

FORM 1.997. CIVIL COVER SHEET

The civil cover sheet and the information contained in it neither replaces nor supplement the filing and service of pleadings or other documents as required by law. This form shall be filed by the plaintiff or petitioner with the Clerk of Court for purpose of reporting uniform data pursuant to section 25.075, Florida Statute. (See instructions for completion.)

1. CASE STYLE

In the Circuit Court of the Ninth Judicial Circuit for Orange County, Florida

		Case Number:
Plaintiff(s)		
v.		
		Division:
Defendant(s)		

2. AMOUNT OF CLAIM

Please indicate the estimated amount of the claim, rounded to the nearest dollar. The estimated amount of the claim is requested for data collection and clerical processing purposes only. The amount of the claim shall not be used for any other purposes.

- \$8,000 or less _____
- \$8,001 - \$30,000 _____
- \$30,001 - \$50,000 _____
- \$50,001 - \$75,000 _____
- \$75,001 - \$100,000 _____
- over \$100,000.00 _____

3. 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.

CIRCUIT CIVIL

- | | |
|--|---|
| <input type="checkbox"/> Condominium
<input type="checkbox"/> Contracts and indebtedness
<input type="checkbox"/> Eminent domain
<input type="checkbox"/> Auto negligence

<input type="checkbox"/> Negligence – other <ul style="list-style-type: none"> <input type="checkbox"/> Business governance <input type="checkbox"/> Business torts <input type="checkbox"/> Environmental/Toxic tort <input type="checkbox"/> Third party indemnification <input type="checkbox"/> Construction defect | <input type="checkbox"/> Homestead residential foreclosure \$50,001 - \$249,999
<input type="checkbox"/> Homestead residential foreclosure \$250,000 or more
<input type="checkbox"/> Non-homestead residential Foreclosure \$0 - \$50,000
<input type="checkbox"/> Non-homestead residential Foreclosure \$50,001-\$249,999
<input type="checkbox"/> Non-homestead residential Foreclosure \$250,000 or more
<input type="checkbox"/> Other <ul style="list-style-type: none"> <input type="checkbox"/> Antitrust / trade regulation <input type="checkbox"/> Business transactions <input type="checkbox"/> Constitutional challenge – statute or ordinance <input type="checkbox"/> Constitutional challenge – proposed amendment |
|--|---|

- | | |
|---|---|
| <input type="checkbox"/> Mass tort | <input type="checkbox"/> Corporate trusts |
| <input type="checkbox"/> Negligent security | <input type="checkbox"/> Discrimination – employment or other |
| <input type="checkbox"/> Nursing home negligence | <input type="checkbox"/> Insurance claims |
| <input type="checkbox"/> Premises liability – commercial | <input type="checkbox"/> Intellectual property |
| <input type="checkbox"/> Premises liability – residential | <input type="checkbox"/> Libel / Slander |
| <input type="checkbox"/> Products liability | <input type="checkbox"/> Shareholder derivative action |
| <input type="checkbox"/> Real property / Mortgage foreclosure | <input type="checkbox"/> Securities litigation |
| <input type="checkbox"/> Commercial foreclosure \$0 - \$50,000 | <input type="checkbox"/> Trade secrets |
| <input type="checkbox"/> Commercial foreclosure \$50,001 - \$249,999 | <input type="checkbox"/> Trust litigation |
| <input type="checkbox"/> Commercial foreclosure \$250,000 or more | |
| <input type="checkbox"/> Homestead residential foreclosure \$0 - \$50,000 | |

PLEASE CHECK THIS BOX IF THIS CASE IS APPROPRIATE FOR ASSIGNMENT TO THE COMPLEX BUSINESS LITIGATION DIVISION. PLEASE SEE ATTACHED COMPLEX BUSINESS LITIGATION DIVISION ADDENDUM FORM.

COUNTY CIVIL

- Small Claims
- Civil
- Real property/Mortgage foreclosure
- Replevins
- Evictions
 - Residential Evictions
 - Non-Residential Evictions
- Other civil (non-monetary)

4. REMEDIES SOUGHT (Check all that apply):

- Monetary;
- Non-monetary declaratory or injunctive relief;
- Punitive

5. NUMBER OF CAUSES OF ACTION: _____

(Specify) _____

6. IS THIS CASE A CLASS ACTION LAWSUIT?

- Yes
- No

7. HAS NOTICE OF ANY KNOWN RELATED CASE BEEN FILED?

- No
- Yes. If “Yes”, list all related cases by name, case number and court. _____

8. 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, and that I have read and will comply with the requirements of Florida Rule of Judicial Administration 2.425.

Signature _____

Attorney or Party

FL Bar Number _____

(Bar Number if attorney)

Type or Print Name

Date