## CIVIL COVER SHEET

JS-44 (Rev. 7/13 DC)											
I. (a) PLAINTIFFS				DEFENDANTS							
Hameedullah Amini Airaj				United States Department of State							
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		00000		COUNTY OF RESIDENCE OF FIRST LISTED DEFENDANT 1					01		
(EX	CE OF FIRST I	LISTED PLAINTIFF 99999 PLAINTIFF CASES)	- COUNTY OF RESIDENCE OF THIS PERSONNEL TO THE								
		S, AND TELEPHONE NUMBER)	Case: 1:15-cv-00983								
Ballard Spahr LLP		<b>21.11.2</b> 12.11011211-1111,	Assigned To : Huvelle, Ellen S.								
		nr	Assign. Date: 6/23/2015								
1909 K Street, NW, 12th Floor Washington, DC 20006			Description: FOIA/ Privacy Act (I)								
]			Description. FOIA/ Frivacy Act (1)								
II DAGIG OF HIDIG	DICTION	· · · · · · · · · · · · · · · · · · ·	III CITI	ZENCHID O	E DDIN	CIDAI	DADTI	EC OVER AND DECOME	DOW FOR		
II. BASIS OF JURIS (PLACE AN x IN ONE			III. CITIZENSHIP OF PRINCIPAL PARTIES (PLACE AN x IN ONE BOX FOR PLAINTIFF AND ONE BOX FOR DEFENDANT) FOR DIVERSITY CASES ONLY!								
1 U S Government	<b>O</b> 3 F	ederal Question	PTF DFT PTF DFT							DFT	
Plaintiff		J S Government Not a Party)	Citizen of	Citizen of this State O 1 O I Incorporated or Princip					<b>O</b> 4	<b>O</b> 4	
	_				_	_	of Business in This State				
② 2 U S Government		Diversity	Citizen of Another State O 2 O 2 Incorp			Incorpo	orated and Principal O 5 O 5				
Defendant		Indicate Citizenship of arties in item III)	Citizan	Subject of a	<b>^</b> .	^-	Place o	of Business in Another State			
		,	Citizen or Subject of a 3 3 Foreign Country Foreign			Foreign	n Nation	<b>O</b> 6	<b>O</b> 6		
								11			
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)											
	_						a corre				
O A. Antitrust		Personal Injury/		C. Adminis	trative A	<b>1</b> gency		O D. Temporar		ining	
	] N	<i>lalpractice</i>	1	Review			Order/Prel				
410 Antitrust		rplane	151 Medicare Act			Injunction  Any nature of suit from any category may be selected for this category of case assignment.					
		rplane Product Liability	Social Security 861 HIA (1395ff)								
	_	sault, Libel & Slander									
	330 FG	deral Employers Liability	862 Black Lung (923)								
	345 Marine Product Liability			863 DIWC/DIWW (405(g))				*(If Antitrust, then A governs)*			
}	350 Motor Vehicle		864 SSID Title XVI 865 RSI (405(g))								
	355 Motor Vehicle Product Liability			Other Statutes							
	l <u></u>	ther Personal Injury edical Malpractice	891 Agricultural Acts								
l	_	oduct Liability	893 Environmental Matters								
		ealth Care/Pharmaceutical	890 Other Statutory Actions (If Administrative Agency is				:				
		rsonal Injury Product Liabili	ity Involved)								
	368 A	sbestos Product Liability	1								
O E Communici		Op		7 F Dra	Sa Can	anal Cir	.:1	<u> </u>			
O E. General Ci	vu (Otner)	OR		Forfaitur		erui Civ	'il				
Real Property 210 Land Condem	nation	Bankruptcy 422 Appeal 27 USC 15	8	Forfeitur 625	<u>e/Penaity</u> Drug Rela	ited Seiz	ure of	480 Consumer C	Credit		
220 Foreclosure 423 Withdrawal 28 US							l ——				
230 Rent, Lease & Ejectment							850 Securities/Commodities/				
240 Torts to Land Prisoner Petitions  245 Tort Product Liability 535 Death Penalty							Exchange 896 Arbitration				
245 Tort Product Liability 535 Death Penalty 290 All Other Real Property 540 Mandamus & Other			oer Other Statutes				899 Administrative Procedure				
550 Civil Rights			375 False Claims Act			Act/Review or Appeal of					
Personal Property 555 Prison Conditions			<del>                                   </del>			Agency Decision					
370 Other Fraud 560 Civil Detainee – C of Confinement			onditions 430 Banks & Banking 450 Commerce/ICC				950 Constitutionality of State Statutes				
380 Other Personal Property		Rates/etc.		-	890 Other		Statutory Actions				
\ 2g-		Property Rights			460 Deportation			(if not administrative agency			
385 Property Damage		820 Copyrights 830 Patent		462 Naturalization			review or Pi	ivacy Act	)		
		840 Trademark			Application 465 Other Immigration						
			Actions		-						
Federal Tax Suits 870 Taxes (US plainti		Federal Tax Suits	or		470 Racketeer Influenced						
·		defendant)	VI	'	& Corrupt Organization		j		7		
		871 IRS-Third Party 2	6 USC 7609	)				]			

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 Detainec	442 Civil Rights – Employment (criteria: race, gender/sex, national origin, discrimination, disability, age, religion, retaliation)	X 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									
Original Proceeding from State Court O 3 Remanded from Appellate Court Reopened Specify)  O 4 Reinstated or Reopened another district (specify)  O 5 Transferred from another district (specify)  O 6 Multi-district O 7 Appeal to District Judge from Mag. Judge									
VI. CAUSE OF ACTION (CITE THE U.S. CIVIL STATUTE UNDER WHICH YOU ARE FILING AND WRITE A BRIEF STATEMENT OF CAUSE.) 5 USC § 552 - failure to provide requested records									
VII. REQUESTED IN CHECK IF THIS IS A CLASS ACTION UNDER FRCP 23 DEMAND \$  Check YES only if demanded in complaint YES NO									
VIII. RELATED CASE(S) (See instruction) YES NO If yes, please complete related case form									
DATE: May 8, 2015 SIGNATURE OF ATTORNEY OF RECORD									
		<del></del>							

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