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CIVIL COVER SHEET

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I. (a) PLAINTIFFS			DEFENDANTS						
Human Rights Defense Cente	Human Rights Defense Center			United States Immigration and Customs Enforcement					
1028 N Federal Highway			500 12th St., SW						
Lake Worth FL 33460									
Lake Worth FL 33460		Washington, DC 20536							
(b) COUNTY OF RESIDENCE OF FIRST L	Palm Re	ach	COUNTY OF RESIDENCE OF FIRST LISTED DEFENDANT						
(b) COUNTY OF RESIDENCE OF FIRST L	PLAINTIFF (CASES)	Jacii	(IN U.S. PLAINTIFF CASES ONLY)						
(EACEFI IN U.S. F	LAINTIFF CASES)		NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND INVOLVED						
(c) ATTORNEYS (FIRM NAME, ADDRESS	, AND TELEPHONE NUMBER)		ATTORNEYS (IF KNOW	N)					
Deborah M. Golden		lu	United States Attorney's Office for the District of Columbia						
Human Rights Defense Center			555 4th Street, NW						
	•		Washington, DC 2						
316 F St. NE, #107		ľ	washington, DC 2	20000					
Washington, DC 20002									
(202) 630-0332									
II. BASIS OF JURISDICTION		III CITIZ	ENSHIP OF PRINC	TPAL P	ARTIES	S (PLACE AN VIN ONE	ROX FOR		
(PLACE AN x IN ONE BOX ONLY)			AND ONE BOX FOR DEF						
		12211111111	PTF	DFT	ORDIVI	ERGITT CHOLD ONE!	<u>·</u> PTF	DFT	
	deral Question		•	_			_	_	
Plaintiff (U.	S. Government Not a Party)	Citizen of th	is State 0 1	$\bigcirc 1$	Incorpora	ited or Principal Place	\bigcirc 4	O 4	
				(of Busine	ess in This State			
② 2 U.S. Government ② 4 Di	versity	Citizen of A	nother State 2	\bigcirc			O -	A 5	
	ndicate Citizenship of	Citizen of A	nother State 2		Incorporated and Principal Place		O 5 🔘	O 5	
				_	of Business in Another State				
	,	Citizen or Subject of a 3					O 6	O 6	
		Foreign Cou	intry		Foreign N	Nation	0	0 0	
	IV. CASE ASSIGN								
(Place an X in one categ	ory, A-N, that best represe	ents your C	Cause of Action and o	<u>one</u> in a c	orrespo	nding Nature of S	uit)		
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	Personal Injury/		C. Administrative	Agency		O D. Tempor			
N.	<i>Ialpractice</i>		Review			Order/Preliminary			
410 Antitrust			-			Injuncti	on		
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	irplane Product Liability	l	a 11a 1			Any nature of suit from any category			
			Social Security						
320 A	ssault, Libel & Slander								
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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)	O I. FOIA/Privacy Act S95 Freedom of Information Act 890 Other Statutory Actions (if Privacy Act)	J. Student Loan 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 Proceeding Court O 3 Remanded from Appellate Court O 4 Reinstated or Reopened Court O 5 Transferred from another district (specify) O 6 Multi-district O 7 Appeal to District Judge from Mag. Judge O 8 Multi-district Court Court 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.) 5 U.S.C. §552, ICE has not responded to an administrative remand that an adequate search be conducted.								
	CHECK IF THIS IS A CLASS ACTION UNDER F.R.C.P. 23 DEMAND JUI	Check Y RY DEMAND: YES	YES only if demanded in complaint NO NO					
VIII. RELATED CASE(S) IF ANY	(See instruction) YES	NO X If yes, p	lease complete related case form					
DATE:March 11, 2019	SIGNATURE OF ATTORNEY OF REC	ECORD /s/ Deborah M. Golden						

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 <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.