein.  with whom the summons and complaint were	of abode with a person of suitable age and
□ Returned		
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	STATEMENT OF SEL	RVICE FEES
TRAVEL	SERVICES	TOTAL
	DECLARATION O	FSERVER
	tunder penalty of perjury under the laws of the Unite turn of Service and Statement of Service Fees is true	
	Date Signature of Server	
CE (Dor	SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also consisted Mail  Print your name and address on the so that we can return the card to you attach this card to the back of the mor on the front if space permits.	A Signature  d. reverse  J. B. Becelved by (Printed Memo)  C. Date of Definer
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Street, An	10. 27 2. Article Number	4. Restricted Delivery? (Extra Fee)
Chy, State	1 = f 2. AMCIA NUMBAR	D220 0004 3524 427  Domestic Return Receipt 102595-02-84-1549
3-3-100 m	O I GITT OO I I, I GOTTAN Y 2004	Defined to the transfer to the

	nons in a Civil Action	
<del></del>	RETURN OF SERVICE	
	and complaint was made by me <sup>(1)</sup>	2007
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	meof at the defendant's dwelling house or usual place of abode wiresiding therein.	ith a person of suitable age and
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☐ Returned		
2 Other (specify	Cartified US Mail / Resturn	Receipt
	STATEMENT OF SERVICE FEE	
AVEL	SERVICES SERVICE FEE	TOTAL
	DECLARATION OF SERVER	
	DECLARATION OF SERVER	
Executed on	/05/2007 Signature of Server	
CEF	SENDER: COMPLETE THIS SECTION  Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.	A. Signature  X. D. B. Agent  Addresse  B. Received by (Printed Name)  C. Date of Deliver
<u> </u>	Attach this card to the back of the mailpiece, or on the front if space permits.	D. BiRA 10/9/7
7. T.	A Address of the	D. Is delivery address different from item 1? The Yes If YES, enter delivery address below:
m (	Soul point linguit Col	·
	Fisceint Fee m Required) 302 5 (st	/
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Street, Apr.		
Street, Apr. or PO Box N	2. Article Number	0 0004 7574 4757
Street, Apt. or PO Box I.	2. Article Number (Transfer from service label) 7007 027	0 0004 3524 4257 Return Receipt 102595-02-M-18

AO 440 (Rev. 8/01) Summ	nons in a Civil Action					
	<u> </u>	RETURN OF SE	RVICE			
	and complaint was made by me <sup>(1)</sup>	DATE Oct	05,20	100)		
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	m Receipt Fee nent Required) and Delivery Francis Required	Pennsylvania	<b>4</b> [		80 3	
다. Total Po	Carrol, 1	Pennsylvana N 46032		3. Service Type  Certification  Residence	Mail ○□ Express Mi d □ Report Rec	ail eipt for Merchand
Sala				4. Restricted D	lali □ ÇZZ.D. elivery? (EXT Fee)	
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<b>(25</b>	Other (specify	: Cortified U	5 Mail / Restur	Receipt	<u></u>
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AO 440 (Rev. 8/01) Summons in a Civil Action	
	RETURN OF SERVICE
Service of the Summons and complaint was made by me <sup>(1)</sup>	/0115 10 1
NAME OF SERVER (PRINT) Colleen Cases	Process Server
Check one box below to indicate appropriate method of se	
☐ Served personally upon the defendant. Place wh	here
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□ Returned	· ·
- Valley, wie	Care Northwest by leaving paperwork.  Mice manager at 12615 E. Mission, Spokane.  ATEMENT OF SERVICE FEES
TRAVEL SERVICES	ATEMENT OF SERVICE FEES  TOTAL
	5.00 \$40.00
	the laws of the United States of America that the foregoing information
contained in the Return of Service and Statement of  Executed on	
<u>G</u> Adi	601 W. Main St., Ske. 703 A, Spokane, WA 99701  ddress of Server
•	

10 (1)	wvi/ sunin	ions in a Civil Action	RETURN OF SERVICE		
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	cuted on	sum of Service and Statement of S $\sqrt{\Delta \xi / 2 \Delta D T}$	ervice Fees is true and correct.		 >
	, dive on	Date Sign	nature of Server	:	
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	<b>=</b>	or on the front if s	· _ ·	D. is delivery addre	ss different from item 1?  Yes
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	# ₩_	Certified Fee	Chaffrul and		
	(Endorsen	n Receipt Fee 80   (	5th Ste 504		
	Ξ.	Delivery Fee ers Required) Spokerne, tage & Fees	WA 99210	3. Service Type  Conflict Mail	Figure Receipt for Merchands
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	Street, Ant. or PO Box	w. Qn	1800 7007 OUTO 900	4 3624 4	
	City, State.	Speci PS Form 3811, Febr		eturn Receipt	102595-02-M-15
	PS Form 38	PO 1210 201 500	to Reverse for learning to the	-	

(1) As to who may serve a summons see Rule 4 of the Federal Rules of Civil Process.

Plaintiff: Michael Swenson P.O. Box 129 Dover, ID 83825 393 Flamingo Rd. Sandpoint, ID 83864 208-265-8762

**DEFENDANT:** Dr. Timothy Chestnut, 801 W 5<sup>th</sup> Ste 504, Spokane, WA 99210 509-625-1915 (last known address "no longer practicing; left no forwarding address" 10-15-2007 per receptionist)

Dr. Timothy Chestnut C/O Spokane County Medical Society, 104 S Freya St., Orange Flag Bldg. Ste. 114, Spokane, WA 99202 (509) 325-5010 (leave with them, they have his current contact information!)

AO 440 (Rev. 8/01) Summ	ons in a Civil Action			
	1	RETURN OF SERVICE		
Service of the Summons	and complaint was made by men	DATE Oct 05,2	00)	
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Check one box below to	indicate appropriate method of serv	rice		
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(Endorsement Requ CII Tu Total Postage & F		A 98504-0100	3. Service Type 985(14.	Receipt for Merchandi
Seen To VR	Store		Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fed	
Steet, Apr. No.: 6 or PO Box No. 6 City, State, ZIPM	2. Article Number	1007 0226 DOO		
PS form 5800 Aug	707			102585-02-M-1
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NAU 440 (Rev. 8/01) Sum	mons in a Civil Action	•
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RAVEL	STATEMENT OF SER	TOTAL
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<b>-</b>	30 till ito out i totalis	D. is delivery address different from item 1? 🗆 Yes
ய ் <u>செழுந்</u> பு பு	1. Article Addressed to:	If YES, enter delivery address below: No
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(Endorsement Requirement Requi	Spokene, WA 99210	3. Service Type  GP Centitled Mail
Street, Apt. No.: or PO Box No.	<u>لميل</u> 2.11 —————	4. Flestricted Delivery? (Extra Fee)   Yes
City. State, ZIP+4		0220 0804 3524 41 65
.PS Förm 3500. Au	PS Form 3811, February 2004	Domestic Return Receipt

<b>SAO 440</b> (Rev. 8/01) Summons in	a Civil Action	
		RETURN OF SERVICE
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Col Check one box below to indica	leen Casey	Process Server
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	<u>Le</u>	201 W. Main, 203 A, Spokane, WA 9920/

