Case 1:19-cv-03151-JEB Document 1-1 Filed 10/21/19 Page 1 of 2 CIVIL COVER SHEET

JS-44 (Rev. 6/17 DC)		CIV	IL C	JOVE1	K SHEE	/1						
I. (a) PLAINTIFFS				DEFENDANTS								
Citizens United				United States Department of Commerce								
1006 Pennsylvania Washington, DC 20					1401 Constitution Ave NW							
Washington, DC 20		Washington, DC 20230										
(b) COUNTY OF RESIDENCE OF FIRST LISTED PLAINTIFF					COUNTY OF RESIDENCE OF FIRST LISTED DEFENDANT							
		LAINTIFF CASES)		(IN U.S. PLAINTIFF CASES ONLY) NOTE: IN LAND CONDEMNATION CASES, USE THE LOCATION OF THE TRACT OF LAND IN'					AND INVOLV	/ED		
(c) ATTORNEYS (FIRM NAM		ATTORNEYS (IF KNOWN)										
Jeremiah L. Morgan, Robert J. Olson, and William J												
William J. Olson, P.	iite 4,											
Vienna, Virginia 22 (703) 356-5070												
· · · ·												
II. BASIS OF JURISDICTION (PLACE AN x IN ONE BOX ONLY)			III. CITIZENSHIP OF PRINCIPAL PARTIES (PLACE AN X IN ONE BOX FOR PLAINTIFF AND ONE BOX FOR DEFENDANT) FOR DIVERSITY CASES ONLY!									
1 U.S. Government	3 Federal Question					PTF	DFT		<u> </u>	PTF	DFT	
Plaintiff	\sim	S. Government Not a Party)	Citize	en of this					ated or Principal Place	O 4	O 4	
						~	• •		of Business in This State			
2 U.S. Government Defendant		versity dicate Citizenship of	Citize	en of And	other State	O 2	O 2		ated and Principal Place	05	O 5	
	Parties in item III)		Citizen or St		ject of a			of Busine	ess in Another State	~		
			Foreign Coun		try	0	0	Foreign 1	Nation	06	O 6	
IV. CASE ASSIGNMENT AND NATURE OF SUIT												
(Place an X in one category, A-N, that best represents your Cause of Action and <u>one</u> in a corresponding Nature of Suit)												
O A. Antitrust	O A. Antitrust O B. Personal Injury/			О С.	C. Administrative Agency			O D. Temporary Restraining				
	M	lalpractice			Review			Order/Preliminary				
410 Antitrust	🔲 310 Ai	rplane		151 Medicare Act					Injunctio	n		
		rplane Product Liability	Social Security					Any nature of suit from any category				
320 Assault, Libel & Slander 330 Federal Employers Liability			861 HIA (1395ff)					may be selected for this category of case assignment.				
	340 Marine 345 Marine Product Liability 350 Motor Vehicle 355 Motor Vehicle Product Liability			862 Black Lung (923) 863 DIWC/DIWW (405(g))					0			
					4 SSID Titl		*(If Antitrust, then A governs)*					
					5 RSI (405((g))						
		ther Personal Injury	Other Statutes 891 Agricultural Acts									
	362 Medical Malpractice 365 Product Liability 367 Health Care/Pharmaceutical				3 Environn							
				890	Other Sta	e						
		rsonal Injury Product Liabi	lity Administrative Agency is Involved)									
	368 As	bestos Product Liability			,							
O E. General Civi	il (Other)	OR	1	0	F. Pro	o Se Ger	ieral Ci	ivil	•			
Real Property	· · · · · · · · · · · · · · · · · · ·	Bankruptcy				Tax Suits			462 Naturalizat	ion		
210 Land Condemnation 422 Appeal 27 USC 1				-	870 Taxes (US plaintiff or				Application			
220 Foreclosure 423 Withdrawal 28 U 230 Rent, Lease & Ejectment			SC 15	/	defendant) 871 IRS-Third Party 26 USC 7609			465 Other Immigration Actions				
240 Torts to Land <u>Prisoner Petitions</u>								470 Racketeer Influenced				
245 Tort Product Liability 535 Death Penalty 540 Mandamus & Ot			ther		Forfeiture/Penalty			& Corrupt Organization				
550 Civil Rights					625 Drug Related Seizure of			480 Consumer Credit 490 Cable/Satellite TV				
Personal Property 555 Prison Condition					Property 21 USC 881			850 Securities/Commodities/				
370 Other Fraud 560 Civil Detainee - C 371 Truth in Lending of Confinement 380 Other Personal Property 380 Other Personal Property			Conditions		Other Statutes			Exchange 896 Arbitration 899 Administrative Procedure Act/Review or Appeal of				
					3729(a)) 400 State Reapportionment 430 Banks & Banking							
835 Patent – Abbrevi		ew										
	Drug Application B40 Trademark		L		450 Commerce/ICC				890 Other Statu			
					Rates/etc.			(if not administrative agency review or Privacy Act)				
1					460) Deporta	tion		review or P	rivacy A	ct)	

Case 1:19-cv-03151-JEB Document 1-1 Filed 10/21/19 Page 2 of 2

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)	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)*								
 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 Original Proceeding 2 Removed from State Court 3 Remanded from Appellate Court 4 Reinstated or Reopened district (specify) 5 Transferred from another district (specify) 6 Multi-district Litigation 7 Appeal to District Judge from Mag. Judge 8 Multi-district Litigation – Direct File 										
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 Action to compel defendant to comply with Freedom of Information Act										
VII. REQUESTED IN COMPLAINT	CHECK IF THIS IS A CLASS ACTION UNDER F.R.C.P. 23 DEMAND	\$Check YRY DEMAND:YES [YES only if demanded in complaint NO							
VIII. RELATED CASE(S) IF ANY	(See instruction) YES	NO X If yes, p	lease complete related case form							
DATE:10/21/19	SIGNATURE OF ATTORNEY OF REC	CORD /s/ Jeremiah	L. Morgan							
•										

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.