

UNITED STATES DISTRICT COURT

for the

Eastern District of Pennsylvania

DANIEL BINDERUP

Plaintiff

v.

ERIC H. HOLDER, JR., ATTORNEY GENERAL
OF THE UNITED STATES, B. TODD JONES,
DIRECTOR OF THE BUREAU OF ALCOHOL,
TOBACCO, FIREARMS AND EXPLOSIVES

Civil Action No. 13-6750

Defendant

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

B. Todd Jones
Bureau of Alcohol, Tobacco, Firearms & Explosives
99 New York Avenue, N.E.
Washington, D.C. 20226

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

DOUGLAS GOULD, ESQ.
925 GLENBROOK AVENUE
BRYN MAWR, PA 19010

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT



RICHARD C. THIEME, Deputy Clerk

Date: NOVEMBER 21, 2013

Civil Action No. 13-6750

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for *(name of individual and title, if any)* B. Todd Jones, in his capacity as the
Director of the Bureau of Alcohol, Tobacco
Firearms & Explosives
was received by me on *(date)* November 21, 2013

☐ I personally served the summons on the individual at *(place)*
on *(date)* ; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)*
, a person of suitable age and discretion who resides there,
on *(date)* , and mailed a copy to the individual's last known address; or

☐ I served the summons on *(name of individual)* , who is
designated by law to accept service of process on behalf of *(name of organization)*
on *(date)* ; or

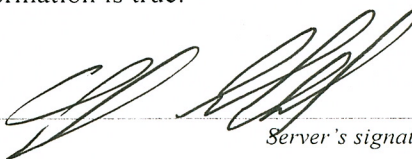
☐ I returned the summons unexecuted because ; or

☒ Other *(specify)*: I served Director Jones via Certified Mail on 12/18/13
I served the Attorney General of the United States
via Certified Mail on December 13, 13.
Domestic Return Receipts attached

My fees are \$ for travel and \$ for services, for a total of \$.

I declare under penalty of perjury that this information is true.

Date: 1/15/2014



Server's signature

Douglas T. Gould, atty for Pl.
Printed name and title

925 Glenbrook Avenue
Bryn Mawr, PA 19010

Server's address

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.
- Attach this card to the back of the mailpiece or on the front if space permits.

1. Article Addressed to:

B. Todd Jones

Bureau of ATF

99 New York Ave, N.E.

Washington, D.C. 20226

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *J. Magrath*☐ Agent☐ Addressee

B. Received by (Printed Name)

Official Business Only

C. Date of Delivery

*12/18/13*D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7013 2250 0001 6200 6551

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Eric H. Holder, Jr.

U.S. Dept. of Justice

950 Pennsylvania Avenue

Washington, D.C.

20530-0001

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X☐ Agent☐ Addressee

B. Received by (Printed Name)

[Signature]

C. Date of Delivery

D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

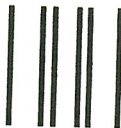
7013 2250 0001 6200 6544

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

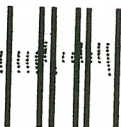
UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •
Douglas T. Gould
The Law Offices of Douglas T. Gould
925 Glenbrook Avenue
Bryn Mawr, PA 19010

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