

U.S. Department of Justice  
United States Marshals Service

**PROCESS RECEIPT AND RETURN**

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

PLAINTIFF American Board of Internal Medicine	COURT CASE NUMBER (Eastern Dist. PA) 2:09 cv 5707 - JCS
DEFENDANT Dr. Rajender K. Arora, Arora Board Review, Dr. Anise Kachadourian and John Does 1-50	TYPE OF PROCESS TRO/Seizure Order

**SERVE AT**

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN  
Dr. Rajender K. Arora

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)  
[REDACTED]

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Hara K. Jacobs  
Ballard Spahr LLP  
1735 Market Street, 51st Floor  
Philadelphia, PA 19103

Number of process to be served with this Form 285	1
Number of parties to be served in this case	3
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):

Signature of Attorney other Originator requesting service on behalf of:

*[Handwritten Signature]*

PLAINTIFF  
 DEFENDANT

TELEPHONE NUMBER  
215.864.8209

DATE  
12/2/2009

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 3	District of Origin No. 50	District to Serve No. 50	Signature of Authorized USMS Deputy or Clerk	Date 12/3/09
--	--------------------	------------------------------	-----------------------------	--	-----------------

I hereby certify and return that I  have 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 on the on the individual, company, corporation, etc. shown at the address inserted below.

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)

A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Date: 12/8/09 Time: 9:15  am  pm

Signature of U.S. Marshal or Deputy  
*[Handwritten Signature]*

Service Fee \$495.00	Total Mileage Charges including endeavors 10872.216830 1811.98	Forwarding Fee	Total Charges \$5068.8	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) \$0.00
-------------------------	--	----------------	---------------------------	------------------	---

REMARKS:  
12/8 - DUSM CORRY COLE / DUSM JERRY SANDREVELLO / DUSM BILL UHLER  
- 0 - \$495.00 - 0 -

- PRINT COPIES:**
1. CLERK OF THE COURT
  2. USMS RECORD
  3. NOTICE OF SERVICE
  4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
  5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

2:09-cv-5707-2

U.S. Department of Justice  
United States Marshals Service

**PROCESS RECEIPT AND RETURN**  
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF  
American Board of Internal Medicine

DEFENDANT  
Dr. Rajender K. Arora, Arora Board Review, Dr. Anise Kachadourian and John Does 1-50

COURT CASE NUMBER Eastern Dist. Pa  
2:09 cv 5707 - JCS

TYPE OF PROCESS  
Temp. Restraining Order

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN  
Dr. Anise Kachadourian

ADDRESS (Street or RFD, Apartment No., City, State, and ZIP Code)  
[Redacted]

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Hara K. Jacobs Ballard Spahr LLP 1735 Market Street, 51st Floor Philadelphia, PA 19103	Number of process to be served with this Form 285	1
	Number of parties to be served in this case	3
	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):

Signature of Attorney other Originator requesting service on behalf of: [Signature]

PLAINTIFF  DEFENDANT

TELEPHONE NUMBER: 215.864.8209

DATE: 12/2/2009

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY - DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process <u>3</u>	District of Origin No. <u>50</u>	District to Serve No. <u>50</u>	Signature of Authorized USMS Deputy or Clerk	Date <u>12/3/09</u>
--	---------------------------	-------------------------------------	------------------------------------	--	------------------------

I hereby certify and return that I  have 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 on the on the individual, company, corporation, etc. shown at the address inserted below.

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): G. Boudourian  
Husband

A person of suitable age and discretion then residing in defendant's usual place of abode

Date: 12/08/09 Time: 13:19  am  pm

Signature of U.S. Marshal or Deputy: [Signature]

Service Fee <u>\$ 55.00</u>	Total Mileage Charges including endorsements <u>54.58 x .55 = \$30.02</u>	Forwarding Fee	Total Charges <u>\$85.02</u>	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*) <u>\$0.00</u>
--------------------------------	--	----------------	---------------------------------	------------------	--

REMARKS: 12/8/09 - DUSM Bill Walker / From NEWARK TO TOWACO and then TO LIVINGSTON (Mileage)

- PRINT 5 COPIES:**
1. CLERK OF THE COURT
  2. USMS RECORD
  3. NOTICE OF SERVICE
  4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
  5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

2:09-CV-5707-3

U.S. Department of Justice  
United States Marshals Service

**PROCESS RECEIPT AND RETURN**  
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF  
American Board of Internal Medicine

