

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).

I. CASE STYLE

_____ COURT, EIGHTEENTH JUDICIAL CIRCUIT,
IN AND FOR SEMINOLE COUNTY, FLORIDA

Plaintiff _____

CASE #: _____

vs.

JUDGE: _____

Defendant _____

II. AMOUNT OF CLAIM

Please indicate the estimated amount of the claim, rounded to the nearest dollar. \$_____ The estimated amount of 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 - \$50,000
- _____ \$50,001 - \$75,000
- _____ \$75,001 - \$100,000
- _____ over \$100,000.00

III. 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 | _____ Professional Malpractice |
| _____ Contracts and indebtedness | _____ Malpractice-Business |
| _____ Eminent Domain | _____ Malpractice-Medical |
| _____ Auto Negligence | _____ Malpractice-Other Professional |
| _____ Negligence – Other | |
| _____ Business Governance | _____ Other |
| _____ Business Torts | _____ Antitrust/Trade Regulation |
| _____ Environmental/Toxic Tort | _____ Business Transactions |
| _____ Third Party Indemnification | _____ Constitutional Challenge - |
| _____ Construction Defect | _____ Statute or Ordinance |
| _____ Mass Tort | _____ Constitutional Challenge - |
| _____ Negligent Security | _____ Proposed Amendment |
| _____ Nursing Home Negligence | _____ Corporate Trusts |
| _____ Premises Liability – Commercial | _____ Discrimination-Employment |
| _____ Premises Liability – Residential | _____ or Other |
| | _____ Insurance Claims |
| _____ Products Liability | _____ Intellectual Property |
| _____ Real Property/Mortgage Foreclosure | _____ Libel/Slander |
| _____ Commercial Foreclosure | _____ Shareholder Derivative Action |
| _____ NonHomestead Residential Foreclosure | _____ Securities Litigation |
| _____ Other Real Property Actions | _____ Trade Secrets |
| | _____ Trust Litigation |

COUNTY CIVIL

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

IV. REMEDIES SOUGHT (check all that apply):

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

V. NUMBER OF CAUSES OF ACTION: _____

Specify: _____

VI. IS THIS CASE A CLASS ACTION LAWSUIT?

- yes
- no

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

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

VIII. 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