Case 1:19-cv-01955 Document 1-1 Filed 06/28/19 Page 1 of 2

CIVIL COVER SHEET

JS-44 (Rev. 0/17 DC)			DEFENDANTS						
I. (a) PLAINTIFFS Contact for Food Sefety									
Center for Food Safety			United States Fish and Wildlife Service						
D C			COUNTY OF RESIDENCE OF FIRST LISTED DEFENDANT D.C.						
(b) COUNTY OF RESIDENCE OF FIRST LISTED PLAINTIFF D.C. (EXCEPT 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			ATTORNEYS (IF KNOV	VN)					
George A. Kimbrell (WA 3605)									
SBN #326186), Center for Food Safety, 303 Sacramento									
St., 2nd FI, San Francisco, CA	. 94111								
(415) 826-2770									
II. BASIS OF JURISDICTION III. CIT		III. CITIZ	TIZENSHIP OF PRINCIPAL PARTIES (PLACE AN x IN ONE BOX FOR						
(PLACE AN x IN ONE BOX ONLY)			AND ONE BOX FOR DE	FENDANT)		ERSITY CASES ONLY!			
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	~	Citizen of th	is State 0 1	O 1	Incorpora	ted or Principal Place	\bigcirc 4	O 4	
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	versity (adicate Citizenship of	Citizen of A	nother State 2	O 2		ated and Principal Place 0 5 0 5			
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	′	Citizen or Su		O 3	Eoraian N	Jation	O 6	O 6	
	l I	Foreign Cou	ши у		Foreign N	vauOII	J	o v	
L	IV. CASE ASSIGN	MENT /	AND NATURE O	F SIIIT	1				
(Place an X in one catego	ory, A-N, that best represer					onding Nature of Sui	t)		
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	Personal Injury/	0	C. Administrative	Agency	,	O D. Tempora			
	<i>lalpractice</i>		Review			Order/Pre		y	
410 Antitrust	rplane	1.	51 Madicara Act			Injunction	\boldsymbol{n}		
310 A	rplane rplane Product Liability		151 Medicare Act						
	ssault, Libel & Slander	Social	861 HIA (1395ff)			Any nature of suit fro			
	ederal Employers Liability					may be selected for the	us catego	ry of	
		8				case assignment.			
340 Marine			863 DIWC/DIWW (405(g))			*(If Antitrust, then A	governs	*	
345 Marine Product Liability			864 SSID Title XVI				g		
350 Motor venicle		. 8	865 RSI (405(g))						
355 Motor venicle Product Liability			r Statutes						
	edical Malpractice	8	891 Agricultural Acts						
	edicai Maipractice oduct Liability		893 Environmental Matters						
l	•	8	890 Other Statutory Actions (If						
	367 Health Care/Pharmaceutical			Administrative Agency is					
Personal Injury Product Liability			•	ency is					
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368 As	ersonal Injury Product Liabilit Sbestos Product Liability	ty	Administrative Ag	ency is					
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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)	● I. FOIA/Privacy Act ■ 895 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	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 from Appellate Court Cour								
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 (Failure to timely comply with a Freedom of Information Act request).								
VII. REQUESTED IN COMPLAINT	CHECK IF THIS IS A CLASS ACTION UNDER F.R.C.P. 23 DEMAND JU	Check Y RY DEMAND: YES	YES only if demanded in complaint					
VIII. RELATED CASE(S) IF ANY	(See instruction) YES	NO 🗶 If yes, p	lease complete related case form					
DATE: 6/28/2019	SIGNATURE OF ATTORNEY OF REC	CORD /s/ George /	A. Kimbrell					

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.