DEFENDANT  
Dr. Rajender K. Arora, Arora Board Review, Dr. Anise Kachadourian and John Does 1-50

COURT CASE NUMBER (Eastern Dist. PA)  
2:09 cv 5707 - JCJ

TYPE OF PROCESS  
TRO/Seizure Order

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN  
Arora Board Review

ADDRESS (Street or RFD, Apartment No., City, State and ZIP)  
[Redacted]

SEND NOTICE OF SERVICE TO REQUESTER AT NAME AND ADDRESS BELOW

Hara K. Jacobs Baillard Spahr LLP 1735 Market Street, 51st Floor Philadelphia, PA 19103	Number of process to be served with this Form 285	1
	Number of parties to be served in this case	3
	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):

FILED

Signature of Attorney other Originator requesting service on behalf of:  
*[Signature]*

PLAINTIFF  
 DEFENDANT

TELEPHONE NUMBER  
215.864.8209

DATE  
12/2/2009

**SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE**

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 3	District of Origin No. 50	District to Serve No. 50	Signature of Authorized USMS Deputy or Clerk E. Baskerville	Date 12/3/09
--	--------------------	------------------------------	-----------------------------	--	-----------------

I hereby certify and return that  I have personally served,  I have legal evidence of service,  I 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.

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)  
RAJENDER ARORA

Address (complete only different than shown above)

A person of suitable age and discretion then residing in defendant's usual place of abode

Date  
12/9/09

Time  
9:15

am  
 pm

Signature of U.S. Marshal or Deputy  
*[Signature]*

Service Fee \$ 1540.00	Total Mileage Charges including endeavors 29.81 + 11.88 = \$41.69	Forwarding Fee	Total Charges \$1581.69	Advance Deposits	Amount owed to U.S. Marshal or (Amount of Refund*) \$0.00
---------------------------	--	----------------	----------------------------	------------------	--

REMARKS: 12/7/09 - ADVANCE = SWC - \$110.00 + mile - \$29.81 = \$139.81  
1/8 - Dism Carey Cole / Dism Jellen Sauseverian / Dism Bill Under / mileage \$715.00 / 10.81 x 2 = 21.60 x .55 = \$11.88

PRINT 5 COPIES

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

2:09-CV-5707-1

ABIM v. Dr. Rajender K. Arora and Arora Board Review ("ABR")

INVENTORY

Execution Of Seizure & Impoundment Order  
Items Seized From 

1<sup>ST</sup> FLOOR STUDY (5 Boxes)

Box 1 of 5

ABR/Dr. Arora Financial Records  
ABR Listings of Student candidates  
ABR Course Materials  
ABR Enrollment Brochures  
ABR Marketing Documents  
ABR Medical Newsletters for Certification & Recertification

Box 2 of 5

ABR/Dr. Arora Financial Records  
ABR Listings of Student candidates  
ABR Course Materials  
ABR Enrollment Brochures  
ABR Marketing Documents  
ABR Medical Newsletters for Certification & Recertification

Box 3 of 5

ABR/Dr. Arora Financial Records  
ABR Listings of Student candidates  
ABR Course Materials  
ABR Enrollment Brochures  
ABR Marketing Documents  
ABR Medical Newsletters for Certification & Recertification

Box 4 of 5

ABR/Dr. Arora Financial Records  
ABR Listings of Student candidates  
ABR Course Materials  
ABR Enrollment Brochures  
ABR Marketing Documents  
ABR Medical Newsletters for Certification & Recertification

Box 5 of 5

ABR/Dr. Arora Financial Records  
ABR Listings of Student candidates  
ABR Course Materials  
ABR Enrollment Brochures  
ABR Marketing Documents  
ABR Medical Newsletters for Certification & Recertification

