
Plaintiff's Full Name(s)

Prisoner or Registration Number

Street Address or Postal Box Number

City, State and Zip code

**IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF INDIANA**

Civil Action No. _____
(To be supplied by the Court)

Plaintiff(s)
Full Name(s) (Do not use *et al.*)

v.

Defendant(s).
Enter above the full name(s) of ALL defendants in this action.
(Do not use *et al.*)

PRISONER CIVIL COMPLAINT

I. PARTIES

A. Plaintiff's Information:

Name and Prisoner Number of Plaintiff: _____

Present Place of Confinement or Mailing Address: _____

B. Defendant's Information: *(NOTE: To provide information about more defendants than there is room for here, use this format on another sheet of paper.)*

Name of Defendant 1: _____

Title (if applicable): _____

Address of Defendant: _____

Name of Defendant 2: _____

Title (if applicable): _____

Address of Defendant: _____

Name of Defendant 3: _____

Title (if applicable): _____

Address of Defendant: _____

Name of Defendant 4: _____

Title (if applicable): _____

Address of Defendant: _____

II. JURISDICTION

Jurisdiction is invoked pursuant to 28 U.S.C. § 1331. *(If you wish to assert jurisdiction under additional statutes, you may fill in the title and section below.)*

_____ U.S.C. § _____

_____ U.S.C. § _____

III. BASIS FOR CLAIMS

Check any applicable item(s):

- _____ Complaint Under the Civil Rights Act, **42 U.S.C. § 1983**(state, county, or municipal defendants)
- _____ Complaint under *Bivens v. Six Unknown Federal Narcotics Agents*, **403 U.S.388 (1971)** (federal defendants)
- _____ Complaint under the **Federal Tort Claims Act**, 28 U.S.C. 2671, *et seq.* (FTCA)
- _____ Other (cite statute, if known)_____

IV. CLAIMS

Briefly state the background of your case:

(Include all facts you consider important, including names of persons involved, places and date. Describe exactly how each defendant is involved. State the facts clearly in your own words without citing legal authority or argument.)

Claim 1: _____

Claim 2: _____

Claim 3: _____

V. PREVIOUS LAWSUITS AND ADMINISTRATIVE RELIEF

1. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to the conditions of your imprisonment?

____ Yes ____ No

If you answer is “Yes” describe each lawsuit. (If there is more than one lawsuit, describe the additional lawsuits using this same format on a blank sheet which you should label “**V. Previous Lawsuits and Administrative Relief**”.)

A. Parties to previous lawsuits:

Plaintiff(s): _____

Defendant(s): _____

B. Name and location of court and docket number:

C. Disposition of lawsuit. (For example, was the case dismissed? Was it appealed? Is it still pending?) _____

D. Issues raised: _____

E. Approximate date of filing lawsuit: _____

F. Approximate date of disposition: _____

2. I have previously exhausted available administrative remedies regarding the events or acts complained of in Part IV of this complaint. _____ Yes _____ No

If your answer is "Yes", briefly describe how relief was sought and the result:

VI. PREVIOUSLY DISMISSED ACTIONS OR APPEALS

1. If you are proceeding under 28 U.S.C. § 1915, please list each civil action or appeal you have brought in any court of the United States while you were incarcerated or detained in any facility, that was dismissed as frivolous, malicious, or for failure to state a claim upon which relief may be granted. (If there is more than one lawsuit, describe the additional lawsuits using this same format on a blank sheet which you should label "**VI. Previously Dismissed Actions or Appeals**").

A. Parties to previous lawsuit:

Plaintiff(s): _____

Defendant(s): _____

B. Name and location of court and docket number: _____

C. Grounds for dismissal (check if applicable):

() Frivolous () Malicious () Failure to state a claim upon which relief may be granted

D. Approximate date of filing lawsuit: _____

E. Approximate date of disposition: _____

VII. REQUEST FOR RELIEF

I request the following relief:

Signature of Attorney (if any)

Plaintiff's Signature

Date: _____

DECLARATION UNDER PENALTY OF PERJURY

The undersigned declares under penalty of perjury that he/she is the plaintiff in the above action, that he/she has read the above complaint and that the information contained in the complaint is **true and correct**.

Executed at _____ on _____.
(Location) (Date)

Prisoner's Original Signature