

Attorney or Party Without Attorney (Name and Address) ANNA M. BARVIR SBN 268728 MICHEL & ASSOCIATES, P.C. 180 E OCEAN BLVD STE 200 LONG BEACH CA 90802 562-216-4444 Attorney For (Name): PLAINTIFF		Telephone No. 562-216-4444  Ref. No. or File No. 267542/2440	FOR COURT USE ONLY	
Insert name of court and name of judicial district and branch court, if any. UNITED STATES DISTRICT COURT CENTRAL DISTRICT OF CALIFORNIA 350 W. 1ST STREET LOS ANGELES, CA.				
Short Title of Case: FERNANDEZ VS LOS ANGELES COUNTY				
Invoice No.: 786087	Date:	Time:	Dep./Div.:	Case Number: 2:20-CV-09876-DMG-PDX

## PROOF OF SERVICE SUMMONS AND COMPLAINT

I certify that I am authorized to serve the SUMMONS and COMPLAINT in the within action pursuant to F.R.Civ.P.4(c) and that I served the SUMMONS and COMPLAINT as follows:

## SUMMONS

CIVIL CASE COVER SHEET

## COMPLAINT

CERTIFICATION AND NOTICE OF INTERESTED PARTIES

NOTICE OF ASSIGNMENT TO UNITED STATES JUDGES

INITIAL STANDING ORDER

NOTICE TO PARTIES OF COURT-DIRECTED ADR PROGRAM

1. Name and title of person served: ALEX VILLANUEVA, IN HIS OFFICIAL CAPACITY AS  
 SHERIFF OF LOS ANGELES COUNTY, BY SERVING  
 MARIA SERRANO, SECRETARY (AUTHORIZED TO ACCEPT)

2. Date and time of delivery: 11/05/20 , 02:25 PM

3. Place of service: RESIDENCE  
 BUSINESS 211 WEST TEMPLE STREET  
 LOS ANGELES CA 90012

## PERSONAL SERVICE

PERSONAL SERVICE, by handing copies to the person served (F.R.Civ.P.4e)

I declare under penalty of perjury that the foregoing document is true and correct.

Executed at SIGNAL HILL, state of CALIFORNIA on 11/06/20

SIGNAL ATTORNEY SERVICE, INC.

P.O. Box 91985

Long Beach CA 90809

(562)595-1337 FAX(562)595-6294

I declare under penalty of perjury, under the laws of the State of California and of the United States of America that the foregoing is true and correct.

DATE: 11/06/20

SIGNATURE

<b>Attorney or Party Without Attorney (Name and Address)</b> ANNA M. BARVIR SBN 268728 MICHEL & ASSOCIATES, P.C. 180 E OCEAN BLVD STE 200 LONG BEACH CA 90802 562-216-4444 <b>Attorney For (Name):</b> PLAINTIFF		<b>Telephone No.</b> 562-216-4444  <b>Ref. No. or File No.</b> 267542/2440	<b>FOR COURT USE ONLY</b>	
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SERVED BY: BUD A. KOOGLE FEE FOR SERVICE: \$49.00

SIGNAL ATTORNEY SERVICE, INC.  
 P.O. Box 91985  
 Long Beach CA 90809  
 (562)595-1337 FAX(562)595-6294

d. Registered California process server  
 (1) ☒ Employee or ☐ Independent Contractor  
 (2) Registration No. 2018298656  
 (3) County: LOS ANGELES  
 (4) Expiration: 02/02/21

I declare under penalty of perjury, under the laws of the State of California and of the United States of America that the foregoing is true and correct.

DATE: 11/06/20

SIGNATURE

