Certificate of Service

I hereby certify that a true and correct copy of the foregoing pleading was served upon the respondent by [date and manner of service].

Respondent's Counsel's Name U.S. Department of Justice Vaccine Litigation Torts Branch/Civil Division P.O. Box 146 Ben Franklin Station Washington, D.C. 20044-0146

<u>Signature</u>

Attorney of Record Name Firm Name Address City, State, Zip code Phone number Facsimile number Email Address