

Print Form



Department of the Treasury

Federal Law Enforcement Agencies
PROCESS RECEIPT AND RETURN

PLAINTIFF <u>United States of America</u>		COURT CASE NUMBER <u>2 20-cr-114-JES-MRM</u>	
DEFENDANT <u>CASEY DAVID CROWTHER</u>		TYPE OF PROCESS <u>Execution of POF/FOF</u>	
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE		
	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 PROCESS TO BE SERVED IN THIS CASE	
<u>Suzanne C. Nebesky, AUSA</u> <u>U.S. Attorney's Office</u> <u>400 North Tampa Street, Suite 3200</u> <u>Tampa, Florida 33602</u>		NUMBER OF PARTIES TO BE SERVED IN THIS CASE	
		CHECK BOX IF SERVICE IS ON USA	
		SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Includes Business and Alternate Addresses, Telephone Numbers, and Estimated Times Available For Service)	
<u>Pursuant to the attached Final Order of Forfeiture for Direct Assets, please deposit the approximately \$630,482.37 received from the sale of the real property located at 3653 San Carlos Drive, Saint James City, Florida 33956, in lieu of the property itself (the Real Property), and hold the funds in the Treasury Suspense Account until all appeals have concluded.</u>			
Signature of Attorney or other Originator requesting service on behalf of <u><i>[Signature]</i></u>		☒ PLAINTIFF ☐ DEFENDANT	TELEPHONE NO. <u>(239) 461-2200</u> DATE <u>8/30/21</u>
SIGNATURE AND DATE OF PERSON ACCEPTING PROCESS			
SPACE BELOW FOR USE OF TREASURY LAW ENFORCEMENT AGENCY			
I acknowledge receipt for the total number of process indicated	District of Origin No. _____	District to Serve No. _____	SIGNATURE OF AUTHORIZED TREASURY AGENCY OFFICER _____ DATE _____
I HEREBY CERTIFY AND RETURN THAT: ☐ 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 OR ON THE ADDRESS INSERTED BELOW ☐ I HEREBY CERTIFY AND RETURN THAT I AM UNABLE TO LOCATE THE INDIVIDUAL, COMPANY, CORPORATION, ETC NAMED ABOVE.			
NAME & TITLE OF INDIVIDUAL SERVED IF NOT SHOWN ABOVE:		☐ A person of suitable age and discretion then residing in the defendant's usual place of abode.	
ADDRESS: (Complete only if different than shown above)		DATE OF SERVICE <u>11/04/21</u>	TIME OF SERVICE ☐ AM ☐ PM
		SIGNATURE/TITLE AND TREASURY AGENCY <u><i>[Signature]</i></u> <u>US55</u>	
REMARKS:			
<u>On 11/04/21, \$630,482.37.00 received from the sale of real property located at 3653 San Carlos Drive, Saint James City, Florida 33956 was deposited in the Treasury Forfeited Fund.</u>			