## Case 1:15-cv-02200 Document 1-1 Filed 12/17/15 Page 1 of 2

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I. (a) PLAINTIFFS			DEFENDANTS							
BRENNAN CENTER FOR JUSTICE			DEPARTMENT OF STATE							
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(c) ATTORNEYS (FIRM NAME, ADDRESS, AND TELEPHONE NUMBER)				ATTORNEYS	S (IF KNOW	(N)				
DAVID L. SOBEL										
5335 Wisconsin A		W. Suite 640								
Washington, DC 2 (202) 246-6180	20015			:						
(202) 240-0100			÷							
II. BASIS OF JURIS			III. CITI	ZENSHIP (	OF PRIN	CIPAL	PARTI	ES (PLACE AN x IN ONE	BOX FOR	
(PLACE AN x IN ONE	•		PLAINTIFF	AND ONE BO	X FOR DEF PTF	ENDANT DFT	) <u>FOR DI</u>	VERSITY CASES ONLY!	PTF	DFT
1 U.S. Government Plaintiff		Federal Question			01	<b>O</b> 1			<b>O</b> <sub>4</sub>	04
Plaintiff	((	U.S. Government Not a Party)	Citizen of t	his State		U,		orated or Principal Place ness in This State	<b>U</b> +	U Ŧ
2 U.S. Government		Diversity	Citizen of	Another State	<b>O</b> 2	02				05
Defendant	<b>U</b> (	Indicate Citizenship of	Citizen of 2	-inomer State	02	<b>U</b> 2		orated and Principal f Business in Another Sta	<b>O</b> 5	U <sup>s</sup>
	F	Parties in item III)		Subject of a	<b>O</b> 3	<b>O</b> 3				0
			Foreign Co	untry		•	Foreign	n Nation	U °	06
		IV. CASE ASSI	GNMEN'	Γ ΑΝΌ ΝΑ	TURE	OF SUI	T			
(Place an	X in one cat	tegory, A-N, that best repre						sponding Nature of S	Suit)	
O A. Antitrust	О в. 1	Personal Injury/	00	. Adminis	strative A	lgencv		O D. Temporar	v Restra	ining
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	340 M			63 DIWC/DIV		a))		*(If Antitrust than A a	(avorne)*	
		arine Product Liability otor Vehicle		864 SSID Title XVI		*(If Antitrust, then A governs)*				
		otor Vehicle Product Liability		865 BSI (405(g))						
		ther Personal Injury	Other	Statutes	al A ata					
	362 Medical Malpractice			891 Agricultural Acts 893 Environmental Matters						
	365 Product Liability					ers				
367 Health Care/Pharmaceutical		roduct Liability			ental Matt					
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O G. Habeas Corpus/ 2255	O H. Employment Discrimination	• 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)*			
<ul> <li>K. Labor/ERISA (non-employment)</li> <li>710 Fair Labor Standards Act</li> <li>720 Labor/Mgmt. Relations</li> <li>740 Labor Railway Act</li> <li>751 Family and Medical Leave Act</li> <li>790 Other Labor Litigation</li> <li>791 Empl. Ret. Inc. Security Act</li> </ul>	<ul> <li>L. Other Civil Rights (non-employment)</li> <li>441 Voting (if not Voting Rights Act)</li> <li>443 Housing/Accommodations</li> <li>440 Other Civil Rights</li> <li>445 Americans w/Disabilities - Employment</li> <li>446 Americans w/Disabilities - Other</li> <li>448 Education</li> </ul>	<ul> <li>M. Contract</li> <li>110 Insurance</li> <li>120 Marine</li> <li>130 Miller Act</li> <li>140 Negotiable Instrument</li> <li>150 Recovery of Overpayment &amp; Enforcement of Judgment</li> <li>153 Recovery of Overpayment of Veteran's Benefits</li> <li>160 Stockholder's Suits</li> <li>190 Other Contracts</li> <li>195 Contract Product Liability</li> <li>196 Franchise</li> </ul>	<ul> <li>N. Three-Judge Court</li> <li>441 Civil Rights – Voting (if Voting Rights Act)</li> </ul>		
V. ORIGIN					
I Original Proceeding       O 2 Removed from State Court     O 3 Remanded from Appellate Court     O 4 Reinstated or Reopened     O 5 Transferred from another district (specify)     O 6 Multi-district     O 7 Appeal to District Judge from Mag. Judge					
VI. CAUSE OF ACTION (CITE THE U.S. CIVIL STATUTE UNDER WHICH YOU ARE FILING AND WRITE A BRIEF STATEMENT OF CAUSE.) Wrongful withholding of agency records, 5 U.S.C. § 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       Check YES only if demanded in complaint					
VIII. RELATED CASE(S) (See instruction) YES NO X If yes, please complete related case form					
DATE: 12/17/15 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 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.