## CIVIL COVER SHEET

JS-44 (Rev. 11/2020 DC)		-								
I. (a) PLAINTIFFS THE HOLLAND LAW FIRM			DEFENDANTS U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES AND CENTERS FOR MEDICARE AND MEDICAID SERVICES							
(b) COUNTY OF RESIDENCE OF FIRST LISTED PLAINTIFF			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) James W. Orth and Charles A. Munn Nelson Mullins Riley & Scarborough 101 Constitution Avenue, NW, Suite 900 Washington, D.C., 20001 Phone: 704-417-3014		A	TTORNEYS (IF KNOW	/N)						
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 CASESONLY!								
1 U.S. Government 3 Fee	leral Question	izen of this	PTF	DFT 1	Incorpora	ated or Principal Place	PTF O 4	OFT 4		
Defendant (Inc.	dicate Citizenship of	Citizen of Another State 2 2 Incorpor			ated and Principal Place	<b>o</b> 5	<b>O</b> 5			
1 41	, Citi	izen or Subj eign Count		<b>O</b> 3	Foreign N	Nation	<b>O</b> 6	<b>O</b> 6		
IV. CASE ASSIGNMENT AND NATURE OF SUIT  (Place an X in one category, A-N, that best represents your Cause of Action and one in a corresponding Nature of Suit)										
A. Antitrust  B. Personal Injury/ Malpractice  410 Antitrust  310 Airplane  315 Airplane Product Liability  320 Assault, Libel & Slander  330 Federal Employers Liability  340 Marine  345 Marine Product Liability  350 Motor Vehicle  355 Motor Vehicle Product Liability  360 Other Personal Injury  362 Medical Malpractice  365 Product Liability  367 Health Care/Pharmaceutical  Personal Injury Product Liability		C.    151   Social Se   861   862   863   864   865   Other St   891   893	Administrative Review  Medicare Act ecurity HIA (1395ff) Black Lung (923) DIWC/DIWW (405 SSID Title XVI RSI (405(g)) atutes Agricultural Acts Environmental Ma Other Statutory Ac Administrative Age	O D. Temporary Restraining Order/Preliminary Injunction  Any nature of suit from any category may be selected for this category of case assignment.  *(If Antitrust, then A governs)*						
368 Asi	bestos Product Liability	iability Involved)								
Color		Federal Tax Suits    870 Taxes (US plaintiff or defendant)   871 IRS-Third Party 26 USC 7609    Forfeiture/Penalty   625 Drug Related Seizure of Property 21 USC 881   690 Other		26 USC  zure of 881	465 Other Immigration Actions 470 Racketeer Influenced & Corrupt Organization 480 Consumer Credit 485 Telephone Consumer Protection Act (TCPA) 490 Cable/Satellite TV 850 Securities/Commodities/ Exchange 896 Arbitration 899 Administrative Procedure Act/Review or Appeal of Agency Decision 950 Constitutionality of State Statutes 890 Other Statutory Actions (if not administrative agency review or Privacy Act)					

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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 Detaince	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 Court State S								
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 - Defendants failed to timely provide a response/determination on the Request.								
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 ANY  (See instruction)  YES NO X  If yes, please complete related case form								
DATE:April 16, 2024	SIGNATURE OF ATTORNEY OF REC	ORD James V	James W. Orth					

## 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.