

Attorney or Party Without Attorney (Name and Address) C. D. MICHEL SBN 144258 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. C64100/2609	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: CALIFORNIA RIFLE & PISTOL ASSOCIATION VS CITY OF GLENDALE				
Invoice No.: 840913	Date:	Time:	Dep./Div.:	Case Number: 2:22-CV-07346-SB-JCX

## 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

COMPLAINT

CIVIL COVER SHEET

CERTIFICATION AND NOTICE OF INTERESTED PARTIES

RULE 7.1 CORPORATE DISCLOSURE STATEMENT

NOTICE OF ASSIGNMENT TO UNITED STATES JUDGES

NOTICE TO PARTIES OF COURT-DIRECTED ADR PROGRAM

NOTICE TO COUNSEL RE CONSENT TO PROCEED BEFORE A UNITED STATES MAGISTRATE JUDGE

STANDING ORDER FOR CIVIL CASE ASSIGNED TO JUDGE STANLEY BLUMENFIELD, JR.

1. Name and title of person served: GLENDALE CITY CLERK SUZIE ABAJIAN IN HER OFFICIAL CAPACITY, BY SERVING ANGIE MESERKHANI, ADMINISTRATIVE ASSISTANT (AUTHORIZED TO ACCEPT)

2. Date and time of delivery: 10/18/22 , 11:47 AM

3. Place of service: RESIDENCE  
 BUSINESS 613 E. BROADWAY  
 UNIT 110  
 GLENDALE CA 91206

## PERSONAL SERVICE

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

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: 10/19/22

SIGNATURE 

Attorney or Party Without Attorney (Name and Address) C. D. MICHEL SBN 144258 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. C64100/2609	FOR COURT USE ONLY	
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I declare under penalty of perjury that the foregoing document is true and correct.

Executed at SIGNAL HILL, state of CALIFORNIA on 10/19/22

SERVED BY: PIERCE TAING FEE FOR SERVICE: \$77.95

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: 10/19/22

d. Registered California process server  
 (1) ☒ Employee or ☐ Independent Contractor  
 (2) Registration No. 2017084744  
 (3) County: LOS ANGELES  
 (4) Expiration: 01/23/23

SIGNATURE

