

CIVIL ACTION COVER SHEET

DOCKET NUMBER

Trial Court of Massachusetts
The Superior Court



COUNTY Bristol Superior Court (New Bedford)

Plaintiff: Town of North Attleborough
Defendant: Steven R. Bankert
ADDRESS: 43 South Washington Street, North Attleborough, MA 02760
ADDRESS: 42 Pratt Lane, North Attleborough, MA 02760
Plaintiff Attorney: Carolyn M. Murray and Roger L. Smerage
Defendant: Deutsche Bank National Trust Company, as Trustee for Morgan Stanley ABS Capital I Inc. Trust 2006-HE4, Mortgage Pass-Through Certificates, Series 2006-HE4
ADDRESS: KP Law, P.C., 101 Arch Street, 12th Floor, Boston, MA 02110-1109
ADDRESS: C/O Specialized Loan Servicing, LLC, 8742 Lucent Blvd., Suite 300, Highlands Ranch, CO 80129
BBO: 653873 (Murray) / 675388 (Smerage)
Defendants: John Does

TYPE OF ACTION AND TRACK DESIGNATION (see instructions section on next page)

CODE NO. AD1 TYPE OF ACTION (specify) Equity Action involving Commonwealth, Municipali TRACK A HAS A JURY CLAIM BEEN MADE? [] YES [X] NO

*If "Other" please describe:

Is there a claim under G.L. c. 93A?

[] YES [X] NO

Is there a class action under Mass. R. Civ. P. 23?

[] YES [X] NO

STATEMENT OF DAMAGES REQUIRED BY G.L. c. 212, § 3A

The following is a full, itemized and detailed statement of the facts on which the undersigned plaintiff or plaintiff's counsel relies to determine money damages. (Note to plaintiff: for this form, do not state double or treble damages; indicate single damages only.)

TORT CLAIMS

A. Documented medical expenses to date

- 1. Total hospital expenses
2. Total doctor expenses
3. Total chiropractic expenses
4. Total physical therapy expenses
5. Total other expenses (describe below)

Subtotal (1-5): \$0.00

B. Documented lost wages and compensation to date

C. Documented property damages to date

D. Reasonably anticipated future medical and hospital expenses

E. Reasonably anticipated lost wages

F. Other documented items of damages (describe below)

TOTAL (A-F): \$0.00

G. Briefly describe plaintiff's injury, including the nature and extent of the injury:

CONTRACT CLAIMS

[] This action includes a claim involving collection of a debt incurred pursuant to a revolving credit agreement. Mass. R. Civ. P. 8.1(a).

Table with 3 columns: Item #, Detailed Description of Each Claim, Amount. Row 1: 1., Total, \$0.00.

Signature of Attorney/Self-Represented Plaintiff: X [Signature] Date: December 20, 2023

RELATED ACTIONS: Please provide the case number, case name, and county of any related actions pending in the Superior Court.

CERTIFICATION UNDER S.J.C. RULE 1:18(5)

I hereby certify that I have complied with requirements of Rule 5 of Supreme Judicial Court Rule 1:18: Uniform Rules on Dispute Resolution, requiring that I inform my clients about court-connected dispute resolution services and discuss with them the advantages and disadvantages of the various methods of dispute resolution.

Signature of Attorney: X [Signature] Date: December 20, 2023