SUBPOENA

UNITED STATES OF AMERICA

DEPARTMENT OF LABOR

Employee Benefits Security Administration

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To						
You are hereby	required to appec	ır before				
of the Employee	Benefits Security	Administra	tion, U.S.	. Departmen	t of Labor, at	
in the City of on the da investigation of	yy of	200	at	o'clock	m. of that day, to testify in the Matter	of an
U.S.C. Section 1 Title I of ERISA	134, in order to a or any regulation	letermine wh n or order th	ether any ereunder	person has ;;	nt Income Security Act of 1974 ("ERISA" violated or is about to violate any provisi	on of
And you are nere documents:	eby required to br	ing with you	ana prod	luce at said t	ime and place the following books, papers	, and
Fail not at your	peril.					
ON ATES	THERICA - BOBY	and the so	eal of the		nereunto affixed my signature tes Department of Labor	

Regional Director

EBSA 200

Return of Service

I hereby certify that the original of the within

subpoena was duly served on the person named herein. (Check method used) in person by certified or registered mail other (specify)_____ by leaving at principal office or place of business, to wit: (Month, day, year) (Name of person making service) (Official Title) **Certification of Compliance** I certify that the person named herein was in attendance as a witness and/or produced the records requested herein at (Month, day, year) (Name of person certifying) (Official Title)