

FORM 1.997. CIVIL COVER SHEET

The civil cover sheet and the information contained herein neither replace nor supplement the filing and service of pleadings or other papers as required by law. This form shall be filed by the plaintiff or petitioner for use by the Clerk of Court for the purpose of reporting judicial workload data pursuant to Florida Statutes section 25.075. (See instructions for completion.)

I. CASE STYLE

(Name of Court)

Plaintiff _____

Case #: _____

Judge: _____

vs.

Defendant: _____

II. TYPE OF CASE

(If the case fits more than one type of case, select the most definitive category.) If the most descriptive label is a subcategory (is indented under a broader category), place an x in both the main category and subcategory boxes.

- | | |
|---|---|
| <input type="checkbox"/> Condominium | <input type="checkbox"/> Non-homestead residential foreclosure \$50,001 - \$249,999 |
| <input type="checkbox"/> Contracts and indebtedness | <input type="checkbox"/> Non-homestead residential foreclosure \$250,000 or more |
| <input type="checkbox"/> Eminent domain | <input type="checkbox"/> Other real property actions \$0 - \$50,000 |
| <input type="checkbox"/> Auto negligence | <input type="checkbox"/> Other real property actions \$50,001 - \$249,999 |
| <input type="checkbox"/> Negligence - Other | <input type="checkbox"/> Other real property actions \$250,000 or more |
| <input type="checkbox"/> Business governance | <input type="checkbox"/> Professional malpractice |
| <input type="checkbox"/> Business torts | <input type="checkbox"/> Malpractice - business |
| <input type="checkbox"/> Environmental / Toxic tort | <input type="checkbox"/> Malpractice - medical |
| <input type="checkbox"/> Third party indemnification | <input type="checkbox"/> Malpractice - other professional |
| <input type="checkbox"/> Construction defect | <input type="checkbox"/> Other |
| <input type="checkbox"/> Mass tort | <input type="checkbox"/> Antitrust / Trade regulation |
| <input type="checkbox"/> Negligent security | <input type="checkbox"/> Business transactions |
| <input type="checkbox"/> Nursing home negligence | <input type="checkbox"/> Constitutional challenge - statute or ordinance |
| <input type="checkbox"/> Premises liability --- commercial | <input type="checkbox"/> Constitutional challenge - propose amendment |
| <input type="checkbox"/> Premises liability --- residential | <input type="checkbox"/> Corporate trusts |
| <input type="checkbox"/> Products liability | <input type="checkbox"/> Discrimination - employment or other |
| <input type="checkbox"/> Real property / Mortgage foreclosure | <input type="checkbox"/> Insurance claims |
| <input type="checkbox"/> Commercial foreclosure \$0 - \$50,000 | <input type="checkbox"/> Intellectual property |
| <input type="checkbox"/> Commercial foreclosure \$50,001 - \$249,999 | <input type="checkbox"/> Libel / Slander |
| <input type="checkbox"/> Commercial foreclosure \$250,000 or more | <input type="checkbox"/> Securities litigation |
| <input type="checkbox"/> Homestead residential foreclosure \$0 - \$50,000 | <input type="checkbox"/> Shareholder derivative action |
| <input type="checkbox"/> Homestead residential foreclosure \$50,001 - \$249,999 | <input type="checkbox"/> Trade secrets |
| <input type="checkbox"/> Homestead residential foreclosure \$250,000 or more | <input type="checkbox"/> Trust litigation |
| <input type="checkbox"/> Non-homestead residential foreclosure \$0 - \$50,000 | |

III. REMEDIES SOUGHT

(Check all that apply)

- monetary;
- nonmonetary declaratory or injunctive relief;
- punitive

IV. NUMBER OF CAUSES OF ACTION []

(specify)

V. IS THIS CASE A CLASS ACTION LAWSUIT?

- Yes
- No

VI. HAS NOTICE OF ANY KNOW RELATED CASE BEEN FILED?

- No
- Yes If "yes", list all related cases by name, case number and court.

VII. IS JURY TRIAL DEMANDED IN COMPLAINT?

- Yes
- No

I CERTIFY that the information I have provided in this cover sheet is accurate to the best of my knowledge and belief.

Signature _____

Fla. Bar # _____

(type or print name)

(Date)