Case 1:22-cv-03709-CJN Document 1-1 Filed 12/12/22 Page 1 of 2

CIVIL COVER SHEET

JS-44 (Rev. 11/2020 DC)											
I. (a) PLAINTIFFS				DEFENDA	ANTS						
Pobble Limited Par	tnorchin			United States Department of the Army							
Pebble Limited Partnership 2525 Gambell Street, Suite 405											
		J5		101 Army Pentagon							
Anchorage, AK 995		Washington, DC 20310-0101									
(b) COUNTY OF RESIDEN	CEOFFIRSTL	ISTED PLAINTIFF 88888		COUNTY	COUNTY OF RESIDENCE OF FIRST LISTED DEFENDANT						
(EXC	CEPT IN U.S. P	LAINTIFF CASES)		(IN U.S. PLAINT				FF CASES ONLY)	OF LAND INVOLV	VED	
(a) ATTODNEVS (EIDMNIA	ME ADDDES	S, AND TELEPHONE NUMBER	1)	NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED ATTORNEYS (IF KNOWN)					VED		
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Patricia B. Palacios (D.C STEPTOE & JOHNSON		3740)									
1330 Connecticut Avenu											
Washington, DC 20036-											
Telephone: (202) 429-30											
100phone: (202) 420 00	,00										
II. BASIS OF JURISI	DICTION		III. CITIZENSHIP OF PRINCIPAL PARTIES (PLACE AN X IN ONE BOX FOR								
(PLACE AN x IN ONE B			PLAINTIFF AND ONE BOX FOR DEFENDANT) FOR DIVERSITY CASES ONLY!							`	
1 LLS Covernment	○ 2 Ea	dama I Organtiam		PTF DFT PTF						DFT	
1 U.S. Government Plaintiff	_	deral Question S. Government Not a Party)	G'.:	2.1.1. 0	nis State O1 O1 Ir			acorporated or Principal Place 04 04			
Flamin	(0.	S. Government Not a Faity)	Citizen of	this State	0 1			ated or Principal Plac	ce •	0 1	
					_	_	OI BUSING	of Business in This State			
2 U.S. Government		versity	Citizen of	Another State	O 2	O 2	Incorporated and Principal Place		ace O 5	O 5	
Defendant		dicate Citizenship of						ess in Another State		•	
	Pa	rties in item III)	Citizen or	Subject of a	O 3	O 3					
			Foreign C	ountry		0 '	Foreign 1	Nation	\bigcirc 6	O 6	
		IV. CASE ASSIC	SNMENT	AND NAT	TURE O	F SUIT					
(Place an X i	in one categ	ory, A-N, that best repre	sents you	· Cause of Ac	tion and	<u>one</u> in a	corresp	onding Nature of	Suit)		
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		•		151 Medicare Act							
315 Airplane Product Liability			Social Security				Any nature of suit from any category				
	320 Assault, Libel & Slander			ial Security				Any nature or sur	t ii om any c	augury	
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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 A ■ 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 From State Court C								
VI. CAUSE OF ACTION (CITE THE U.S. CIVIL STATUTE UNDER WHICH YOU ARE FILING AND WRITE A BRIEF STATEMENT OF CAUSE.) 5 U.S.C. § 552, Freedom of Information Act								
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) (See instruction) If yes, please complete related case form IF ANY								
December 12, 2022 SIGNATURE OF ATTORNEY 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 ir 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.