SHERIFF'S INSTRUCTIONS SUMMONS AND PETITION

ATTORNEY OR PARTY WITHOU	T ATTORNEY		
NAME:	CTI Corporation System		
STREET ADDRESS:	818 West Seventh St. STE 930		
CITY, STATE AND ZIP:	Los Angeles, CA 90017		
TELEPHONE:	3188074500	Shirt	
COLUMN		3 5 5 5	
COURT NAME:	16th Circuit Court, Jackson County, MO	A GOLES COM	
ADDRESS:	415 E 12th St, Kansas City, MO 64106		
PLAINTIFF:	Noah Worcester		
DEFENDANT:			
CASE NO:	Coast Professional Inc	Y M D U CI :ce	
CASE NO.		Jim McDonnell, Sheriff	
SHERIFF'S BRANCH OFFICE			
BRANCH NAME:	LOS ANGELES		
ADDRESS:	110 N. GRAND AVE RM 525 , LOS ANGELES , 90012		
TELEPHONE:	(213)-972-3930		
LEVYING OFFICER NO:			
Serve the attached the summons and complaint and any additional documents listed below on the defendant at the address specified. Service is C is not C subject to the trial court reduction act and must be completed by (date). Respondent:			
RESPONDENT NAME:			
BUSINESS NAME (if an	y): Coast Professional Inc		
STREET ADDRESS:	818 WEST SEVENTH ST.		
CITY, STATE AND ZIP:	LOS ANGELES CA	90017	
Additional documents to be served with summons and complaint:			
Comments (defendant's description, work hours, etc.): Alternative Address: Coast Professional, Inc. 314 Expo Circle, Suite 7 West Monroe, LA 71292			
Payments/Refunds:			
Make all refunds to the for PAYEE NAME: ADDRESS: TELEPHONE:	llowing (if different from the party at the top of this form):		
	mitted by the above attorney or party (if no attorney.) All correspondence will be sent to said party.		
DATE:	BY: /s/Noah Alexander Worcester		

(SIGNATURE OF ABOVE ATTORNEY OR PARTY WITHOUT ATTORNEY)