

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF FLORIDA

CIVIL RIGHTS COMPLAINT FORM FOR
PRO SE, PRISONER LITIGANTS IN ACTIONS UNDER
28 U.S.C. § 1331 or § 1346 or 42 U.S.C. § 1983

_____ ,

Inmate ID Number: _____ ,

*(Write the full name and inmate ID
number of the Plaintiff.)*

Case No.: _____
(To be filled in by the Clerk's Office)

v.

_____ ,

_____ ,

*(Write the full name of each
Defendant who is being sued. If the
names of all the Defendants cannot
fit in the space above, please write
"see attached" in the space and
attach an additional page with the
full list of names. Do not include
addresses here.)*

_____ /

Jury Trial Requested?

YES NO

I. PARTIES TO THIS COMPLAINT

A. Plaintiff

Plaintiff's Name: _____ ID Number: _____

List all other names by which you have been known: _____

Current Institution: _____

Address: _____

B. Defendant(s)

State the name of the Defendant, whether an individual, government agency, organization, or corporation. For individual Defendants, identify the person's official position or job title, and mailing address. Indicate the capacity in which the Defendant is being sued. Do this for *every* Defendant:

1. Defendant's Name: _____

Official Position: _____

Employed at: _____

Mailing Address: _____

Sued in Individual Capacity

Sued in Official Capacity

2. Defendant's Name: _____

Official Position: _____

Employed at: _____

Mailing Address: _____

Sued in Individual Capacity Sued in Official Capacity

3. Defendant's Name: _____

Official Position: _____

Employed at: _____

Mailing Address: _____

Sued in Individual Capacity Sued in Official Capacity

(Provide this information for all additional Defendants in this case by attaching additional pages, as needed.)

II. BASIS FOR JURISDICTION

Under 42 U.S.C. § 1983, you may sue state or local officials for the “deprivation of any rights, privileges, or immunities secured by the Constitution” and federal law. Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain Constitutional rights.

Are you bringing suit against (*check all that apply*):

- Federal Officials (*Bivens case*) State/Local Officials (*§ 1983 case*)

III. PRISONER STATUS

Indicate whether you are a prisoner, detainee, or in another confined status:

- Pretrial Detainee Civilly Committed Detainee
 Convicted State Prisoner Convicted Federal Prisoner
 Immigration Detainee Other (*explain below*):
-
-

IV. STATEMENT OF FACTS

Provide a short and plain statement of the ***facts*** which show why you are entitled to relief. Describe how ***each*** Defendant was involved and what each person did, or did not do, in support of your claim. Identify when and where the events took place, and state how each Defendant caused you harm or violated federal law. Write each statement in short numbered paragraphs, limited as far as practicable to a single event or incident. ***Do not make legal argument, quote cases, cite to statutes, or reference a memorandum.*** You may make copies of the following page if necessary to supply all the facts. Barring extraordinary circumstances, no more than five (5) additional pages

should be attached. *Facts not related to this same incident or issue must be addressed in a separate civil rights complaint.*

V. STATEMENT OF CLAIMS

State what rights under the Constitution, laws, or treaties of the United States have been violated. Be specific. If more than one claim is asserted, number each separate claim and relate it to the facts alleged in Section IV. If more than one Defendant is named, indicate which claim is presented against which Defendant.

VI. RELIEF REQUESTED

State briefly what relief you seek from the Court. Do not make legal arguments or cite to cases/ statutes. If requesting money damages (*either actual or punitive damages*), include the amount sought and explain the basis for the claims.

ATTENTION: *The Prison Litigation Reform Act (“PLRA”) does not permit awards for punitive or compensatory damages “for mental or emotional injury suffered while in custody without a prior showing of physical injury or the commission of a sexual act” 42 U.S.C. § 1997e(e).*

VII. EXHAUSTION OF ADMINISTRATIVE REMEDIES

The PLRA requires that prisoners exhaust all available administrative remedies (*grievance procedures*) before bringing a case. 42 U.S.C. § 1997e(a). **ATTENTION:** *If you did not exhaust available remedies prior to filing this case, this case may be dismissed.*

VIII. PRIOR LITIGATION

ATTENTION: *The “three strikes rule” of the PLRA bars a prisoner from bringing a case without full payment of the filing fee at the time of case initiation if the prisoner has “on three or more prior occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury.” 28 U.S.C. § 1915(g).*

A. To the best of your knowledge, have you had any case dismissed for a reason listed in § 1915(g) which counts as a “strike”?

YES NO

If you answered yes, identify the case number, date of dismissal and court:

1. Date: _____ Case #: _____

Court: _____

2. Date: _____ Case #: _____

Court: _____

3. Date: _____ Case #: _____

Court: _____

(If necessary, list additional cases on an attached page)

B. Have you filed other lawsuits in either **state or federal court** dealing with the same facts or issue involved in this case?

YES NO

If you answered yes, identify the case number, parties, date filed, result *(if not still pending)*, name of judge, and court for each case *(if more than one)*:

1. Case #: _____ Parties: _____

Court: _____ Judge: _____

Date Filed: _____ Dismissal Date (*if not pending*): _____

Reason: _____

2. Case #: _____ Parties: _____

Court: _____ Judge: _____

Date Filed: _____ Dismissal Date (*if not pending*): _____

Reason: _____

C. Have you filed any other lawsuit in federal court either challenging your conviction or otherwise relating to the conditions of your confinement?

YES NO

If you answered yes, identify all lawsuits:

1. Case #: _____ Parties: _____

Court: _____ Judge: _____

Date Filed: _____ Dismissal Date (*if not pending*): _____

Reason: _____

2. Case #: _____ Parties: _____

Court: _____ Judge: _____

Date Filed: _____ Dismissal Date (*if not pending*): _____

Reason: _____

3. Case #: _____ Parties: _____

Court: _____ Judge: _____

Date Filed: _____ Dismissal Date (*if not pending*): _____

Reason: _____

4. Case #: _____ Parties: _____

Court: _____ Judge: _____

Date Filed: _____ Dismissal Date (*if not pending*): _____

Reason: _____

5. Case #: _____ Parties: _____

Court: _____ Judge: _____

Date Filed: _____ Dismissal Date (*if not pending*): _____

Reason: _____

6. Case #: _____ Parties: _____

Court: _____ Judge: _____

Date Filed: _____ Dismissal Date (*if not pending*): _____

Reason: _____

*(Attach additional pages as necessary to list all cases. **Failure to disclose all prior cases may result in the dismissal of this case.**)*

IX. CERTIFICATION

I declare under penalty of perjury that the foregoing (including all continuation pages) is true and correct. Additionally, as required by Federal

Rule of Civil Procedure 11, I certify that to the best of my knowledge, information, and belief, this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a non-frivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

I agree to timely notify the Clerk's Office if there is any change to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date: _____ Plaintiff's Signature: _____

Printed Name of Plaintiff: _____

Correctional Institution: _____

Address: _____

I certify and declare, under penalty of perjury, that this complaint was

(check one) delivered to prison officials for mailing or deposited in

**the prison's mail system for mailing on the _____ day of _____,
20_____.**

Signature of Incarcerated Plaintiff: _____