



# PROCESS RECEIPT AND RETURN

PLAINTIFF

The "50 States" ex rel Sharon Bridgewater Private Attorney General *and  
qui  
tamen  
relator*

DEFENDANT

COURT CASE NUMBER

SAN FRANCISCO Superior Court  
CASE # CGC-08-478207

TYPE OF PROCESS

**SERVE  
AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

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):

Signature of Attorney other Originator requesting service on behalf of:

PLAINTIFF  
 DEFENDANT

TELEPHONE NUMBER

DATE

**DO NOT WRITE BELOW THIS LINE**

Total Process  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

District of  
Origin  
No. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

District to  
Serve  
No. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Authorized Representative

Date

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 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)

Date

Time

am  
 pm

Address (complete only different than shown above)

Signature of Authorized Representative

REMARKS