CIVIL COVER SHEET

JS-44 (Rev. 11/2020 DC)			1								
I. (a) PLAINTIFFS				DEFENDANTS							
Sparacino PLLC				United States Army Central							
(b) COUNTY OF RESIDENCE OF FIRST LISTED PLAINTIFF				COUNTY OF RESIDENCE OF FIRST LISTED DEFENDANT							
(EXC	CEPT IN U.S. P	LAINTIFF CASES)		(IN U.S. PLAINTIFF CASES ONLY) NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED							
(c) ATTORNEYS (FIRMNAME, ADDRESS, AND TELEPHONE NUMBER)				ATTORNEYS (IF KNOWN)							
Michael J. Gottlieb,	Willkie Fa	rr & Gallagher I I P									
		DC 20006, (202) 303-	1000:								
Ryan E. Sparacino,			,								
		Washington, DC 200	36								
(202) 620 2520	ounto ooo,	Washington, Be 200	.								
II. BASIS OF JURISI	DICTION							S (PLACE AN x IN O		1	
(PLACE AN x IN ONE B	OX ONLY)		PLAINTIFF	AND ONE BO			T) FOR DIV	ERSITY CASES ON		DFT	
1 U.S. Government	O 3 Fe	deral Question		PTF DFT PTF					_	_	
Plaintiff	(U.	S. Government Not a Party)					orated or Principal Place O 4 O 4				
	_							ess in This State			
2 U.S. Government		versity	Citizen of Another State 2			O 2	2 Incorporated and Principal Place 0 5 0 5			O 5	
Defendant		ndicate Citizenship of rties in item III)						usiness in Another State			
	Pa	rues in item 111)		itizen or Subject of a 3		O 3	Foreign Nation 0 6		O 6		
			Foreign Co	untry		Foreign 1		Nation	O v	O °	
		IV. CASE ASSIG	NMENT	AND NAT	TIRE O	F SIIIT	Γ				
(Place an X i	in one categ	ory, A-N, that best repres						onding Nature of	Suit)		
O A. Antitrust	_							_		<i>tu ai sai sa c</i> a	
A. Antitrust	1	Personal Injury/ Ialpractice	0	C. Admin Review		Agenc	y	O D. Temp	/Prelimina		
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410 Antitrust	310 Ai	rplane		151 Medicare	Act			Injund	ction		
	315 Ai	rplane Product Liability		_				Any nature of suit from any category			
	320 As	320 Assault, Libel & Slander			Social Security				may be selected for this category of		
330 Federal Employers Liability				•	- co			may be selected f	or this categ	ory of	
		· · · · · · · · · · · · · · · · · · ·		861 HIA (139	′			may be selected f case assignment.	or this categ	ory of	
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O G. Habeas Corpus/ 2255 530 Habeas Corpus – General 510 Motion/Vacate Sentence 463 Habeas Corpus – Alien Detainee	O H. Employment Discrimination 442 Civil Rights – Employment (criteria: race, gender/sex, national origin, discrimination, disability, age, religion, retaliation)	● I. FOIA/Privacy Act ■ 895 Freedom of Information Act ■ 890 Other Statutory Actions (if Privacy Act)	J. Student Loan 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 	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	N. Three-Judge Court 441 Civil Rights – Voting (if Voting Rights Act)					
V. ORIGIN								
O 1 Original Proceeding Proceeding Court O 3 Remanded from Appellate Court O 3 Remanded or Reopened from another district (specify) O 6 Multi-district O 7 Appeal to District Judge from Mag. Direct File								
VI. CAUSE OF ACTION (CITE THE U.S. CIVIL STATUTE UNDER WHICH YOU ARE FILING AND WRITE A BRIEF STATEMENT OF CAUSE.) Violation of the Freedom of Information Act (5 U.S.C. Section 552)								
VII. REQUESTED IN COMPLAINT CHECK IF THIS IS A CLASS ACTION UNDER F.R.C.P. 23 DEMAND \$ Check YES only if demanded in complaint YES NO X								
VIII. RELATED CASE(S) IF ANY	(See instruction) YES	NO X If yes, p.	lease complete related case form					
DATE:2022.02.22	SIGNATURE OF ATTORNEY OF REC	CORD/s/ Michael	J. Gottlieb					

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 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.