(2401) 0401)	ons in a Civil Action	
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_ C _ C _ C _ C _ C _ C _ C _ C _ C _ C	Total Postage  Servet To  Served persona  Left copies the discretion then Name of person  Returned  Other (specify)  I declare in the Returned	RETURN OF SERVICE of the Summons and complaint was made by men  [EAVER PRINT] SEVEN SERVICE  ITTLE  ITTLE  Left copies the cof at the defendant. Place where  Left copies the cof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.  Name of person with whom the summons and complaint were  Returned  Other (specify):  SERVICES  SERVICES  TOTAL  DECLARATION OF SERVICE FEES  SERVICES  TOTAL  DECLARATION OF SERVER  I declare under penalty of perjury under the laws of the United States of America that the foregoing information entained in the Return of Service and Statement of Service Fees is true and correct.  Signulare of Server  U.S. POSIA! Serv.  SENDER: COMPLETE THIS SECTION  COMPLETE THIS SECTION ON DELIVERY  COMPLETE THIS SECTION ON DELIVERY  COMPLETE THIS SECTION ON DELIVERY  A Significant Complete to the back of the malipiece, or on the front if apace permits.  Total Postages by (Printed Julia)  Lattach this coard to the back of the malipiece, or on the front if apace permits.  Total Postages Fees S  Service Tipe Tipe Section Only In the Complete Tipe Section On the front if apace permits.  Total Postages Fees S  Service Tipe Tipe Section Only In the Complete Tipe Section On the front if apace permits.  Total Postages Fees S  Service Tipe Tipe Section Only In the Complete Tipe Section On the front of apace permits.  Total Postages Fees S  Service Tipe Tipe Section Only In the Section Only In the Complete Tipe Section Only In the Complete

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/EL	SERVICES \$	40.00	TOTAL \$ 40.00
		CLARATION OF SERVER	
	DE		
Executed on	7	ature of Server	

GOI W. Main St., 203A, Spokane, WA 99201

Address of Server

<b>≪</b> ∆0 440 (}	Cev. 8/01) Summ	ons in a Civil Action	·	· ·
<u> </u>		· <u></u>	RETURN OF SERVICE	
		and complaint was made by me		2007
	RVER (PRINT)	Swenson	TITLE	
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07 0220	(Endorsement Requirement Total Postage & Sent To Street, Apri. No.:	Dallas, TX	75261-2850	3. Service Type  Certified Maii
	or PO Box No.	2, Article Number	7.40	
	PS Form 3800. Aug	(Transfer from service	***	0004 3524 4202 sturn Receipt 102595-02-M-1640

<b>№AO 440</b> (Rev. 8/01) Summous in	a Civil Action			· 		-
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		e . l:	<u> </u>	••		
tr.s. Pas	tal S		lete	A. Signature	SECTION ON DELI	VERY
CERTIF	TOTAL TOTAL CONTINUES	Delivery is desired.	ll ll	x Leill	2 Juan	☐ Agent☐ Addressee
For delivery in	so that we can return	n the card to you.	I [	B. Received by (Pr	· 1	C. Date of Delivery
<b>*</b>	or on the front if spa		· · ·	D. Is delivery address	s different from item	17 🗆 Yes
<b>6</b> 1	1. Article Addressed to:	ed Center	ĺ	If YES, enter deli	very address below	r: □ No
Retizin Receip (Endorsement Recti Restricted Delivery (Endorsement Recti		-color Way	<u>[</u>			
Total Possage & F		83915		3. Service Type  Certified Mail  Registered  Insured Mail	☐ Express Mail ☐ Return Rece ☐ C.O.D.	ipt for Merchandise
Street, Apt. No.; or PO Box No. 7	<u>c/</u>	_		4. Restricted Delive	ry? (Extra Fee)	□ Yes
or PO Box No. 2	2. Article Number (Transfer from service is			0 0004 3	3524 434	
PS Form 3000 Aug	PS Form 3811, Februa	ary 2004	Domestic Retur	n Receipt		102595-02-M-1540

		sons in a Civil		·		
				RETURN OF SE	RVICE	
			nt was made by me <sup>(1)</sup>	DATE OCT	0:5,2	2007
	ERVER (PRINT)	Swen	Sm .	TITLE		
Check of	ne box below to	indicate app	ropriate method of ser	yice		
0	Served person	ally upon the	e defendant. Place who	cre		
	discretion then	residing the	rein.	•	f abode with	a person of suitable age and
	Name of perso	n with whon	n the summons and co	mplaint were	_	<u> </u>
0	Returned	_	<del>-</del>			
,						
136	Other (specify	<u>سوا :</u>	ctified us	Mail / Re	twn	Receipt
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Ex	secuted on	0/05/2	2007 sign	nature of Server	~	
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	U.S. Po	stal Se FIED	SENDER: COMPLE  ■ Complete items 1,	2, and 3. Also comp	olete	A Signature
	≠o (Domesti	c Mail Only	item 4 if Restricted  Print your name an	I Delivery is desired. Ind address on the re		X CANUAL TIMEN - Address
	Fordeliver	SECULA PROPERTY NO.	so that we can retuent Attach this card to	urn the card to you. the back of the mai		B. Received by (Printed Name) C. Date of Deliver
		Postage S	or on the front if sp 1. Article Addressed to:		_	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: \( \square\$ No
	Ŋ		(, , , , , , , , , , , , , , , , , , ,			
L	T1	tified Fee	US Gout	AAty Garas	┩	
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AO 440 (Rev. 8/01) Summ	nons in a Civil Action		•
		RETURN OF SERVICE	
Service of the Summons	and complaint was made by me <sup>(1)</sup>	DATE Oct 05.2	ov)
AME OF SERVER (PRINT)	Swensm	TITLE	
Check one box below to	indicate appropriate method of ser	vice	
☐ Served person	ally upon the defendant. Place who	ere	· · · · · · · · · · · · · · · · · · ·
discretion then	creof at the defendant's dwelling ho	•	person of suitable age and
Name of person	on with whom the summons and co	mplaint were	
Other (specify	): Cortified US	Moil / Kestur	Receipt
	STA	TEMENT OF SERVICE FEES	
AVEL	SERVICES		TOTAL
	Di	CLARATION OF SERVER	<del></del>
Executed on		sature of Server	
		1.0. Box 129 Da	wer 10 83825
	os al Serv SENDER: COMPI	LETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
பு (Domesti	c Nail Only: Complete items item 4 If Restrict	1, 2, and 3. Also complete ted Delivery is desired.	A Signature  X C. Lhanneu  Agent
12 C	so that we can n  Attach this card  or on the front if	and address on the reverse eturn the card to you. to the back of the mailplece, space permits.	B. Received by (Printed Name) C. Date of Delly
m Çei	- Labeled -	County General Admits	D. Is delivery address different from item 1?  Yes ' If YES, enter delivery address below:  No
(Endorsement)  Restricted De (Endorsement)	there Fee 5 20 N	Early General Admin 3rd Av	
Sent To B	my Can Sound	powh 10 93864	3. Service Type  Certified Mail
or PO Box No. City, Shate, ZIP			4. Restricted Delivery? (Extra Fee)
PS Form CSC)	August 2016 (Transfer from servi		0004 3824 4328
As to who may serve a su	mmons see F	bruary 2004 Domestic Re	turn Receipt 102595-02-M-1

