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CIVIL COVER SHEET

	D	EFENDANTS							
(b) COUNTY OF RESIDENCE OF FIRST LISTED PLAINTIFF(EXCEPT IN U.S. PLAINTIFF CASES)			COUNTY OF RESIDENCE OF FIRST LISTED DEFENDANT (IN U.S. PLAINTIFF CASES ONLY) NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED						
ND TELEPHONE NUMBER)	A	TTORNEYS (IF KN	OWN)						
	PLAINTIFF AND ONE BOX FOR DEFENDANT) FOR DIVERSITY CASES ONLY!								
ral Question Government Not a Party) Citi	izen of this	0				O 4	O 4		
cate Citizenship of	of Busine				O 5	O 5			
Fore	Foreign Country Foreign			Nation	O 6	O 6			
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)									
rsonal Injury/ lpractice	O C. Administrative Agency Review O D. Temporary Restraining Order/Preliminary Injunction								
330 Federal Employers Liability 340 Marine 345 Marine Product Liability 350 Motor Vehicle 355 Motor Vehicle Product Liability			Social Security 861 HIA (1395ff) 862 Black Lung (923) 863 DIWC/DIWW (405(g)) 864 SSID Title XVI 865 RSI (405(g)) Other Statutes 891 Agricultural Acts 893 Environmental Matters 890 Other Statutory Actions (If Administrative Agency is Involved)			Any nature of suit from any category may be selected for this category of case assignment. *(If Antitrust, then A governs)*			
OR	0			ivil					
422 Appeal 27 USC 158 423 Withdrawal 28 USC 1 Prisoner Petitions 535 Death Penalty 540 Mandamus & Other 550 Civil Rights 555 Prison Conditions 560 Civil Detainee – Conditions of Confinement Property Rights 820 Copyrights 830 Patent	litions	870 Taxes (US plaintiff or defendant) 871 IRS-Third Party 26 USC 7609 Forfeiture/Penalty 625 Drug Related Seizure of Property 21 USC 881 690 Other Other Statutes 375 False Claims Act 376 Qui Tam (31 USC 3729(a)) 400 State Reapportionment 430 Banks & Banking 450 Commerce/ICC Rates/etc. 460 Deportation		462 Naturalization Application 465 Other Immigration Actions 470 Racketeer Influenced & Corrupt Organization 480 Consumer Credit 490 Cable/Satellite TV 850 Securities/Commodities/ Exchange 896 Arbitration 899 Administrative Procedure Act/Review or Appeal of Agency Decision 950 Constitutionality of State Statutes 890 Other Statutory Actions (if not administrative agency review or Privacy Act)					
	al Question Government Not a Party) Sity Cit Sity Cit Sity in item III) IV. CASE ASSIGNM A.A.N, that best represents Sonal Injury/ Practice Iane Iane Product Liability Int, Libel & Slander ral Employers Liability Int Care/Pharmaceutical Injury Personal Injury Ical Malpractice Interplay Injury Interplay Injury Ical Malpractice Ical Malpracti	al Question Government Not a Party) Sity Late Citizenship of Si in item III) IV. CASE ASSIGNMENT Ally, A-N, that best represents your Carbon and Injury/ Late Citizenship of Si in item III) IV. CASE ASSIGNMENT Ally, A-N, that best represents your Carbon and Injury/ Late Citizen of And Citizen of And Citizen of Subproving Country IV. CASE ASSIGNMENT Ally, A-N, that best represents your Carbon and Injury/ Late Citizen of And Citizen of	III. CITIZENSHIP OF PRI PLAINTIFF AND ONE BOX FOR D PTF Citizen of this State	ATTORNEYS (IF KNOWN) III. CITIZENSHIP OF PRINCIPAL PLAINTIFF AND ONE BOX FOR DEFENDANT PTF DET Citizen of this State	ATTORNEYS (IF KNOWN) III. CITIZENSHIP OF PRINCIPAL PARTIE PLAINTIFF AND ONE BOX FOOD EDEFENDANT) FOR DIV PIF DET Citizen of this State	COUNTY OF RESIDENCE OF FIRST LISTED DEFENDANT INTIFF CASES) ATTORNEYS (IF KNOWN) III. CITIZENSHIP OF PRINCIPAL PARTIES (PLACE AN x IN ONE PLAINTIFF AND ONE BOX FOR DEFENDANT) FOR DIVERSITY CASES ONLY) PIF DET Citizen of this State O 1 O 1 Incorporated or Principal Place of Business in This State Citizen of Another State O 2 O 2 Incorporated and Principal Place of Business in This State Citizen of Subject of a O 3 O 3 Foreign Country TV. CASE ASSIGNMENT AND NATURE OF SUIT (A.A.), that best represents your Cause of Action and one in a corresponding Nature of Suit Security (A.A.), that best represents your Cause of Action and one in a corresponding Nature of Suit Scale Back Lung (923) (Bank Lung (923) (Balak Lung (923) (Bala Steprity (Bala	COUNTY OF RESIDENCE OF FIRST LISTED DETENDANT (IN U.S. PLAINTIFF CASES) ONLY) SOTE BLAND CONSIDERATION COSSISTS THE IDECATE OF THE TRACTOF LAND INVOLVE STATE OF THE COUNTY OF RESIDENCE OF FIRST LISTED DETENDANT (IN U.S. PLAINTIFF CASES ONLY) SOTE BLAND CONSIDERATION COSSISTS THE IDECATE OF THE TRACTOF LAND INVOLVE ATTORNEYS (IF KNOWN)		

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O G. Habeas Corpus/ 2255	O H. Employment Discrimination	O 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)*						
O 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	O 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	O 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								
O 1 Original Proceeding From State Court O 3 Remanded O 4 Reinstated O 5 Transferred From another district (specify) O 6 Multi-district O 7 Appeal to District Judge From Mag. Direct File Judge								
VI. CAUSE OF ACTION (CITE THE U.S. CIVIL STATUTE UNDER WHICH YOU ARE FILING AND WRITE A BRIEF STATEMENT OF CAUSE.)								
VII. REQUESTED IN COMPLAINT	A COTION INDED E D C D 22							
VIII. RELATED CASE(S) IF ANY	(See instruction) YES	NO If yes, pl	lease complete related case form					
DATE:	SIGNATURE OF ATTORNEY OF REC	NEY OF RECORD						

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.

- I. 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 <u>only</u> 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.