

U.S. Department of Justice  
United States Marshals Service

# PROCESS RECEIPT AND RETURN

See "Instructions for Service of Process by U.S. Marshal"

|                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                    |                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|
| PLAINTIFF<br>United States of America                                                                                                                                                                                                                                                                                                                                                                           | <div style="border: 1px solid black; padding: 5px; text-align: center;">             FILED<br/>CLERK, U.S. DISTRICT COURT<br/><br/> <b>OCT 21 2021</b><br/>             CENTRAL DISTRICT OF CALIFORNIA<br/>             BY  </div> | COURT CASE NUMBER<br>CR 20-00579-SVW                                  |
| DEFENDANT<br>RICHARD AYVAZIAN                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                    | TYPE OF PROCESS<br>Forfeiture Order                                   |
| NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN<br>BY                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                    |                                                                       |
| ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                    |                                                                       |
| SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                    |                                                                       |
| AUSA BRENT A. WHITTLESEY<br>321 North Spring Street, 14th Floor<br>Los Angeles, CA 90012                                                                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                                                    |                                                                       |
| Number of process to be served with this Form 285<br>Number of parties to be served in this case<br>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):<br>21-FBI-001057<br>Please seize and secure the real propety located at 834 Calle la Primavera, Glendale California pending further order o the court.                                                           |                                                                                                                                                                                                                                    |                                                                       |
| Signature of Attorney other Originator requesting service on behalf of:<br>BRENT WHITTLESEY <small>Digitally signed by BRENT WHITTLESEY<br/>Date: 2021.09.29 15:28:26 -0700</small>                                                                                                                                                                                                                             |                                                                                                                                                                                                                                    | TELEPHONE NUMBER<br>(213) 894-5421                                    |
| <input checked="" type="checkbox"/> PLAINTIFF<br><input type="checkbox"/> DEFENDANT                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                    | DATE<br>9/29/2021                                                     |
| <b>SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE</b>                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                    |                                                                       |
| I acknowledge receipt for the total number of process indicated.<br>(Sign only for USM 285 if more than one USM 285 is submitted)                                                                                                                                                                                                                                                                               | Total Process<br>1                                                                                                                                                                                                                 | District of Origin<br>No. 12                                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                    | District to Serve<br>No. 12                                           |
| Signature of Authorized USMS Deputy or Clerk<br>                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                    | Date<br>9/30/2021                                                     |
| I hereby certify and return that I <input checked="" type="checkbox"/> have personally served, <input type="checkbox"/> have legal evidence of service, <input type="checkbox"/> have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below. |                                                                                                                                                                                                                                    |                                                                       |
| <input type="checkbox"/> 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<br>10/15/21                                                      |
|                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                    | Time<br>1210                                                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                    | <input type="checkbox"/> am<br><input checked="" type="checkbox"/> pm |
| Address (complete only different than shown above)                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                    | Signature of U.S. Marshal or Deputy<br>31788                          |
| Costs shown on attached USMS Cost Sheet >>                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                    |                                                                       |

## REMARKS

SEIZED, INSPECTED/SECURED ~~THE~~ REAL PROPERTY PER THE INSTRUCTION.

LOG # 2705 ; CAPTURE # 012-2:2020-CR-00579-2