170 THO (REV. 8/01) S	ummons in a Civil Action	<del></del>		
		RETURN OF SERVICE		
	ons and complaint was made by me <sup>(1)</sup>	DATE Oct 05,	2007	
AME OF SERVER (PRI		TITLE	(	
Check one box below	to indicate appropriate method of set	rvice		
☐ Served per	sonally upon the defendant. Place wh	erc	· .	
discretion ti	thereof at the defendant's dwelling he nen residing therein.		ith a person of suitable a	ge and
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AVEL	SERVICES	TEMENT OF SERVICE FEE		TAL
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City: State	2. Article Number	7 NOT A27	20 0004 352	4 4318
PS Friem 2	560 Augus 2005 PS Form 3811 Feb	· · · · · · · · · · · · · · · · · · ·	Return Receipt	102595-02-M-

			DETT	RN OF SEI	DITCE			
<u></u>	<u> </u>		DATE		TICE		. <u></u>	
	Summons and comp	laint was made by	men	00	05,2	00)		
NAME OF SERVE		uson	TITLE				<u> </u>	
Check one bo	x below to indicate a	ppropriate method	of service			<u> </u>		
□ Sen	ved personally upon	the defendant. Pla	ace where			<u></u>		
	copies thereof at the		lling house or u	isual place of	abode with	a person of suit	able age and	
Nam	ne of person with wh	om the summons	and complaint	Weze				
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DS Othe	r (specify):	rtified	US Ma	il/Re	twn	Receipt	,	
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RAVEL		SERVI		NT OF SERV	ICE FEES		TOTAL	
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		<del></del>	DECLAR	ATION OF S	ERVER	-		
contain	declare under pe	malty of perjury un ervice and Stateme				erica that the fo	oregoing inform	ation
containe Execute	ed in the Return of S			Fees is true an		erica that the fo	oregoing inform	ation
	ed in the Return of S		Signature of	Fees is true an	ad correct.		egoing inform	
	ed in the Return of S d on $1000000000000000000000000000000000000$		Signature of	Fees is true and	ad correct.	over 1D		
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Execute	U.S. Posta CERTIFIE (Domestic Mai	SENDER: COMP  Complete items item 4 if Restrice so that we can attach this care or on the front items.	Signature of Service   Signature of Service	Sever  Se	2 9 D	OMPLETE THIS Signantiff Pleceived by Jacobs Signantiff Pleceived by Jacobs Signantiff Signantiff Pleceived by Jacobs Signantiff Signantiff Pleceived by Jacobs Signantiff Signantiff Signantiff Pleceived by Jacobs Signantiff Signantiff Signantiff Signantiff Pleceived by Jacobs Signantiff	SECTION ON DEF	Agent Addressee C. Date of Delivery 10907 m 1? Yes
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ASSO 0004 3554 4256 4000 0550 7	U.S. Posta CERTIFII (Domestic Mai For delivery into Posta Certified Fr Resum Receipt Fr (Endorsement Require Restricted Delivery Fr (Endorsement Require Total Postage & Fee Sent To Street, Apr. No.;	SENDER: COMP  Complete items item 4 if Restrice so that we can Attach this care or on the front it. Article Addressed	Signature of Service   Signature of Service	Fees is true and Server  Server  Boo I and	ad correct.	Pieceived by Is delivery addres If YES, enter del	Express M. C.O.D.	Agent Addressee C. Date of Delivery 10 9 0 1 m 1? Yes w.: No
A524 425E 4000 0250 7007	U.S. Posta CERTIFII (Domestic Mai For delivery into Posta Certified Fr Resum Receipt Fr (Endorsement Require Restricted Delivery Fr (Endorsement Require Total Postage & Fee Sent To Street, Apr. No.; or PO Box No. 35	SENDER: COMP  Complete items item 4 if Restrice so that we can Attach this care or on the front it. Article Addressed	Signature of Service   Signature of Service	Fees is true and Server  Server  Boo I and	ad correct.	Service Type  Certified Mail  Registered  Insured Mail	Express M.   Return Rec.   C.O.D.	Agent Addressee C. Date of Delivery 10 9 0 1 m 1? Yes w: No

RETURN OF SERVICE		
DATE Oct 05.	2007	
TITLE	<i>(</i>	
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nplaint were	_	
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Mail / Restur	Receipt	
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ature of Server		
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elivery is desired. address on the reverse	x S. Beki	Agent Addressee
n the card to you. ne back of the mailpiece,	B. Received by (Printed Name)	C. Date of Delivery
ce permits.		
838642027 1907		7
nder of new add even		
	[	pt for Merchandise
10-546 8-6-44 8-5-1-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4-4	_	Yes
7007 0070	1 2 COL 1/222	<u> </u>
7007 002		102595-02-M-1540
	TITLE  Date  Dice  Title  Dice  Date  Dice  Date  Dice  Date  Date	TITLE  Disce or usual place of abode with a person of suitable age and implaint were  TEMENT OF SERVICE FEES  TOTAL  ECLARATION OF SERVER  e laws of the United States of America that the foregoing informat Service Fees is true and correct.  THIS SECTION  A signature of Server  COMPLETE THIS SECTION ON DECRETE THE SECTIO

△AO 440 (Rev. 8/01) Summons in a Civil Action

(Act. 6/01) Summons in a CIVI Action	
	IN OF SERVICE
Service of the Summons and complaint was made by me <sup>(1)</sup>	Oct 05,2007
NAME OF SERVER (PRINT)  SWENSON	,
Check one box below to indicate appropriate method of service	
☐ Served personally upon the defendant. Place where	
Left copies thereof at the defendant's dwelling house or us discretion then residing therein.	
Name of person with whom the summons and complaint	vere
□ Returned	
Other (specify): Cortified U.S Man	1/Resturn Receipt
	TOTAL
RAVEL SERVICES	
DECLARA	ATION OF SERVER
Executed on 10/05/2007 Signature of Se	THE THE
.1	COMPLETE THIS SECTION ON DELIVERY
SENDER: COMPLETE THIS S	ECHON
GERTIFIED W item 4 if Restricted Delivery is	s desired.
Comestic Mail Only: I Print your name and address so that we can return the car Attach this card to the back of	d to you.
or on the front if space perm	D. Is delivery address different from item 1? Yes
Postage \$ 1. Article Addressed to:	If YES, efficer delivery auditors soloni
Certified Fee	end 2003 LAU NW
(EXXIDISEMBILITACIONAL)	· · · · · · · · · · · · · · · · · · ·
Restricted Denvery res (Endorsement Required)	3. Service Type  Certified Mail
	Registered   Return Receipt for Merchandis   Insured Mail   C.O.D.
Sent To US6, H	4. Restricted Delivery? (Extra Fee) Yes
or PO Box No. 25 D 2. Article Number	7007 0220 0004 3524 4370
DS 50m 3811 February 2004	0 vis 12 M 15
PS Form 3800 August 2005	

