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NOTICE

The summons and other documents identified below are being served pursuant to section 415.30 of the California Code of Civil Procedure. Your failure to complete this form and return it within 20 days from the date of mailing shown below may subject you (or the party on whose behalf you are being served) to liability for the payment of any expenses incurred in serving a summons on you in any other manner permitted by law.

If you are being served on behalf of a corporation, an unincorporated association (including a partnership), or other entity, this form must be signed by you in the name of such entity or by a person authorized to receive service of process on behalf of such entity. In all other cases, this form must be signed by you personally or by a person authorized by you to acknowledge receipt of summons. If you return this form to the sender, service of a summons is deemed complete on the day you sign the acknowledgment of receipt below.

(SIGNATURE OF SENDER—MUST NOT BE A PARTY IN THIS CASE)


(SIGNATURE OF PERSON ACKNOWLEDGING RECEIPT, WITH TITLE IF
ACKNOWLEDGMENT IS MADE ON BEHALF OF ANOTHER PERSON OR ENTITY)

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Stefanie D. Hedlund

(TYPE OR PRINT NAME)


 (SIGNATURE OF SENDER—MUST

(SIGNATURE OF SENDER—MUST NOT BE A PARTY IN THIS CASE)

ACKNOWLEDGMENT OF RECEIPT

This acknowledges receipt of ***(to be completed by sender before mailing):***

1. ☐ A copy of the summons and of the complaint.
2. ☒ Other (specify): Summons on First Amended Cross-Complaint, First Amended Cross-Complaint, Model Answer to Complaint and All Cross-Complaints

(To be completed by recipient):

Date this form is signed:

TYPE OR PRINT YOUR NAME AND NAME OF ENTITY, IF ANY,
ON WHOSE BEHALF THIS FORM IS SIGNED)

(SIGNATURE OF PERSON ACKNOWLEDGING RECEIPT, WITH TITLE IF
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<p>ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Jeffrey V. Dunn/SBN 131926 Stefanie D. Hedlund/SBN 239787 Best Best & Krieger LLP 5 Park Plaza, Suite 1500, Irvine, California 92614 TELEPHONE NO: (949) 263-2600 FAX NO. (Optional): (949) 260-0972 E-MAIL ADDRESS (Optional): jeffrey.dunn@bbklaw.com ATTORNEY FOR (Name): Los Angeles County Waterworks District No. 40</p>	<p>FOR COURT USE ONLY</p>
<p>SUPERIOR COURT OF CALIFORNIA, COUNTY OF Los Angeles STREET ADDRESS: 111 North Hill Street MAILING ADDRESS: CITY AND ZIP CODE: Los Angeles, CA 90012 BRANCH NAME: Central Branch</p>	
<p>PLAINTIFF/PETITIONER: LOS ANGELES COUNTY WATERWORKS DISTRICT NO. 40, et al. DEFENDANT/RESPONDENT: DIAMOND FARMING COMPANY, et al.</p>	
<p>NOTICE AND ACKNOWLEDGMENT OF RECEIPT—CIVIL</p> <p>CASE NUMBER: Judicial Council Coordination Proceeding No. 4408</p>	

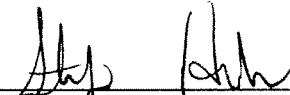
TO (insert name of party being served): ALICE CROSBY

<p style="text-align: center;">NOTICE</p> <p>The summons and other documents identified below are being served pursuant to section 415.30 of the California Code of Civil Procedure. Your failure to complete this form and return it within 20 days from the date of mailing shown below may subject you (or the party on whose behalf you are being served) to liability for the payment of any expenses incurred in serving a summons on you in any other manner permitted by law.</p> <p>If you are being served on behalf of a corporation, an unincorporated association (including a partnership), or other entity, this form must be signed by you in the name of such entity or by a person authorized to receive service of process on behalf of such entity. In all other cases, this form must be signed by you personally or by a person authorized by you to acknowledge receipt of summons. If you return this form to the sender, service of a summons is deemed complete on the day you sign the acknowledgment of receipt below.</p>

Date of mailing: June 10, 2009

Stefanie D. Hedlund

(TYPE OR PRINT NAME)

