

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address) PRO SE TRAVIS MIDDLETON 27 WEST ANAPAMU STREET #153 SANTA BARBARA, CA 93101 TELEPHONE NO.: (805) 284-6562 FAX NO. E-MAIL ADDRESS (Optional): TRAVIS_M_93101@YAHOO.COM ATTORNEY FOR (Name): PLAINTIFF:		FOR COURT USE ONLY	
UNITED STATES DISTRICT COURT STREET ADDRESS: 312 N SPRING ST MAILING ADDRESS: CITY AND ZIP CODE: LOS ANGELES, CA 90012 BRANCH NAME: CENTRAL DISTRICT-WESTERN DIVISION		Hearing Date: Room: Hearing Time: Dept:	
PLAINTIFF: TRAVIS MIDDLETON DEFENDANT: RICHARD PAN, ET AL.		CASE NUMBER: LA CV16 05224-SVW-AGR	
PROOF OF SERVICE		Ref. No. or File No.:	

AT THE TIME OF SERVICE I WAS AT LEAST 18 YEARS OF AGE AND NOT A PARTY TO THIS ACTION
I SERVED COPIES OF THE FOLLOWING DOCUMENTS:

SUMMONS IN A CIVIL ACTION; COMPLAINT

PARTY SERVED: **ROBERT HERTZBERG**

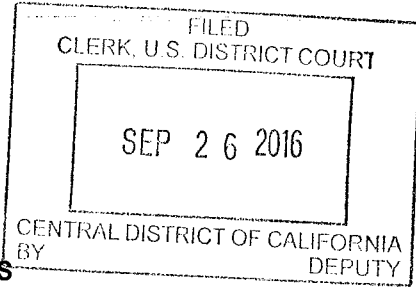
PERSON SERVED: **BY SERVING DIANE GRIFFITHS - CHIEF OF STAFF**

DATE & TIME OF DELIVERY: **9/9/2016**
11:09 AM

ADDRESS, CITY, AND STATE: **1303 10th St Rm 4038**
Sacramento, CA 958144900

PHYSICAL DESCRIPTION: **Age: 50+** **Weight: 140**
Sex: Female **Height: 5'7"**
Skin: WHITE **Marks:**

Hair: BROWN
Eyes: GLASSES



MANNER OF SERVICE:

Personal Service - By personally delivering copies.

Fee for Service: \$ 30.00



County: SACRAMENTO
Registration No.: 2015-73
River City Process Service, Inc.
901 H Street, Suite 207
Sacramento, CA 95814
(877) 446-2051

I declare under penalty of perjury under the laws of the
The State of California that the foregoing information
contained in the return of service and statement of
service fees is true and correct and that this declaration
was executed on September 12, 2016.

Signature: _____
AUSTIN X DANIELS

PROOF OF SERVICE