AO 440 (Rev. 8/01) Summons in a Civil Action			
	RETURN OF SERV	ICE	
Service of the Summons and complaint was made by me	DATE OUT O	5,200)	
NAME OF SERVER (PRINT) Swenson	TITLE		
Check one box below to indicate appropriate method of se	ervice		
☐ Served personally upon the defendant. Place w	rhere		
Left copies thereof at the defendant's dwelling l discretion then residing therein.	house or usual place of ab	ode with a person of suitable	age and
Name of person with whom the summons and o	complaint were		
□ Returned			
Other (specify): Cartified U	S Mail / Resta	un Receipt	
	t		
ST	ATEMENT OF SERVICE	E FEES	
RAVEL SERVICES	-	T	OTAL
	DECLARATION OF SEF	EVER	
Executed on 10/05/200/ Date Si	ignature of Server		
	4.0.1800 129	Doner D 8	3825
U.S. Postal Se		COMPLETE THIS SEC	TION ON DELIVERY
CERTIFIED SENDER: COMPLE  [Damestic Mail Onl] Complete items 1,	2 and 3. Also complete	A. Signature	☐ Agent
tem 4 if Restricted	d Delivery is desired.  Ind address on the reverse turn the card to you.  To the back of the mailpleon permits.	B. Received by (Print Laukewa	ed Name) C. Date of Delivery
Postage (-9" or on the front it s	Dace berring.	D. In distrect activess	different from item 1? Yes  Yes I No
Return Receipt Fee (Endorsement Required)  Restricted Delivery Fee	Health +		1
(Endorsement Required)  Total Postage & Fees  \$ 200 1nd	where	SW IS SANS IS	E Egraes Mel
Sent To U.S Dept Washington or PO BOX No. 200 L	Health + where youdence the country		E1 Baum Receipt for Merchandise ELCGED:
and the bloombor		0220 0004	524 <b>43</b> 63
PS Form 3890, August 2006  2. Article Number (Transfer from serv		mestic Return Receipt	102596-02-M-154
1) As to who may serve a summons see PS Form 3811, Fe	obruary 2004		Sign was a second

-- , %,

AO 440 (Rev. 8/01) Summons in a Civil Action	
RETURN OF SERVICE	
Service of the Summons and complaint was made by me <sup>(1)</sup>	2007
NAME OF SERVER (PRINT) Swenson	
Check one box below to indicate appropriate method of service	
☐ Served personally upon the defendant. Place where	
Left copies thereof at the defendant's dwelling house or usual place of abode wi discretion then residing therein.	th a person of suitable age and
Name of person with whom the summons and complaint were	
🗀 Returned	
08 Other (specify): Cortified US Mail/Resturn	Receipt
STATEMENT OF SERVICE FEE	s
TRAVEL SERVICES	TOTAL
DECLARATION OF SERVER	
Executed on 10/05/2007  Date  Signature of Server	``
9.0. Bas 129 8	oner, 1D 83825
U.S. Postal Service :: CERTIFIED MAI	
Domestic Mail Only, No SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse	A Signature  X Can Dul Addresse
so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.	B. Revelved by (Printed Name) C. Date of Deliver
Return Receipt Fee 2 1. Article Addressed to:	D. is delivery address different from item 17 Pares If YES enter delivery address below:
Restricted Delivery Fee (Endorsement Required)  Of G	001 - 9 2007 P.O. Box 149
Total Postage & Fees \$ 7232 Man St.	3. Service Type USPS
Street, Apt. No.; 1232 Borners Cery, W	Service Type  ST  Service Type  ST  Express Mail  ☐ Registered ☐ Return Receipt for Merchandise
City, State, ZIP 8 6 13 8 05	☐ Insured Mail ☐ C.O.D.  4. Restricted Delivery? (Extra Fee) ☐ Yes
As to who may serve a summons se (Transfer from service label) 0220	6664 3514 4561
PS Form 3811 February 2004	

CAO 440 (Rev. 8/01) Summons in a Civil Action		<del> </del>
	PATE O	
Service of the Summons and complaint was made by	me" Oct 05,2	00)
NAME OF SERVER (PRINT) Sween Son	TITLE	
Check one bax below to indicate appropriate method	l of service	
☐ Served personally upon the defendant. Pla	ace where	<u>-</u>
<ul> <li>Left copies thereof at the defendant's dweld discretion then residing therein.</li> </ul>	ling house or usual place of abode with a	person of suitable age and
Name of person with whom the summons	and complaint were	
□ Returned		<u> </u>
·		
Other (specify):	US Mail / Resturn	Receipt
<del></del> _		•
	STATEMENT OF SERVICE FEES	
TRAVEL SERVE	CES	TOTAL
	DECLARATION OF SERVER	· · · · · · · · · · · · · · · · · · ·
Executed on $\frac{10/05/2007}{\text{Date}}$	Signature of Server	
<u> </u>		· 
SENDER: CO	OMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
CERTIFIED MAI  (Domestic Mail Only: No in so that we Attach this	terns 1, 2, and 3. Also complete estricted Delivery is desired. name and address on the reverse can return the card to you. card to the back of the mallpiece,	A. Signature  Agent  Addres  B. Received by (Plint Liverse)  Date of Deliverse
1. Article Addre	ont if space permits.	D. Is delignly address different from item 1? Yes If YES, enter delivery address below:
Postage S 7. D S	fate but CI. Horney beverse	NTRAL POSTAL SERVICES
Return Record Fee (Endorsement Required)  Restricted Delivery Fee (Endorsement Required)  Restricted Prictions & Feet Science	, 10	3. Service Type  © Certified Mail  D Registered  Receipt for Merchan
Total Postage & Fees \$ 9	83720-1080	Insured Mail C.O.D.  4. Restricted Delivery? (Extra Fee) Yes
Street, Apr. No. 2. Article Number of PO Roy No.		5004 3624 4356
- 10, WEIGH, A19-14	1, February 2004 Domestic Ret	
25 Perce 2000 Aires at 2000	Toprod sor less metade	-

AO 440 (Rev. 8/01) Summons in a Civil Action	
RETURN OF SE	RVICE
Service of the Summons and complaint was made by me"	05.2007
NAME OF SERVER (PRINT)  Swenson  Title	
Check one box below to indicate appropriate method of service	
☐ Served personally upon the defendant. Place where	
Left copies thereof at the defendant's dwelling house or usual place of discretion then residing therein.	abode with a person of suitable age and
Name of person with whom the summons and complaint were	
□ Returned	
Of Other (specify): Cartified US Mail/Re	turn Receipt
STATEMENT OF SERV	ICE FEES
TRAVEL SERVICES	TOTAL
DECLARATION OF	SERVER
Executed on 10/05/2007 Signature of Server	~
	COMPLETE THIS SECTION ON DELIVERY
SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete items 1, 2, and 3.	A. Signature
Complete items 1, 2, and 3. Also complete items 1, 2, and 3. Also complete items 4 if Restricted Delivery is desired.  Print your name and address on the revo	Agen
so that we can return the card to you.  Attach this card to the back of the mailp	B. Regelved by ( Printed Name),   C. Date of Us
or on the front if space permits.	D. is delivery address different from item 1? Yes If YES, enter delivery address below:
Tu Postage s Radinesser W.	R YES, enter delivery auditess below.
In Centified Fee C D D	
(Endorsement Required) [ ] (2 ] Lalle 54.	3. Service Type
(Endorsement Required) _ Sundovivi /2 93864	Fortified Mail
Total Postage & Fees   \$	☐ Insured Mail ☐ C.O.D.  4. Restricted Delivery? (Extra Fee) ☐ Yes
Bring K_	ער פולים עלים
De College Clarks Clarks	0220 0004 3324 4332 Dornestic Return Receipt 102595-024
PS Form 3811, February 2004	

