UNITED STATES DISTRICT COURT

for the

Eastern District of Texas

NETWORK-1 SECURITY SOLUTIONS, INC.)
Plaintiff)
v.) Civil Action No. 6:11cv492
Alcatel-Lucent Holdings Inc. et.al.)
)
Defendant)

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address) Dell Inc.

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: T. John Ward, Jr.

Ward & Smith Law Firm

P.O. Box 1231

Longview, Texas 75606

(903) 757-6400

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: 12/9/11

David Naland
Signature of Clerk or Deputy Clerk



Civil Action No. 6:11cv492

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

	This summons for (name of	individual and title, if any)	Dell Inc.		
was rec	ceived by me on (date)	12/14/2011	*	·	
	☐ I personally served the	summons on the indivi	dual at (place)		
	_ personany served the	sammons on the mary	on (date)	; or	
	☐ I left the summons at th	o individual's maidana			
	☐ I left the summons at the individual's residence or usual place of abode with (name), a person of suitable age and discretion who resides there,				
2	on (date)		by to the individual's last kno	And the state of t	
	☐ I served the summons o				
			behalf of (name of organization)	, who is	
	, accep	2 process on	on (date)	; or	
•	☐ I returned the summons	unevecuted because		* ***	
	,			; or	
	Other (specify): Certified	d Mail, Return Receipt I	Requested 7011 0470 0000 8	3756 6444	
Date:	My fees are \$ I declare under penalty of p	for travel and \$ perjury that this informa	for services, for ation is true.	Adva	
IDER: CO	MADI ETE TURO SESTION	OOMBLETE TURN		ature	
Complete ite rem 4 if Res Print your na to that we ca ttach this ca r on the from	MPLETE THIS SECTION oms 1, 2, and 3. Also complete tricted Delivery is desired. In and address on the reverse an return the card to you. ard to the back of the mailpiece ont if space permits.	A. Signature X B. Received by (Print)	Agent Addressee Addressee Addressee Addressee Addressee Addressee Addressee Addressee	nd title	
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SERVICE CO 211 E 7TH S	DRATION SERVICE COMPANY DBA C NCORPORATING OMPANY BT STE 620 (78701-3218	3. Service Type Certified Mail	□ Express Mail	=	
K12/1	4	☐ Registered ☐ Insured Mail 4. Restricted Deliver	☐ Return Receipt for Merchandise ☐ C.O.D. y? (Extra Fee) ☐ Yes		

