## Case 1:24-cv-00840 Document 1-1 Filed 03/22/24 Page 1 of 2

## CIVIL COVER SHEET

I (a) D	v. 11/2020 DC)												
I. (a) PLAINTIFFS JUDICIAL WATCH, INC.					DEFENDANTS U.S. DEPARTMENT OF STATE								
JODICIAL WATCH, INC.					O.O. DEI AKTIVIENT OF STATE								
					COUNTY OF REGINENCE OF FIRST LIGHTS REFERRED AND								
(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								
(c) ATTORNEYS (FIRMNAME, ADDRESS, AND TELEPHONE NUMBER)					ATTORNEYS (IF KNOWN)								
	F. Peterson al Watch, Inc.												
1	nird Street SW	, Suite 80	0										
	ngton, DC 200	024											
	(02) 646-6	NCTION	1	ш ст									
	II. BASIS OF JURISDICTION (PLACE AN x IN ONE BOX ONLY)			III. CITIZENSHIP OF PRINCIPAL PARTIES (PLACE AN X IN ONE BOX FOR PLAINTIFF AND ONE BOX FOR DEFENDANT) FOR DIVERSITY CASES ONLY!									
	U.S. Government		deral Question			PTF DFT  S State O 1 O 1 Incorpora			PTF DFT ated or Principal Place 0 4 0 4				
]	Plaintiff	(U.	S. Government Not a Party)	Citizen of t	his State	S State 0 1			ated or Principal Placess in This State	e <b>O</b> 4	O 4		
$\sim$	U.S. Government	4 Di	iversity	Citizen of	Another State	<b>O</b> 2	<b>O</b> 2	Incornor	ated and Principal Pla	ce <b>O</b> 5	<b>O</b> 5		
] ]	Defendant		(Indicate Citizenship of Parties in item III)		N-1.1 4 - 6 -				ess in Another State				
			,	Foreign Co	Subject of a untry			Foreign Nation		<b>O</b> 6	<b>O</b> 6		
			IV CASE ASSIG	NMFNT	AND NAT	IIRF O	F SIIIT	Γ					
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)													
O A	. Antitrust		Personal Injury/	0	C. Admin		Ageno	y	O D. Tempo				
		M	<i><b>Ialpractice</b></i>	Review				Order/Preliminary					
41	10 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 sault, Libel & Slander	Social Security									
			ederal Employers Liability	861 HIA (1395ff)									
	340 Marine			862 Black Lung (923) 863 DIWC/DIWW (405(g))					*(If Antituust than A gavanna)*				
1						- '	(g))		*(If Antituust than	. A governs	7*		
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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)	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)*									
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 from Appellate Court Cour											
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. Sec. 552; failure to produce records											
VII. REQUESTED IN 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 K If yes, p	lease complete related case form								
DATE:3/22/2024	SIGNATURE OF ATTORNEY OF REC	CORD/s/ James F	. Peterson								

## 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.