(Rev. 8/01) Summons in a Civi		URN OF SERV	TICE	
Service of the Summons and compla	int was made by me <sup>(1)</sup>	E Oct o	5.200	
NAME OF SERVER (PRINT)	TITL	E E	1)200 (	
Check one box below to indicate any				
☐ Served personally upon th	e defendant. Place where			
☐ Left copies thereof at the of discretion then residing the	_	•	ode with a person of sui	table age and
☐ Returned		n wate		
Other (specify):	rtified us m	ail / Resta	wn Receipt	
	COTA 2007A	ENT OF SERVICE	P trees	
RAVEL	SERVICES	ENT OF SERVIC	L PLES	TOTAL
<u> </u>	DECLA	RATION OF SEI	RVER	
Executed on $\frac{D/D5/L}{Da}$	2007 Signature of	Server	<u> </u>	
	<u> </u>	Bas 129	Down 1D	83825
U.S. Postal Service of CERTIFIED MAIL (Domestic Mail Only; No Institute of Company information visit on	SENDER: COMPLETE THE Complete items 1, 2, and item 4 if Restricted Delive Print your name and add so that we can return the Attach this card to the bor on the front if space p	d 3. Also complete ery is desired. iress on the revers e card to you, ack of the mailple	A. Signature  X. John ( B. Received b	Agent  (C. Date  (C. Date
Postage \$	1. Article Addressed to:  MCI/World  205 N Mark	con Jan As Hez	If YES, ente	ddress different from item 1?
Restricted Delivery Fee (Endorsement Required)  Total Postage & Fees \$ 9. (  Sent To MC / Www. C.)  Street Apt. No.:  or PO Box No.: 2 05 1 10:10.	Chrago 1L	01-5924	3. Service Type Certified Registere	Mail DExpress Mail  G Return Receipt for Merchand
Chy. State, ZIP-4 (Wicago, 14	Article Number     (Transfer from service label)     PS Form 3811, February 20	7007	0220 6004 estic Return Receipt	3524 Y2(9 102595-02-44-1

AO 440 (Rev. 8/01) Summons in a Civil Action	RETURN OF SERVICE	
	DATE	^
NAME OF SERVER (PRINT)	TITLE	200)
Michael Swenson	III.LE	<u> </u>
Check one box below to indicate appropriate method of	[service	
☐ Served personally upon the defendant. Place	where	
Left copies thereof at the defendant's dwellin discretion then residing therein.	g house or usual place of abode wi	th a person of suitable age and
Name of person with whom the summons an	d complaint were	
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18 Other (specify): [artified]	15 Mail / Resturn	Received
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U.S. Postal Service Tall		
	PLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	s 1, 2, and 3. Also complete cted Delivery is desired.	A Signature
■ Print your nam	e and address on the reverse return the card to you.	Addresse
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Return Receipt Face 2 1. Article Addressed	i to:	D. Is delivery address different from item 1? Deves If YES enter delivery address below:
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City, State, ZIPBF , 11	ch 3.8 02	☐ Insured Mail ☐ C.O.D.  4. Restricted Delivery? (Extra Fee) ☐ Yes
95 Form 3800, August 2006  2. Article Number	[]]]]]	
As to who may serve a summons se(Transfer from ser	vice label) (00') 02'2'0'	1 6004 3524 4301

PS Form 3811, February 2004

Domestic Return Receipt

102596-02-M-1540

C. Date of Delivery COMPLETE THIS SECTION ON DELIVERY I declare under penalty of perjury under the laws of the United States of America that the foregoing information 9.0. Box 129 Donay 10 83825 \* Goan & Bul B. Received by (Printed Name) Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and TOTAL Cartified US Mail / Return Received A. Signature DATE Oct 65,200 STATEMENT OF SERVICE FEES contained in the Return of Service and Statement of Service Fees is true and correct. DECLARATION OF SERVER so that we can return the card to you.

Attach this card to the back of the mailpiece, RETURN OF SERVICE Print your name and address on the reverse ■ Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired. CERTIFIED MAIL SENDER: COMPLETE THIS SECTION Signature of Server Name of person with whom the summons and complaint were TITLE Check one box below to indicate appropriate method of service □ Served personally upon the defendant. Place where Service of the Summons and complaint was made by me<sup>13</sup> SERVICES Executed on 10/05/2007 NAME OF SERVER (PRINT) SWEMSON AAO 440 (Rev. 8/01) Summons in a Civil Action discretion then residing therein. Forstelivery information visit SECTION AND ADDRESS OF THE PERSON ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON AND ADDRESS OF THE PERSON ADDRESS OF THE Ø Other (specify): C Returned TOEH TRAVEL

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(Endorsement Requirent Regulation (Endorsement Requirent Requirent Requirent Requirement R	uirled)	in b pd sked		
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Street, Apt. No.; or PO Box No. City, State, 219-4	415/N	- 9921 T.	insured Meli C.O.D.  4. Restricted Delivery? (Extra Fee)	☐ Yes
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\$ 40.00	\$40.00
I declare under penalty of perjury under the laws of the United States of America to tained in the Return of Service and Statement of Service Fees is true and corrects	hat the foregoing information
1	the Summons and complaint was made by me <sup>(1)</sup> RVER (PRINT)  TITLE  Process Server  box below to indicate appropriate method of service  Served personally upon the defendant. Place where  Itouk Rd., Stc. A, Spokage, WA  Left copies thereof at the defendant's dwelling house or usual place of abode with a perso discretion then residing therein.  Name of person with whom the summons and complaint were  Returned  Other (specify):  STATEMENT OF SERVICE FEES  SERVICES

NOTICE OF AMENDMENT TO COMPLAINT CV-07-305-EFS (US DISTRICT COURT WA) AND COMPLAINT 07-402-N-MHW (US DISTRICT COURT ID) AND RESPECTIVE AFFIDAVIT

Any and all references made to a Dr. Frank Joy, 1415 N Houk Rd Ste. A, Spokane, WA 99210 are to be replaced to refer to the correct Defendant:

Dr. James Joy, 805 W 5<sup>th</sup> Av Anesthesia Associates, Spokane, WA 99201 509-458-5800 or Dr. James Joy, C/O Brown Medical Center, 104 W 5<sup>th</sup> Av Ste 250 E, Spokane, WA 99201 509-838-1547

My public, sincerest and humblest apologies to Dr. Frank Joy for the misidentification due to the fact she was the only Dr. Joy listed by name that I could find in my phone directory.

Plaintiff: Michael Swenson P.O. Box 129 Dover, ID 83825 393 Flamingo Rd. Sandpoint, ID 83864 208-265-8762

**DEFENDANT:** Dr. James Joy, 805 W 5<sup>th</sup> Av Anesthesia Associates, Spokane, WA 99201 509-458-5800 and James Joy, Brown Medical Center 104 W 5<sup>th</sup> Av Ste 250 E Spokane, WA 99201 509-838-1547 (Diana Anderson or other may receive docs/service for)

AAO 440 (Rev. 8/01) Summons in a Civil	Action		
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	Ge Address of	x 129 Dover,	10 83825
	C	pulet Decor	

10 440 (Rev. 8/01) Summons in a Civil Action	
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Name of person with whom the s	mmons and complaint were
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/EL	STATEMENT OF SERVICE FEES TOTAL
	DECLARATION OF SERVER
	erjury under the laws of the United States of America that the foregoing information
contained in the Return of Service and	I Statement of Service Fees is true and correct.
10/05/200	
Executed on $\frac{10/05/200}{Date}$	Signature of Server
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Dower, 10 83825



Complete address information or place label here.







