

FORM 1.997. CIVIL COVER SHEET

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

IN THE COUNTY COURT OF THE NINTH JUDICIAL CIRCUIT, IN
AND FOR ORANGE COUNTY, FLORIDA

Plaintiff _____

Case # _____
Judge _____

vs.

Defendant _____

I. 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 purpose.

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

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 on both the main category and subcategory lines.

CIRCUIT CIVIL

- _____ Condominium
- _____ Contracts and indebtedness
- _____ Eminent domain
- _____ Auto negligence
- _____ Negligence—other
 - _____ Business governance
 - _____ Business torts

- _____ Environmental/Toxic tort
- _____ Third party indemnification
- _____ Construction defect
- _____ Mass tort
- _____ Negligent security
- _____ Nursing home negligence
- _____ Premises liability—commercial
- _____ Premises liability—residential

- _____ Products liability
- ___ Real property/Mortgage foreclosure
 - _____ Commercial foreclosure
 - _____ Homestead residential foreclosure
 - _____ Non-homestead residential foreclosure
 - _____ Other real property actions

- _____ Professional malpractice
 - _____ Malpractice—business
 - _____ Malpractice—medical
 - _____ Malpractice—other professional
- _____ Other
 - _____ Antitrust/Trade regulation
 - _____ Business transactions
 - _____ Constitutional challenge—statute or ordinance
 - _____ Constitutional challenge—proposed amendment
 - _____ Corporate trusts
 - _____ Discrimination—employment or other
 - _____ Insurance claims
 - _____ Intellectual property
 - _____ Libel/Slander
 - _____ Shareholder derivative action
 - _____ Securities litigation
 - _____ Trade secrets
 - _____ Trust litigation

COUNTY CIVIL

- _____ Civil
- _____ Real Property/Mortgage foreclosure
- _____ Evictions
 - _____ Residential Evictions
 - _____ Non-residential Evictions

- _____ Other civil (non-monetary)

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

Signature _____
Attorney or party

Fla. Bar # _____
(Bar # if attorney)

(type or print name)

Date