Case 1:14-cv-00059-CKK Document 1-1 Filed 01/16/14 Page 1 of 2 CIVIL COVER SHEET

									1	
I. (a) PLAINTIFFS			DEFENDANTS							
CENTER FOR BIOLOGICAL DIVERSITY			U.S. FISH AND WILDLIFE SERVICE							
(b) COUNTY OF RESIDENCE OF FIRST LISTED PLAINTIFF 88888			COUNTY OF RESIDENCE OF FIRST LISTED DEFENDANT							
(EXCEPT IN U.S. PLAINTIFF CASES)			(IN U.S. PLAINTIFF CASES ONLY) NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED							
(c) ATTORNEYS (FIRM NAME, ADDRES	S, AND TELEPHONE NUMBER)		ATTORNEYS (II	F KNOWN	J)					
Amy R. Atwood, D.C. Bar No	. 470258									
Center for Biological Diversity	у									
P.O. Box 11374, Portland, OR 97211-0374										
(971) 717-6401										
II. BASIS OF JURISDICTION		III. CITIZENSHIP OF PRINCIPAL PARTIES (PLACE AN X IN ONE BOX FOR PLAINTIES AND ONE BOX FOR DEFENDANT) FOR DIVERSITY CASES ONLY								
(PLACE AN x IN ONE BOX ONLY)		PLAINTIFF AND ONE BOX FOR DEFENDANT) FOR DIVERSITY CASES ONLY! PTF DFT PTF DFT PTF DFT							DFT	
	ederal Question J.S. Government Not a Party)	Citizen of this State O 1 O 1 Incorpora				orated or Principal Place	O 4	O 4		
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2 U.S. Government 4 D	viversity	Citizen of A	Another State	O 2	O 2			O 5	O.5	
	ndicate Citizenship of	CITIZEII OI F	Miother State	O 2	O 2		orated and Principal of Business in Another Sta	O 5	O 5	
Pa	arties in item III)	Citizen or S	Subject of a	O 3	O 3			_		
		Foreign Co	untry		O 3	Foreign	n Nation	O 6	O 6	
	THE CASE ASSIS	ONIN CONTO	C 4 N I D N I 4 7 C I	UDE	E CITE	TD.				
IV. CASE ASSIGNMENT AND NATURE OF SUIT (Place an X in one category, A-N, that best represents your Cause of Action and <u>one</u> in a corresponding Nature of Suit)										
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	ersonal Injury/	O C	. Administr	ative A	gency		O D. Temporar		ining	
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	rplane Product Liability							gory		
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O G. Habeas Corpus/ 2255	O H. Employment Discrimination	⊙ I. FOIA/Privacy Act	O J. Student Loan	
530 Habeas Corpus – General 510 Motion/Vacate Sentence 463 Habeas Corpus – Alien Detainee	442 Civil Rights – Employment (criteria: race, gender/sex, national origin, discrimination, disability, age, religion, retaliation)	× 895 Freedom of Information Act 890 Other Statutory Actions (if Privacy Act)	152 Recovery of Defaulted Student Loan (excluding veterans)	
	(If pro se, select this deck)	*(If pro se, select this deck)*		
 K. Labor/ERISA (non-employment) ☐ 710 Fair Labor Standards Act ☐ 720 Labor/Mgmt. Relations ☐ 740 Labor Railway Act ☐ 751 Family and Medical Leave Act ☐ 790 Other Labor Litigation ☐ 791 Empl. Ret. Inc. Security Act 	C L. Other Civil Rights (non-employment) 441 Voting (if not Voting Rights Act) 443 Housing/Accommodations 440 Other Civil Rights 445 Americans w/Disabilities – Employment 446 Americans w/Disabilities – Other 448 Education	M. Contract 110 Insurance 120 Marine 130 Miller Act 140 Negotiable Instrument 150 Recovery of Overpayment & Enforcement of Judgment 153 Recovery of Overpayment of Veteran's Benefits 160 Stockholder's Suits 190 Other Contracts 195 Contract Product Liability 196 Franchise	O N. Three-Judge Court 441 Civil Rights – Voting (if Voting Rights Act)	
v. origin	3 Remanded from 4 Reinstated o	r 0 5 Transferred from 0 6 Mu	Iti-district 7 Appeal to	
O 1 Original Proceeding Court 2 Removed from State	3 Remanded from Appellate Court Reopened		gation District Judge from Mag. Judge	
VI. CAUSE OF ACTION (CITE T Claim alleging failure to condu	HE U.S. CIVIL STATUTE UNDER WHICH uct an adequate search in violation	YOU ARE FILING AND WRITE A BR of the Freedom of Information A	NET STATEMENT OF CAUSE.) Act, 5 U.S.C. § 552.	
VII. REQUESTED IN COMPLAINT	CHECK IF THIS IS A CLASS ACTION UNDER F.R.C.P. 23 DEMAN	D S Check URY DEMAND: YES	YES only if demanded in complaint NO NO	
VIII. RELATED CASE(S) IF ANY	(See instruction) YES	NO X If yes,	please complete related case form	
DATE:January 16, 2014	SIGNATURE OF ATTORNEY OF RE	CCORD		

INSTRUCTIONS FOR COMPLETING CIVIL COVER SHEET JS-44 Authority for Civil Cover Sheet

The JS-44 civil cover sheet and the information contained herein neither replaces nor supplements the filings and services of pleadings or other papers as required by law, except as provided by local rules of court. This form, approved by the Judicial Conference of the United States in September 1974, is required for the use of the Clerk of Court for the purpose of initiating the civil docket sheet. Consequently, a civil cover sheet is submitted to the Clerk of Court for each civil complaint filed. Listed below are tips for completing the civil cover sheet. These tips coincide with the Roman Numerals on the cover sheet.

- COUNTY OF RESIDENCE OF FIRST LISTED PLAINTIFF/DEFENDANT (b) County of residence: Use 11001 to indicate plaintiff if resident
 of Washington, DC, 88888 if plaintiff is resident of United States but not Washington, DC, and 99999 if plaintiff is outside the United States.
- III. CITIZENSHIP OF PRINCIPAL PARTIES: This section is completed only if diversity of citizenship was selected as the Basis of Jurisdiction under Section II.
- IV. CASE ASSIGNMENT AND NATURE OF SUIT: The assignment of a judge to your case will depend on the category you select that best represents the <u>primary</u> cause of action found in your complaint. You may select only <u>one</u> category. You <u>must</u> also select <u>one</u> corresponding nature of suit found under the category of the case.
- VI. CAUSE OF ACTION: Cite the U.S. Civil Statute under which you are filing and write a brief statement of the primary cause.
- VIII. RELATED CASE(S), IF ANY: If you indicated that there is a related case, you must complete a related case form, which may be obtained from the Clerk's Office.

Because of the need for accurate and complete information, you should ensure the accuracy of the information provided prior to signing the form.