3. ATTACH LABEL (Optional) affix in designated location Remove label backing and

4. Bring your Priority Mail package to or call 1-800-222-1811 for pick up ser Stamped mail may be deposited in a a post office, present it to your letter of than 16 ounces. collection box ONLY If it weighs less

in designated area or on label.

SAO 440 (Rev. 8/01) Summons in a Civil Action
RETURN OF SERVICE
Service of the Summons and complaint was made by me <sup>th</sup>
Service of the Summons and complaint was made by me <sup>a</sup> Oct 19, 2007  NAME OF SERVER (PRINT)  NICLIAN SON  TITLE  Plaintff
Check one box below to indicate appropriate method of service
Served personally upon the defendant. Place where
Left copies thereof at the defendant's dwelling house or usual place of abode with a person of suitable age and discretion then residing therein.
Name of person with whom the summons and complaint were Rhea Maloney o 4:54 p. m.  Returned Con Regular Downliss m
Returned for Regula Domilison
above named after certified mailine was refused  501 N 4th Av Sandprint, 10 83864
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DECLARATION OF SERVER
Executed on
Box 129 Dover, 10 83825
-

AO 440 (Rev. 8/01) Sum	nons in a Civil Action	
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	s and complaint was made by me <sup>(1)</sup> DATE Oct 0:5, 20	n
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Street, Apt. No.	~   800   L	
	Transfer from service label) 700 / 0220	
F5 Form 3800	PS Form 3811, February 2004 Domestic Return	Receipt Tozasa-ca-

.27%

(1) As to who may serve a summons see Rule 4 or the Federal Rules of Civil Procedure.

SAO 440 (Rev. 8/01) Summons in a Civil Action		
	RETURN OF SERVICE	
Service of the Summons and complaint was made by me <sup>(1)</sup>	DATE 10/15/07	
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Check one box below to indicate appropriate method of ser	vice	
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RAVEL SERVICES .		TOTAL
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DF	ECLARATION OF SERVER	
I declare under penalty of perjury under the contained in the Return of Service and Statement of S	e laws of the United States of America that the fore Service Fees is true and correct.	egoing information
Executed on /0/15/67  Date Sign	ature of Server	
60 <u>)</u> Add	W. Main, 203 A, Spokane, WA 992	20l

# UNITED STATES DISTRICT COURT FOR THE EASTERN DISTRICT OF WASHINGTON

MICHAEL SWENSON,

Plaintiff(s)/Petitioner(s)

CV-07-305-FVS

٧.

THE UNITED STATES GOVERNMENT, et al.,

NOTICE TO PRO SE LITIGANTS OF THE DISMISSAL AND/OR SUMMARY JUDGMENT RULE REQUIREMENTS

Defendant(s)/Respondent(s)

TO: Michael Swenson

A Defendant/Respondent in your case has filed a motion to dismiss under Federal Rule of Civil Procedure 12 or a motion for summary judgment under Federal Rule of Civil Procedure 56. If the motion is granted, some or all of your claims will be dismissed, and there will be no trial or evidentiary hearing on those claims. This notice is given because the Ninth Circuit Court of Appeals requires that pro se litigants be given fair notice of the requirements of the summary judgment rule.

Rule 12 Motions Treated as Rule 56 Motions.

In a Rule 12 motion, the Defendant/Respondent generally relies on only what is stated in the complaint (and those items of which the Court can take judicial notice) to assert entitlement to dismissal of the complaint. However, if either party submits other evidence with a motion to dismiss or with a response to the motion,

then the Court may treat the motion to dismiss as a motion for summary judgment. See Federal Rule of Civil Procedure 12(b). This Notice is to inform you that if the Defendant or Respondent has submitted evidence in support of a motion to dismiss, the Court will give you notice of its intent to treat the motion as a motion for summary judgment and of the need for you to meet the requirements of Rule 56 set forth below, rather than Rule 12, to oppose such a motion.

# Rule 56 Motions.

Under Rule 56, the Defendant/Respondent is required to file with its motion a statement of undisputed material facts and a brief showing why the party is entitled to judgment as a matter of law, as more fully explained below.

Responding to Motions under Rule 56.

When the Defendant/Respondent has filed a Rule 56 motion for summary judgment or a Rule 12 motion to dismiss that will be treated as one filed under Rule 56, you must file a response opposing the motion within 30 days after the date the motion was mailed to you as noted on the certificate of mailing, or within such other time period set by the Court. See Federal Rule Civil Procedure 5(b). Your response must consist of (1) a brief opposing the motion, not to exceed 20 pages in length, (2) a statement of disputed facts, if any, and (3) evidence supporting your claims, such as admissions from the other party, affidavits, declarations, deposition transcripts, or answers to interrogatories that contradict or oppose the moving party's motion and support your claims. See Federal Rule of Civil Procedure 56(e); Local Rule 56.1(b). Thereafter, the Defendant/Respondent is entitled to file a reply within 10 days, excluding Federal holidays and weekends. You are not entitled to file anything further in response.

Summary judgment will be granted when (1) there is no genuine issue of material fact, meaning that there is no real dispute about any fact that would affect the result of your case, and (2) the party is entitled to dismissal of your claims and/or judgment as a matter of law. If the party you are suing meets its burden under Rule 56 by submitting affidavits or other sworn testimony, you cannot rely only on what your complaint says. Instead, you must provide specific facts using the type

of evidence set forth above. The evidence must show that there is a genuine issue of material fact that requires a factfinder (usually a jury) to decide the disputed facts.

After reviewing all of the briefing and evidence, the Court will determine whether some or all of your claims should be dismissed. If all of your claims are dismissed, judgment will be entered against you and your case will be closed without a trial or evidentiary hearing.

Please be advised that if you do not file your response opposing the motion within 30 days (or such other time period set by the Court), your failure to file a response will constitute your consent to the Court, granting the motion. See Local Rule 7.1(h)(5). If this occurs, the Court will consider the motion, and, if it has merit, it will dismiss some or all of your claims. If all of your claims are dismissed, judgment will be entered against you and your case will be closed without a trial or evidentiary hearing.