**BASEMENT BOILER ROOM (5 Boxes)**

Box 1 of 5

2006 ABR Enrollment Forms and customer correspondence

Box 2 of 5

2006 ABR Enrollment Forms and customer correspondence

Box 3 of 5

2007 ABR Enrollment Forms and customer correspondence

Box 4 of 5

2005 ABR Enrollment Forms and customer correspondence

Box 5 of 5

2009 ABR Enrollment Forms and customer correspondence

**1<sup>ST</sup> FLOOR COAT CLOSET (8 Boxes)**

Box 1 of 8

ABR Flash Cards

Box 2 of 8

ABR Flash Cards

Box 3 of 8

ABR Flash Cards

Box 4 of 8

ABR Flash Cards

Box 5 of 8

ABR Flash Cards

Box 6 of 8

2008 ABR Enrollment Forms and customer correspondence

Box 7 of 8  
2009 ABR Outlines and customer correspondence

Box 8 of 8  
ABR Re-Certification Course Brochures

**2<sup>ND</sup> FLOOR OFFICE (15 Boxes)**

Box 1 of 15  
ABR/Dr. Arora business records and infringing materials

Box 2 of 15  
ABR/Dr. Arora business records and infringing materials

Box 3 of 15  
ABR/Dr. Arora business records and infringing materials

Box 4 of 15  
ABR/Dr. Arora business records and infringing materials

Box 5 of 15  
ABR/Dr. Arora business records and infringing materials

Box 6 of 15  
ABR/Dr. Arora business records and infringing materials

Box 7 of 15  
ABR/Dr. Arora business records and infringing materials

Box 8 of 15  
ABR/Dr. Arora business records and infringing materials

Box 9 of 15  
ABR/Dr. Arora business records and infringing materials

Box 10 of 15  
ABR/Dr. Arora business records and infringing materials s

Box 11 of 15  
ABR/Dr. Arora business records and infringing materials

Box 12 of 15

ABR/Dr. Arora business records and infringing materials s

Box 13 of 15

ABR/Dr. Arora business records and infringing materials

Box 14 of 15

ABR/Dr. Arora business records and infringing materials

Box 15 of 15

ABR/Dr. Arora business records and infringing materials

**2<sup>ND</sup> FLOOR PAVAN'S ROOM (1 Box)**

Box 1 of 1

ABR/Dr. Arora business records and infringing materials

**MISCELLANEOUS ITEMS OBTAINED FROM MULTIPLE ROOMS (1 Box)**

Box 1 of 1

ABR/Dr. Arora business records and infringing materials

**IMAGED HARDWARE DEVICES (Left on scene following imaging)**

- A. Dell Laptop Inspiron E1705; 120GB Hitachi hdd (2<sup>nd</sup> Floor Office Desktop)
- B. Dell Laptop Inspiron B130; 40GB Western Digital hdd (2<sup>nd</sup> Floor Back Bedroom)
- C. Dell Desktop Dimension XPSR450 6GB Fujitsu hdd (Basement Office)
- D. Sirex Desktop 6GB Fujitsu hdd (Basement Office)
- E. ASUS PC900 12GB ssd (2<sup>nd</sup> Floor Office)
- F. I Phone – Dr. Arora Personal
- G. Sony Vaio Laptop Model Number PCG993L (2nd Floor Office Under Shelf Unit Next To Copier)

**SEIZED ELECTRONIC MEDIA & EXTERNAL DRIVES (1 Box)**

- A. External USB Western Digital HD WD3200 D032-00 S/N WCAPD2705R7 (2<sup>nd</sup> Floor Front Bedroom – Walk In Closet)
- B. External USB HD Western Digital WD 10000 H1U-08 S/N WCAU46172513 (2<sup>nd</sup> Floor Office, Back Closet)
- C. Quantum Lightning Pro Drive HD UDD1818245 (2<sup>nd</sup> Floor Office Cabinet above desktop)

D. External HD Case w/ Drive Inside WD400EB-11CPFO S/N WMAAT1267949  
(2<sup>nd</sup> Floor Office, Back Closet)

E. Backup Tape – Imation Taran “Network Series” 8GB – Labeled “Mon.” – 16c,  
1246051401, 4329311 (17) (Basement Office)

F. Backup Tape - Imation Taran “Network Series” 8GB - Labeled “Wed.” – 16c,  
0557051401, 4329124037 (2<sup>nd</sup> Floor Office)

G. CDR – “Rheumatology Memory Slides (97MB) 5126GL102LH3833A4 (2nd  
Floor Front Bedroom Walk In Closet)

H. DUP-R “Computer Copy 2008”– Various Files MT691KK)9145736 B2 (2nd  
Floor Front Bedroom Walk In Closet)

I. C-R Sony – No Label – Office Docs. VH05B 7020518 5 80C2 (2nd Floor Front  
Bedroom Walk In Closet)

J. CD-R Sony – No Label – Office Docs. VH05B17020515 5 80 C2 (2nd Floor  
Front Bedroom Walk In Closet)

K. DVD-R Imation “June 2008” – Office Docs – MTP691KK 09145729 B5 (2nd  
Floor Front Bedroom Walk In Closet)

**Total Number of Inventoried Boxes: 36**