## **ATTACHMENT E**

## CIVIL COVER SHEET

JS-44 (Rev. 3/16 DC)	Partition ( Name
I. (a) PLAINTIFFS American Oversight	DEFENDANTS U.S. Department of Housing and Urban Development
(b) COUNTY OF RESIDENCE OF FIRST LISTED PLAINTIFF 11001 (EXCEPT IN U.S. PLAINTIFF CASES)  (c) ATTORNEYS (FIRM NAME, ADDRESS, AND TELEPHONE NUMBER)  Elizabeth France American Oversight, 1030 15th Street NW, B255  Washington, DC 20005 202.869.5246	COUNTY OF RESIDENCE OF FIRST LISTED DEFENDANT
(PLACE AN x IN ONE BOX ONLY)  1 U.S. Government O 3 Federal Question (U.S. Government Not a Party)  2 U.S. Government O 4 Diversity (Indicate Citizenship of Parties in item III)	II. CITIZENSHIP OF PRINCIPAL PARTIES (PLACE AN x IN ONE BOX FOR PLAINTIFF AND ONE BOX FOR DEFENDANT) FOR DIVERSITY CASES ONLY!  PTF DFT  Citizen of this State  O1 O1 Incorporated or Principal Place of Business in This State  Citizen of Another State  O2 O2 Incorporated and Principal Place of Business in Another State  Citizen or Subject of a O3 O3
I .	Foreign Country Foreign Nation 06 06
	MENT AND NATURE OF SUIT ats your Cause of Action and one in a corresponding Nature of Suit)
O A. Antitrust  B. Personal Injury/ Malpractice  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 368 Asbestos Product Liability	C. Administrative Agency Review    151 Medicare Act   Social Security
Color	General Conter   General Gen

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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 Act ■ 890 Other Statutory Actions (if Privacy Act)	O J. Student Loan  152 Recovery of Defaulted Student Loan (excluding veterans)	
, grant 1 22 27	*(If pro se, select this deck)*	*(If pro se, select this deck)*		
O 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	O 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	O 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	O N. Three-Judge Court  441 Civil Rights - Voting (if Voting Rights Act)	
V. ORIGIN				
O 1 Original Proceeding Court	O 3 Remanded from Appellate Court O 4 Reinstated or Reopened		i-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.) 5 U.S.C. 552. Defendant has failed to provide responsive records to FOIA requests.				
VII. REQUESTED IN COMPLAINT	CHECK IF THIS IS A CLASS ACTION UNDER F.R.C.P. 23  DEMAND JU	Check Y RY DEMAND: YES	ES only if demanded in complaint NO X	
VIII. RELATED CASE(S) IF ANY	(See instruction) YES	NO If yes, pl	ease complete related case form	
DATE:10/10/2017	SIGNATURE OF ATTORNEY OF REC	CORD all C7		

## 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.

- 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 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.