Dated: 02/29/08

James R. Larsen
District Court Executive/Clerk of Court

By: s/Shirley Peters

Deputy Clerk

1	(1 ' C II NGD	
2	Gloria S. Hong, WSBA No. 36723 Email: gshong@stoel.com	
3	One Union Square	
4	600 University Street, Suite 3600 Seattle, WA 98101	
5	Telephone: (206) 624-0900 Facsimile: (206) 386-7500	
6	Attorneys for Defendant, Verizon	
7	Communications, Inc.	
8		DISTRICT COLDE
9		DISTRICT COURT T OF WASHINGTON
10	MICHAEL SWENSON,	Civil No. CV-07-00305-FVS
11	Plaintiff,	Judge Van Sickle
12	v.	NOTICE OF APPEARANCE
13	<b>v</b> .	NOTICE OF ALL EARANCE
14	THE UNITED STATES GOVERNMENT, IDAHO STATE	
15	GOVERNMENT, WASHINGTON STATE GOVERNMENT, IDAHO	
16	AND WASHINGTON STATE MEDICAL REVIEW BOARDS.	
17	DEACONESS MEDICAL CENTER AND CERTAIN STAFF, KOOTENAI	
18	MEDICAL CENTER, DR. DAVID	
19	WAIT AND CERTAIN STAFF, VERIZON, PHARMACEUTICAL	
20	COMPANÍES, BONNER COUNTY GENERAL HOSPITAL AND	
21	CERTAIN STAFF, BRIAN KOCH OF THE SANDPOINT POLICE	
22	DEPARTMENT, DR. MICHAEL CRUZ, DR. TIMOTHY CHESTNUT,	
23	CRUZ, DR. TIMOTHY CHESTNUT, DR. FRANK JOY, DR. WILLIAM CORELL, LINCOLN LIFE	
24	INSURANCE CO., DR. SCOTT	
25	Defendants.	
26		

NOTICE OF APPEARANCE - 1 Case No. CV-07-00305 - FVS

1	TO: Michael Swenson, Pro Se Plaintiff		
2	PLEASE TAKE NOTICE that Defendant Verizon Communications, Inc.		
3	hereby appears in this action by and through its attorneys Stoel Rives LLP, Gloria		
4	S. Hong, and requests that all further pleadings or papers exclusive of original		
5	process, be served upon defendant's attorney of record at the following addresse	es:	
6	Claria S. Hang, WSDA No. 26722		
7	Gloria S. Hong, WSBA No. 36723 Email: <u>gshong@stoel.com</u> STOEL RIVES LLP		
8	One Union Square		
9	600 University Street, Suite 3600 Seattle, WA 98101 Telephone: (206) 624-0900		
10	Telephone: (206) 624-0900 Facsimile: (206) 386-7500		
11	Dated this 29 <sup>th</sup> day of February, 2008.		
12	STOEL RIVES LLP		
13	/s/ Gloria S. Hong		
14	Gloria S. Hong, WSBA No. 3672 One Union Square		
15	600 University Street, Suite 3600 Seattle, WA 98101	†	
16 17	Telephone: (206) 624-0900 Facsimile: (206) 386-7500		
18	Address of the Control of the Contro		
19	Attorneys for Defendant Verizon Communications Inc.		
20			
21			
22			
23			
24			
25			
26			

NOTICE OF APPEARANCE - 2 Case No. CV-07-00305-FVS

1	CERTIFICATE OF SERVICE		
2			
3	I HEREBY CERTIFY that on February 29, 2008, I filed the foregoing		
4	NOTICE OF APPEARANCE electronically through the CM/ECF system, which		
5	caused the following parties or counsel to be served by electronic means, as more		
6 7	fully reflected in the Notice of Electronic Filing:		
8	Robert F. Sestero, Jr. – <u>rsestero@ecl-law.com</u>		
9	Jarold P Cartwright – jerryc@atg.wa.gov		
10	James Bernard Kine – jking@ecl-law.com		
11			
12	Additionally, I served the foregoing NOTICE OF APPEARANCE by the		
13	means below:		
14			
15	Michael Swenson (Pro Se) PO Box 129 [X] Via U.S. Mail Via Facsimile		
16	Michael Swenson (Pro Se) PO Box 129 Dover, ID 83825  [X] Via U.S. Mail Via Facsimile Via Overnight Mail Via Hand Delivery		
17			
18	/s/ Gloria S. Hong		
19	/s/ Gloria S. Hong Gloria S. Hong, WSBA No. 36723 STOEL RIVES LLP		
20	One Union Square 600 University Street, Suite 3600 Seattle, WA 98101		
21	Telephone: (206) 624-0900		
22	Facsimile: (206) 386-7500		
23			
24			
25			
26			

NOTICE OF APPEARANCE - 3 Case No. CV-07-00305-FVS MIME-Version:1.0 From:ecf@id.uscourts.gov To:CourtMail@iddlei.idd.circ9.dcn Bcc: Message-Id:<556475@id.uscourts.gov>Subject:Activity in Case 2:07-cv-00402-EJL-MHW Swenson v. USA et al Order Content-Type: text/html

\*\*\*NOTE TO PUBLIC ACCESS USERS\*\*\* Judicial Conference of the United States policy permits attorneys of record and parties in a case (including pro se litigants) to receive one free electronic copy of all documents filed electronically, if receipt is required by law or directed by the filer. PACER access fees apply to all other users. To avoid later charges, download a copy of each document during this first viewing.

#### **U.S. District Court**

# District of Idaho (LIVE Database) Version 3.1.2

## Notice of Electronic Filing and Service

The following transaction was entered on 4/30/2008 at 3:06 PM MDT and filed on 4/30/2008

Case Name:

Swenson v. USA et al

Case Number:

2:07-cv-402

Filer:

**Document Number:** 81

## **Docket Text:**

ORDER that Plaintiff has not properly served Defendants and the claims will be dismissed without further notice, unless good cause can be shown prior to 5/19/08 why the case should not be dismissed. re [1] Complaint,. Signed by Judge Edward J. Lodge. (caused to be mailed to non Registered Participants at the addresses listed on the Notice of Electronic Filing (NEF) by jg, )

# 2:07-cv-402 Notice has been electronically mailed to:

Jarold P Cartwright jerryc@atg.wa.gov, MarkiS@atg.wa.gov, NikkiG@atg.wa.gov, torspoef@atg.wa.gov

Tracy Jack Crane tcrane@hollandhart.com, BoiProjAsst@hollandhart.com,

Boiseintaketeam@hollandhart.com, cbradley@hollandhart.com

William G Dryden wgd@elamburke.com, buff@elamburke.com

Richard H Greener greener@greenerlaw.com, cbaldino@greenerlaw.com,

ptrunnell@greenerlaw.com

Thomas R Luciani tluciani@sslslawfirm.com

Daniel Toby McLaughlin toby@sandpointlaw.com

Patrick E Miller pat.miller@painehamblen.com, caren.burke@painehamblen.com,

jeffrey.aultman@painehamblen.com, jody.foote@painehamblen.com

Matthew Christopher Parks mcp@elamburke.com, ksk@elamburke.com

Carsten A Peterson capeterson@quanesmith.net, ncalverley@quanesmith.net

Adam J Richins ajrichins@stoel.com, boisedocket@stoel.com, slgust@stoel.com

Robert F Sestero, Jr rsestero@ecl-law.com, swade@ecl-law.com

2:07-cv-402 Notice will be served by other means to:

Regina Danielsson

510 N 4th Ave

Sandpoint, ID 83864

Michael Swenson

Michael Swenson P O Box 129 Dover, ID 83825

THE DATE OF THE BODG NOW ARREST WAS DONE OF THE CANDO

#### THE FOLLOWING DOES NOT APPLY TO PRO SE LITIGANTS:

TO: Members of the District Court Bar FROM: Cameron Burke, Court Executive

SUBJECT: Registering for CM/ECF and Electronic Noticing

You are receiving this notice because our CM/ECF database reflects that you have not registered for CM/ECF, or do not have an e-mail address for eletronic notices. By Order of this Court, all members of the district court bar were required to register for CM/ECF by December 15, 2004. You are receiving this notice because you may be in violation of this court order.

