CIVIL COVER SHEET

JS-44 (Rev. 11/2020 DC)											
I. (a) PLAINTIFFS	DEFENDANTS UNITED STATES DEPARTMENT OF HEALTH AND HUMAN										
NATIONAL PUBLIC RADIO, INC. and JINGNAN HUO						S DEP.	ARTME	NT OF HEALTH /	AND HU	JMAN	
				SERVICES							
(b) COUNTY OF RESIDENCE OF FIRST LISTED PLAINTIFF Washington (EXCEPT IN U.S. PLAINTIFF CASES)				COUNTY OF RESIDENCE OF FIRST LISTED DEFENDANT Washington (IN U.S. PLAINTIFF CASES ONLY)							
				NOTE: II	N LAND COND	EMNATION	CASES, USE TH	E LOCATION OF THE TRACT OF I	AND INVOLV.	/ED	
		S, AND TELEPHONE NUMBER)	ATTORNEYS	S (IF KNOV	VN)					
DAVIS WRIGHT TR 1301 K Street NW, S											
Washington, D.C. 20											
(202) 973-4200											
(,											
II. BASIS OF JURISE	II. BASIS OF JURISDICTION			ZENSHIP C	F PRIN	CIPAL	PARTIE	S (PLACE AN x IN ONE	BOXFOR		
(PLACE AN x IN ONE BOX ONLY)			PLAINTIFF AND ONE BOX FOR DEFENDANT) FOR DIVERSITY CASES OF								
1 U.S. Government	O 3 Fe	deral Question			PTF DFT				PTF	DFT	
Plaintiff	(U.S. Government Not a Par		Citizen of	this State				orated or Principal Place O 4 O 4			
					~			ess in This State	~		
2 U.S. Government Defendant		ersity dicate Citizenship of	Citizen of	Another State	O 2	O 2	Incorpor	ated and Principal Place	O 5	O 5	
Derendant		rties in item III)	Citizen or	Subject of a		~		ess in Another State			
			Foreign C		O 3	O 3	Foreign	Nation	O 6	O 6	
(Diana an V :		IV. CASE ASSIC							•4)		
	-	ory, A-N, that best repre	sents your								
O A. Antitrust					C. Administrative Agency			O D. Temporary Restraining Order/Preliminary			
	$N_{\rm c}$	Ialpractice	Review								
410 Antitrust	310 Ai	rplane	151 Medicare Act				Injunctio	on and a second s			
	🗌 315 Ai	rplane Product Liability						Any nature of suit fr	Any nature of suit from any category may be selected for this category of		
		ssault, Libel & Slander	Social Security 861 HIA (1395ff)				may be selected for t				
		deral Employers Liability		862 Black Lung (923)				case assignment. *(If Antitrust, then A governs)*			
	340 M	arine arine Product Liability		863 DIWC/DI							
		otor Vehicle	864 SSID Title XVI					()			
		otor Vehicle Product Liabil	ity	865 RSI (405(g))							
	360 O 1	ther Personal Injury	Other Statutes 891 Agricultural Acts								
		edical Malpractice		893 Environmental Matters							
	365 Product Liability			890 Other Statutory Actions (If							
		ealth Care/Pharmaceutical ersonal Injury Product Liab	Administrative Agency is Involved)								
		sbestos Product Liability									
		v									
O E. General Civ	il (Other)	OR		O F. <i>Pr</i>	o Se Gei	neral C	livil				
Real Property		Bankruptcy		<u>Feder</u> al	Tax Suits						
210 Land Condemn	ation	422 Appeal 27 USC 1				465 Other Immigration Actions					
220 Foreclosure		423 Withdrawal 28 U				470 Racketeer Influenced					
230 Rent, Lease & Ejectment 240 Torts to Land <u>Prisoner Petitions</u>			871 IRS-Third Party 26 USC 7609			& Corrupt Organization					
240 Torts to Land 535 Death Penalty							480 Consumer Credit				
290 All Other Real Property 540 Mandamus & Other			her Forfeiture/Penalty 625 Drug Related Seizure		izuro of	485 Telephone Consumer Protection Act (TCPA)					
550 Civil Rights				Property 21 USC 881			490 Cable/Satellite TV				
Personal Property 555 Prison Conditions 370 Other Fraud 560 Civil Detainee - Conditions			600 Other			850 Securities/Commodities/					
370 Other Fraud 371 Truth in Lending of Confinement			onditions			Exchange					
380 Other Personal Property				Other Statutes			896 Arbitration				
Damage <u>Property Rights</u>					375 False Claims Act 376 Qui Tam (31 USC			899 Administrative Procedure Act/Review or Appeal of			
505 Hoperty Damage			820 Copyrights		3729(a))			Act/Review of Appear of Agency Decision			
			830 Patent 835 Patent – Abbreviated New		400 State Reapportionment			950 Constitutionality of State			
Drug Application					430 Banks & Banking			Statutes			
840 Tradema				45	450 Commerce/ICC Rates/etc			890 Other Statutory Actions (if not administrative agency			
		840 Trademark					itates/ete		•		
		840 Trademark 880 Defend Trade Se 2016 (DTSA)	crets Act of		0 Commei 0 Deporta 2 Naturali	tion	Kates/ etc		inistrativ	• •	

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 G. Habeas Corpus/ 2255 530 Habeas Corpus – General 510 Motion/Vacate Sentence 463 Habeas Corpus – Alien Detainee 	 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) 						
 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 	 *(If pro se, select this deck)* 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 	 *(If pro se, select this deck)* 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 • 1 Original Proceeding O 2 Removed from State Court O 1 Original Proceeding O 2 Removed from Appellate Court O 4 Reinstated or Reopened O 5 Transferred from another district (specify) O 6 Multi-district D 7 Appeal to D 8 Multi-district Litigation D 1 Direct File Judge O 8 Multi-district D 7 Appeal to D 8 Multi-district D 7 Appeal to D 9 8 Multi-district D 9 8 Multi-distri									
VI. CAUSE OF ACTION (CITE THE U.S. CIVIL STATUTE UNDER WHICH YOU ARE FILING AND WRITE A BRIEF STATEMENT OF CAUSE.) Freedom of Information Act; 5 U.S.C. § 552, et seq.									
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 Check YES only if demanded in complaint									
VIII. RELATED CASE(S) (See instruction) YES NO If yes, please complete related case form IF ANY If yes, please complete related case form If yes, please complete related case form									
DATE:7/18/2022	2 SIGNATURE OF ATTORNEY OF RECORD /s/ Courtney T. DeThomas								

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.