FULL NAME	
COMMITTED NAME (if different)	
FULL ADDRESS INCLUDING NAME OF INSTITUTION	
PRISON NUMBER (if applicable)	
UNITED STATES I CENTRAL DISTRIC	
	CASE NUMBER
PLAINTIFF,	To be supplied by the Clerk
V.	CIVIL RIGHTS COMPLAINT
DEFENDANT(S).	PURSUANT TO (Check one) □ 42 U.S.C. § 1983 □ Bivens v. Six Unknown Agents 403 U.S. 388 (1971)

A. PREVIOUS LAWSUITS

- 1. Have you brought any other lawsuits in a federal court while a prisoner: \Box Yes \Box No
- 2. If your answer to "1." is yes, how many?

Describe the lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on an attached piece of paper using the same outline.)

a.	Parties to this previous lawsuit:	
	Plaintiff	

			Defendants
		b.	Court
		c.	Docket or case number
		d.	Name of judge to whom case was assigned
		e.	Disposition (For example: Was the case dismissed? If so, what was the basis for dismissal? Was it
			appealed? Is it still pending?)
		f.	Issues raised:
		g.	Approximate date of filing lawsuit:
		U	
		h.	Approximate date of disposition
B.	USTION OF ADMINISTRATIVE REMEDIES		
	1.		here a grievance procedure available at the institution where the events relating to your current complaint curred? \Box Yes \Box No
	2.	На	ve you filed a grievance concerning the facts relating to your current complaint? \Box Yes \Box No
		Ify	our answer is no, explain why not
	3.	Is t	he grievance procedure completed? \Box Yes \Box No
		Ify	vour answer is no, explain why not
	4.	Ple	ase attach copies of papers related to the grievance procedure.
C.	ш	RIS	DICTION
C.			
	Th	is co	omplaint alleges that the civil rights of plaintiff
	wh	io pr	esently resides at, (mailing address or place of confinement)
			(mailing address or place of confinement) iolated by the actions of the defendant(s) named below, which actions were directed against plaintiff at
			(institution/city where violation occurred)
			(institution/only where violation occurred)

	late or da	,	(Claim I)	(Claim II)	(Clain	n III)
TO				defendant or allege more f this page to provide the		
Ι	Defendar	nt (full nam	e of first defendant)			resides or works at
		(full addr	ess of first defendant)			
		(defendar	nt's position and title, if any)			
]	The defe	ndant is su	ed in his/her (Check on	e or both): □ individual	□ official capacity	
H	Explain h	now this de	fendant was acting und	er color of law:		
Ī	Defendar	nt (full nam	e of first defendant)			resides or works at
		(full addr	ess of first defendant)			
		(defendar	nt's position and title, if any)			
]	The defe	ndant is su	ed in his/her (Check on	e or both): individual	□ official capacity	
F	Explain h	now this de	fendant was acting und	er color of law:		
Ī	Defendar		e of first defendant)			resides or works at
		(full addr	ess of first defendant)			
		(defendar	nt's position and title, if any)			
]	The defendant is sued in his/her (Check one or both): \Box individual \Box official capacity.					
I	Explain h	now this de	fendant was acting und	er color of law:		

4.	Defendant	(full name of first defendant)	resides or works at
		(full address of first defendant)	
		(defendant's position and title, if any)	
	The defend	ant is sued in his/her (Check one or both): \Box individual \Box official capacity	
	Explain hov	w this defendant was acting under color of law:	
5.	Defendant		resides or works at
		(full name of first defendant)	
		(full address of first defendant)	
		(defendant's position and title, if any)	
	The defend	ant is sued in his/her (Check one or both): \Box individual \Box official capacity	

D. CLAIMS*

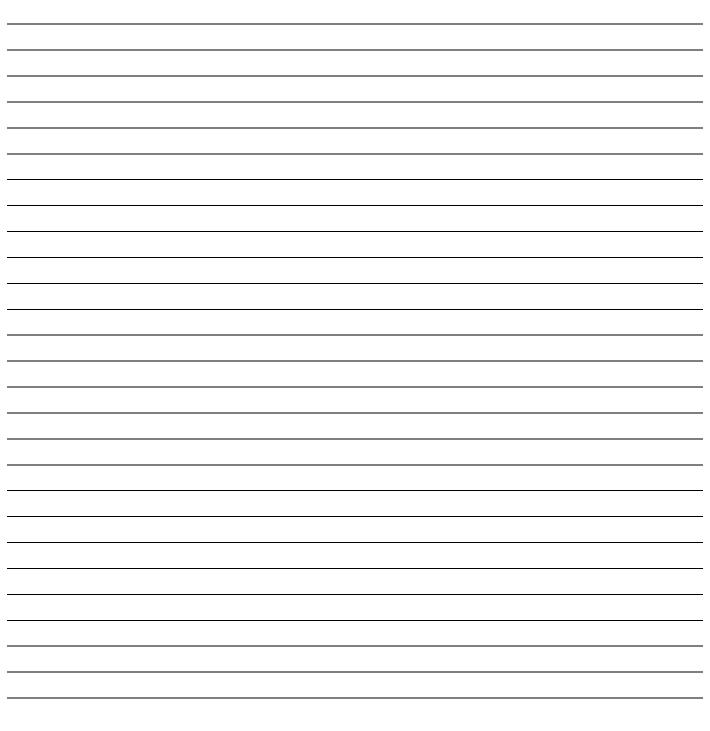
The following civil right has been violated:

Supporting Facts: Include all facts you consider important. State the facts clearly, in your own words, and without citing legal authority or argument. Be certain you describe, in separately numbered paragraphs, exactly what each DEFENDANT (by name) did to violate your right.

*If there is more than one claim, describe the additional claim(s) on another attached piece of paper using the same outline.

E. REQUEST FOR RELIEF

I believe that I am entitled to the following specific relief:



(Date)

(Signature of Plaintiff)