

**UNITED STATES COURT OF APPEALS
DISTRICT OF COLUMBIA CIRCUIT**

333 Constitution Avenue, NW
Washington, DC 20001-2866
Phone: 202-216-7000 | Facsimile: 202-219-8530

CIVIL DOCKETING STATEMENT

All Cases Other than Administrative Agency Cases (To be completed by appellant)

1. CASE NO. _____ 2. DATE DOCKETED: _____
3. CASE NAME (lead parties only) _____ v. _____
4. TYPE OF CASE: District Ct - US Civil Private Civil Criminal Bankruptcy
 Bankruptcy - if direct from Bankruptcy Court Original proceeding
5. IS THIS CASE REQUIRED BY STATUTE TO BE EXPEDITED? Yes No
If YES, cite statute _____
6. CASE INFORMATION:
- | | | |
|------------------------------------|-----------------------------------|----------------------------|
| a. District Court Docket No. _____ | Bankruptcy Court Docket No. _____ | Tax Court Docket No. _____ |
| Civil Action _____ | Bankruptcy _____ | Tax _____ |
| Criminal _____ | Adversary _____ | |
| Miscellaneous _____ | Ancillary _____ | |
- b. Review is sought of:
 Final Order Interlocutory Order appealable as of right Interlocutory Order certified for appeal
- c. Name of judge who entered order being appealed:
Judge _____ Magistrate Judge _____
- d. Date of order(s) appealed (use date docketed): _____ e. Date notice of appeal filed: _____
- f. Has any other notice of appeal been filed in this case? Yes No If YES, date filed: _____
- g. Are any motions currently pending in trial court? Yes No If YES, date filed: _____
If YES, identify motion _____
- h. Has a transcript of proceedings been ordered pursuant to FRAP 10(b)? Yes No
If NO, why not? _____
- i. Has this case been before the Court under another appeal number? Yes Appeal # _____ No
- j. Are any cases involving the same underlying order or, to counsel's knowledge, involving *substantially the same issue*, currently pending before the District Court, this Court, another Circuit Court, or the Supreme Court?
 Yes No If YES, give each case's court and case name, and docket number: _____
- k. Does this case turn on validity or correct interpretation or application of a statute? Yes No
If YES, give popular name and citation of statute _____
7. Have the parties attempted to resolve issues in this case through arbitration, mediation, or another alternative for dispute resolution? Yes No If so, provide program name and participation dates _____

Signature _____ Date _____
Name of Party _____
Name of Counsel for Appellant/Petitioner _____
Address _____
Phone (____) _____ Fax (____) _____

ATTACH A CERTIFICATE OF SERVICE

Note: If counsel for any other party believes that the information submitted is inaccurate or incomplete, counsel may so advise the Clerk within 7 calendar days by letter, with copies to all other parties, specifically referring to the challenged statement. Attach a certificate of service to this form.