Case 1:16-cv-02462 Document 1-7 Filed 12/16/16 Page 1 of 2 CIVIL COVER SHEET

I. (a) PLAINTIFFS			DEFENDANTS								
PRO PUBLICA, INC.				UNITED STATES DEPARTMENT OF VETERANS AFFAIRS							
THO TOBLION, INC.				J. W. L. S. S. M. C. S. L. M. C. M.							
(b) COUNTY OF RESIDEN	CE OF FIRST	LISTED PLAINTIFF 88888		COUNTY OF RESIDENCE OF FIRST LISTED DEFENDANT 11001							
(EX	CEPT IN U.S.	PLAINTIFF CASES)		(IN U.S. PLAINTIFF CASES ONLY) NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED							
(c) ATTORNEYS (FIRM NAME, ADDRESS, AND TELEPHONE NUMBER)				ATTORNEYS (IF KNOWN)							
Seth Α Watkins (Γ											
Seth A. Watkins (D.C. Bar # 467470) ADDUCI, MASTRIANI & SCHAUMBERG LLP											
1133 Connecticut											
Washington, DC 2	,	1 V V									
Tolonhono (202)			+								
			III. CITIZENSHIP OF PRINCIPAL PARTIES (PLACE AN x IN ONE BOX FOR								
(PLACE AN x IN ONE BOX ONLY)			PLAINTIFF AND ONE BOX FOR DEFENDANT) FOR DIVERSITY CASES ONLY!								
1 U.S. Government		ederal Question	PTF DFT				0.0.				
Plaintiff	J)	J.S. Government Not a Party)	Citizen of t	his State	O 1	O 1		orated or Principal Place	O 4	O 4	
							of Busi	iness in This State			
② 2 U.S. Government	_	Diversity	Citizen of A	Another State	O 2	O 2	Incorpo	orated and Principal	O 5	O 5	
Defendant		Indicate Citizenship of Parties in item III)					Place o	of Business in Another Sta	ite		
		arties in item iii)	Foreign Co	Subject of a	O 3	O 3	Foreign	n Nation	O 6	O 6	
			i oreign co	unuy			1 Oleigi	i Nation		•	
		IV. CASE ASSI	GNMEN'	Γ AND NA	TURE (OF SUI	T				
(Place an	X in one cat	tegory, A-N, that best repr	esents your	Cause of A	ction and	l <u>one</u> in	a corre	esponding Nature of S	Suit)		
O A. Antitrust	O B. F	Personal Injury/	0.0	C. Adminis	etrative A	genev		O D. Temporar	v Rostrai	inina	
A. Ammusi		lalpractice		. Auntinis Review	шиге л	igency				ning	
	172	шрисисс		Review				Order/Preliminary Injunction			
410 Antitrust		irplane	1:	51 Medicare A	Act			injunction			
		rplane Product Liability	Conial	Caannitu				Any nature of suit from any category			
		ssault, Libel & Slander		<u>Security</u> 61 HIA (1395:	ff)				may be selected for this category of case		
	330 Federal Employers Liability			862 Black Lung (923)			assignment.				
					*			assignment.			
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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 Detainee	442 Civil Rights – Employment (criteria: race, gender/sex, national origin, discrimination, disability, age, religion, retaliation)	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									
① 1 Original Proceeding Proceeding From State Court	3 Remanded from Appellate Court Reopened	○ 5 Transferred from another district (specify) ○ 6 Multiple Liting	i-district						
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 ("FOIA"), 5 U.S.C. § 552; unlawful withholding of records under FOIA									
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, pl	ease complete related case form						
DATE. December 16, 2016 SIGNATURE OF ATTORNEY OF RECORD /S/ Seth A. Watkins (D.C. Bar # 467470)									

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.