▶ 
 (SIGNATURE OF SENDER—MUST NOT BE A PARTY IN THIS CASE)

ACKNOWLEDGMENT OF RECEIPT

This acknowledges receipt of **(to be completed by sender before mailing):**

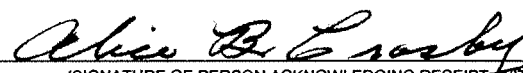
1. ☐ A copy of the summons and of the complaint.
2. ☒ Other (specify): Summons on First Amended Cross-Complaint, First Amended Cross-Complaint, Model Answer to Complaint and All Cross-Complaints

(To be completed by recipient):

Date this form is signed:

06-30-2009

TYPE OR PRINT YOUR NAME AND NAME OF ENTITY, IF ANY,
 ON WHOSE BEHALF THIS FORM IS SIGNED)


▶ 
 (SIGNATURE OF PERSON ACKNOWLEDGING RECEIPT WITH TITLE IF
 ACKNOWLEDGMENT IS MADE ON BEHALF OF ANOTHER PERSON OR ENTITY)

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Stefanie D. Hedlund

(TYPE OR PRINT NAME)


 (SIGNATURE OF SENDER—MUST BE WRITTEN)

(SIGNATURE OF SENDER—MUST NOT BE A PARTY IN THIS CASE)


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Date this form is signed: 6/28/09

Born Moene

TYPE OR PRINT YOUR NAME AND NAME OF ENTITY, IF ANY,
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 SIGNATURE OF PERSON ACKNOWLEDGING RECEIPT OF THIS

 ACKNOWLEDGMENT IS MADE ON BEHALF OF ANOTHER PERSON

(SIGNATURE OF PERSON ACKNOWLEDGING RECEIPT, WITH TITLE IF
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Stefanie D. Hedlund

(TYPE OR PRINT NAME)


 (SIGNATURE OF SENDER)

(SIGNATURE OF SENDER—MUST NOT BE A PARTY IN THIS CASE)

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2. ☒ Other (*specify*): Summons on First Amended Cross-Complaint, First Amended Cross-Complaint, Model Answer to Complaint and All Cross-Complaints

(To be completed by recipient):

Date this form is signed:

Recipient):
June 27, 2009

TYPE OR PRINT YOUR NAME AND NAME OF ENTITY, IF ANY,
ON WHOSE BEHALF THIS FORM IS SIGNED)

Betty Olsson

(SIGNATURE OF PERSON ACKNOWLEDGING RECEIPT, WITH TITLE IF
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ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): Jeffrey V. Dunn/SBN 131926 Stefanie D. Hedlund/SBN 239787 Best Best & Krieger LLP 5 Park Plaza, Suite 1500, Irvine, California 92614 TELEPHONE NO: (949) 263-2600 FAX NO. (Optional): (949) 260-0972 E-MAIL ADDRESS (Optional): jeffrey.dunn@bbklaw.com ATTORNEY FOR (Name): Los Angeles County Waterworks District No. 40	FOR COURT USE ONLY
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PLAINTIFF/PETITIONER: LOS ANGELES COUNTY WATERWORKS DISTRICT NO. 40, et al. DEFENDANT/RESPONDENT: DIAMOND FARMING COMPANY, et al.	
NOTICE AND ACKNOWLEDGMENT OF RECEIPT—CIVIL	CASE NUMBER: Judicial Council Coordination Proceeding No. 4408

TO (insert name of party being served): DAVID MEYER

NOTICE

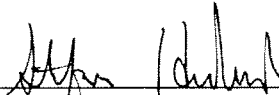
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Date of mailing: June 10, 2009

Stefanie D. Hedlund

(TYPE OR PRINT NAME)

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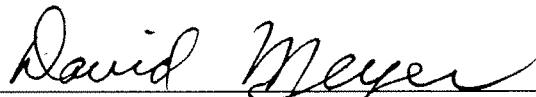
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(To be completed by recipient):

Date this form is signed: 6-28-09

DAVID MEYER

TYPE OR PRINT YOUR NAME AND NAME OF ENTITY, IF ANY,
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▶ 

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LISA MEYER

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