

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF David A. Stebbins	Case Number: 3:22-cv-04082-AGT
DEFENDANT CMDR ImperialSalt and ZellZander	TYPE OF PROCESS ***See below***

SERVE AT { NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
Youtube- Registered agent: Corporation Service Company
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)
Corporation Service Company- 2710 Gateway Oaks Drive, Suite 150N, Sacramento, CA 95833

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW David A. Stebbins 123 W. Ridge Ave., APT D Harrison, AR 72601	Number of process to be served with this Form 28 2	
	Number of parties to be served in this case	
	Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Subpoena, Docket No. 16

Signature of Attorney other Originator requesting service on behalf of: Mark B. Busby	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 510-637-3535	DATE 11/16/2022
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 2	District of Origin No. 11	District to Serve No. 97	Signature of Authorized USMS Deputy or Clerk 	Date 12/1/22
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input checked="" type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode				
Address (complete only different than shown above)	<table border="1"> <tr> <td>Date 12/12/22</td> <td>Time 5:00 <input type="checkbox"/> am <input checked="" type="checkbox"/> pm</td> </tr> <tr> <td colspan="2">Signature of U.S. Marshal or Deputy </td> </tr> </table>	Date 12/12/22	Time 5:00 <input type="checkbox"/> am <input checked="" type="checkbox"/> pm	Signature of U.S. Marshal or Deputy 	
Date 12/12/22	Time 5:00 <input type="checkbox"/> am <input checked="" type="checkbox"/> pm				
Signature of U.S. Marshal or Deputy 					

Service Fee \$8	Total Mileage Charges including endeavors)	Forwarding Fee	Total Charges \$8	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
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REMARKS:

MAILED CERTIFIED 12/7/22
TRACKING# 9414716902246687928247
12/12/22 - REC'D - DELIVERED TO AGENT

- PRINT 5 COPIES:
1. CLERK OF THE COURT
 2. USMS RECORD
 3. NOTICE OF SERVICE
 4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
 5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

RECEIVED
JAN 10 2023