Please use the following address to immediately register for a CM/ECF account:

http://www.id.uscourts.gov/cfCourt/ECF\_register/RegistrationForm.cfm

If you have received a login and password for CM/ECF and are still receiving this notice, plese verify your e-mail address by clicking on Utilities, Maintain your Account and then E-Mail Information. Plese verify that you have completed a primary e-mail address.

As previously noted, PACER has been discontinued. After January 1, 2005 a PACER account is required to access the docket and images. IN ADDITION TO YOUR COURT PROVIDED ACCOUNT, this PACER account is also REQUIRED. Us the following address to register for a PACER account:

http://pacer.psc.uscourts.gov

Thank you for your consideration this matter.

MIME-Version:1.0 From:ecf@id.uscourts.gov To:CourtMail@iddlei.idd.circ9.dcn Bcc: Message-Id:<558917@id.uscourts.gov>Subject:Activity in Case 2:07-cv-00402-EJL-MHW Swenson v. USA et al Order Content-Type: text/html

\*\*\*NOTE TO PUBLIC ACCESS USERS\*\*\* Judicial Conference of the United States policy permits attorneys of record and parties in a case (including pro se litigants) to receive one free electronic copy of all documents filed electronically, if receipt is required by law or directed by the filer. PACER access fees apply to all other users. To avoid later charges, download a copy of each document during this first viewing. However, if the referenced document is a transcript, the free copy and 30 page limit do not apply.'

# **U.S. District Court**

#### District of Idaho (LIVE Database) Version 3.2.1

# Notice of Electronic Filing and Service

The following transaction was entered on 5/8/2008 at 9:27 AM MDT and filed on 5/7/2008

Case Name:

Swenson v. USA et al

Case Number:

2:07-cv-402

Filer:

**Document Number:** 82

#### **Docket Text:**

ORDER re [1] Complaint, filed by Michael Swenson Plaintiff has not properly served Defendants and the claims will be dismissed without further notice, unless good cause can be shown prior to 6/5/08 why the case should not be dismissed.. Signed by Judge Edward J. Lodge. (caused to be mailed to non Registered Participants at the addresses listed on the Notice of Electronic Filing (NEF) by jg)

#### 2:07-cv-402 Notice has been electronically mailed to:

Jarold P Cartwright jerryc@atg.wa.gov, MarkiS@atg.wa.gov, NikkiG@atg.wa.gov, torspoef@atg.wa.gov

Tracy Jack Crane tcrane@hollandhart.com, BoiProjAsst@hollandhart.com,

Boiseintaketeam@hollandhart.com, cbradley@hollandhart.com

William G Dryden wgd@elamburke.com, buff@elamburke.com

Richard H Greener rgreener@greenerlaw.com, cbaldino@greenerlaw.com,

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# 2:07-cv-402 Notice will be served by other means to:

Regina Danielsson

510 N 4th Ave

Sandpoint, ID 83864 Michael Swenson P O Box 129 Dover, ID 83825 Glenn Westbrook 15441 E Alder Creek Rd Coeur d Alene, ID 3814 Katherine Westbrook 15441 E Alder Creek Rd Coeur d Alene, ID

The following document(s) are associated with this transaction:

Document description:Main Document
Original filename:n/a
Electronic document Stamp:
[STAMP deecfStamp\_ID=1089316566 [Date=5/8/2008] [FileNumber=558915-0]
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a82205f4eb60cc898e916bdc7bb87dacf2e0ba29aac015d0c5ba40a3163]]

# IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF IDAHO

MICHAEL SWENSON,	)	
Plaintiff,	)	Case No. CV 07-402-N-EJL
v.	)	ORDER
THE UNITED STATES OF AMERICA, et al.	)	
Defendants.	) ) _)	

Upon further review, it comes to the Court's attention that Plaintiff has not properly served the following Defendants: the State of Washington, Washington State Medical Review Records, Kootenai Medical Center, Verizon, Bonner County General Hospital, Dr. Timothy Chestnut, Dr. James Joy<sup>1</sup>, Dr. William Correll, Lincoln Life Insurance Co., Dr. Scott Burgstahler, Regina Danielson, Les Schwab-Sandpoint, Manhattan Life Insurance Co., Cancer Care Northwest, Dr. Robert Laugan, Linda Smith, Glenn Westbrook, Katherine Westbrook<sup>2</sup>, Sandpoint Urgent Care, Dr. Hernandez, and Dr. Stephen Puffer.

Plaintiff's complaint refers to a Dr. Frank Joy. Plaintiff corrected this reference with a Motion to Amend asking that all references to Dr. Frank Joy be replaced to Dr. James Joy. Dr. James Joy has filed a Motion to Dismiss in this action.

<sup>&</sup>lt;sup>2</sup> Plaintiff has mistakenly referred to Kathleen Westbrook as Katherine Westbrook in his complaint.

The Court reminds the Plaintiff that *pro se* litigants are held to same procedural rules as counseled litigants. King v. Atiyeh, 814 F.2d 565, 567 (9th Cir. 1987). Therefore, service of the Complaint upon the Defendants must comply with the requirements of Federal Rule of Civil Procedure 4. Service of the Complaint by certified or registered mail does not comply with the requirements of Rule 4.

Even though the 120 days provided for Plaintiff to effectuate service as required by Rule 4(m) have expired, the Court will grant the Plaintiff an additional twenty (20) days from the date of this Order to properly serve the Defendants. If Plaintiff fails to properly serve the Complaint on the Defendants, Plaintiff is hereby notified that the claims against the Defendants not properly served will be dismissed without further notice, by this Court pursuant to Federal Rule of Civil Procedure 4(m) and Local Rule 41.1 on June 5, 2008 for lack of service, unless good cause can be shown prior to that date why the case should not be dismissed. If Plaintiff properly serves Defendants by that date, the Court will then address the pending motions.

DATED: May 7, 2008

Honorable Edward J. Lodge

U. S. District Judge

Michael Swenson P O Box 129 Dover, ID 83825

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#### THE FOLLOWING DOES NOT APPLY TO PRO SE LITIGANTS:

TO: Members of the District Court Bar FROM: Cameron Burke, Court Executive

SUBJECT: Registering for CM/ECF and Electronic Noticing

You are receiving this notice because our CM/ECF database reflects that you have not registered for CM/ECF, or do not have an e-mail address for eletronic notices. By Order of this Court, all members of the district court bar were required to register for CM/ECF by December 15, 2004. You are receiving this notice because you may be in violation of this court order.

Please use the following address to immediately register for a CM/ECF account:

http://www.id.uscourts.gov/cfCourt/ECF\_register/RegistrationForm.cfm

If you have received a login and password for CM/ECF and are still receiving this notice, plese verify your e-mail address by clicking on Utilities, Maintain your Account and then E-Mail Information. Plese verify that you have completed a primary e-mail address.

As previously noted, PACER has been discontinued. After January 1, 2005 a PACER account is required to access the docket and images. IN ADDITION TO YOUR COURT PROVIDED ACCOUNT, this PACER account is also REQUIRED. Us the following address to register for a PACER account:

http://pacer.psc.uscourts.gov

Thank you for your consideration this matter.