

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Alan Shifman (SBN 177587) Law Offices of Alan Shifman 22130 Clarendon Street Woodland Hills, CA 91367 TELEPHONE NO: [REDACTED] FAX NO. (Optional): [REDACTED] E-MAIL ADDRESS (Optional): ATTORNEY FOR (Name): Oksana Grigorieva	FOR COURT USE ONLY CASE NUMBER: BF 039 488
SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: 111 North Hill Street CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Central	
PETITIONER: Mel Gibson RESPONDENT: Oksana Grigorieva OTHER:	
NOTICE AND ACKNOWLEDGMENT OF RECEIPT	

To (name of individual being served): Eric Mark George

NOTICE

The documents identified below are being served on you by mail with this acknowledgment form. You must personally sign, or a person authorized by you must sign, this form to acknowledge receipt of the documents.

If the documents described below include a summons and you fail to complete and return this acknowledgment form to the sender within 20 days of the date of mailing, you will be liable for the reasonable expenses incurred after that date in serving you or attempting to serve you with these documents by any other methods permitted by law. If you return this form to the sender, service of a summons is deemed complete on the date you sign the acknowledgment of receipt below. This is not an answer to the action. If you do not agree with what is being requested, you must submit a completed *Response* form to the court within 30 calendar days.

Date of mailing: 11/7/2010

Alan Shifman

(TYPE OR PRINT NAME)

(SIGNATURE OF SENDER—MUST NOT BE A PARTY IN THIS CASE AND MUST BE 18 OR OLDER)

ACKNOWLEDGMENT OF RECEIPT
 (To be completed by sender before mailing)

I agree I received the following:

- a. Family Law: *Petition* (form FL-100), *Summons* (form FL-110), and blank *Response* (form FL-120)
- b. Family Law—Domestic Partnership: *Petition—Domestic Partnership* (form FL-103), *Summons* (form FL-110), and blank *Response—Domestic Partnership* (form FL-123)
- c. Uniform Parentage: *Petition to Establish Parental Relationship* (form FL-200), *Summons* (form FL-210), and blank *Response to Petition to Establish Parental Relationship* (form FL-220)
- d. Custody and Support: *Petition for Custody and Support of Minor Children* (form FL-260), *Summons* (form FL-210), and blank *Response to Petition for Custody and Support of Minor Children* (form FL-270)
- e. (1) Completed and blank *Declaration Under Uniform Child Custody Jurisdiction and Enforcement Act (UCCJEA)* (form FL-105) (5) Completed and blank *Financial Statement (Simplified)* (form FL-155)
- (2) Completed and blank *Declaration of Disclosure* (form FL-140) (6) *Order to Show Cause* (form FL-300), *Application for Order and Supporting Declaration* (form FL-310), and blank *Responsive Declaration to Order to Show Cause or Notice of Motion* (form FL-320)
- (3) Completed and blank *Schedule of Assets and Debts* (form FL-142) (7) Other (specify): Civil Subpoena For Personal Appearance at Trial or Hearing (SUBP-001)
- (4) Completed and blank *Income and Expense Declaration* (form FL-150)

(To be completed by recipient)

Date this acknowledgment is signed: _____

(TYPE OR PRINT NAME)

(SIGNATURE OF PERSON ACKNOWLEDGING RECEIPT)

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Alan Shifman (SBN 177587) Law Offices of Alan Shifman 22130 Clarendon Street Woodland Hills, CA 91367 TELEPHONE NO.: [REDACTED] FAX NO.: [REDACTED] ATTORNEY FOR (Name): Oksana Grigorieva	FOR COURT USE ONLY
NAME OF COURT: Superior Court of California STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: 111 North Hill Street CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Central	
PLAINTIFF/PETITIONER: Mel Gibson DEFENDANT/RESPONDENT: Oksana Grigorieva	
<p style="text-align: center;">CIVIL SUBPOENA For Personal Appearance at Trial or Hearing</p>	CASE NUMBER: BF 039 488

THE PEOPLE OF THE STATE OF CALIFORNIA, TO (name, address, and telephone number of witness, if known):
 Eric Mark George, 2121 Ave of the Stars 24th FL, Los Angeles, CA 90067 [REDACTED]

1. YOU ARE ORDERED TO APPEAR AS A WITNESS in this action at the date, time, and place shown in the box below UNLESS you make an agreement with the person named in item 2:

a. Date: 11/10/2010	Time: 8:30 a.m.	<input checked="" type="checkbox"/> Dept.: 88	<input type="checkbox"/> Div.:	<input type="checkbox"/> Room:
b. Address: 111 North Hill Street Los Angeles, CA 90012				

2. IF YOU HAVE ANY QUESTIONS ABOUT THE TIME OR DATE FOR YOU TO APPEAR, OR IF YOU WANT TO BE CERTAIN THAT YOUR PRESENCE IS REQUIRED, CONTACT THE FOLLOWING PERSON BEFORE THE DATE ON WHICH YOU ARE TO APPEAR:

a. Name of subpoenaing party or attorney:
 Alan Shifman

b. Telephone number: [REDACTED]

3. **Witness Fees:** You are entitled to witness fees and mileage actually traveled both ways, as provided by law, if you request them at the time of service. You may request them before your scheduled appearance from the person named in item 2.

DISOBEDIENCE OF THIS SUBPOENA MAY BE PUNISHED AS CONTEMPT BY THIS COURT. YOU WILL ALSO BE LIABLE FOR THE SUM OF FIVE HUNDRED DOLLARS AND ALL DAMAGES RESULTING FROM YOUR FAILURE TO OBEY.

Date issued: 11/7/2010

Alan Shifman
 (TYPE OR PRINT NAME)

(SIGNATURE OF PERSON ISSUING SUBPOENA)

Attorney for Respondent
 (TITLE)

Requests for Accommodations

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least 5 days before the date on which you are to appear. Contact the clerk's office or go to www.courtinfo.ca.gov/forms for Request for Accommodations by Persons With Disabilities and Order (form MC-410). (Civil Code, § 54.8.)



(Proof of service on reverse)

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PLAINTIFF/PETITIONER: Mel Gibson	CASE NUMBER:
DEFENDANT/RESPONDENT: Oksana Griqorieva	BF 039 488

**PROOF OF SERVICE OF CIVIL SUBPOENA
FOR PERSONAL APPEARANCE AT TRIAL OR HEARING**

1. I served this *Civil Subpoena for Personal Appearance at Trial or Hearing* by personally delivering a copy to the person served as follows:

- a. Person served (*name*):
- b. Address where served:
- c. Date of delivery:
- d. Time of delivery:
- e. Witness fees (*check one*):
 - (1) were offered or demanded and paid. Amount: \$ _____
 - (2) were not demanded or paid.
- f. Fee for service: \$ _____

2. I received this subpoena for service on (*date*):

3. Person serving:

- a. Not a registered California process server.
- b. California sheriff or marshal.
- c. Registered California process server.
- d. Employee or independent contractor of a registered California process server.
- e. Exempt from registration under Business and Professions Code section 22350(b).
- f. Registered professional photocopier.
- g. Exempt from registration under Business and Professions Code section 22451.
- h. Name, address, telephone number, and, if applicable, county of registration and number:

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

(For California sheriff or marshal use only)
I certify that the foregoing is true and correct.

Date:

Date:

(SIGNATURE)

(SIGNATURE)