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 PURSUANT TO (Check one)
DEFENDANT(S).	☐ 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			
0. Count						
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:			
		~	Ammonimente dete efficie a la servite			
		g.	Approximate date of filing lawsuit:			
		h.	Approximate date of disposition			
B.	EX	KHA	USTION OF ADMINISTRATIVE REMEDIES			
	1.	1. Is there a grievance procedure available at the institution where the events relating to your current complaint occurred? □ Yes □ No				
	2.	На	lave you filed a grievance concerning the facts relating to your current complaint? \Box Yes \Box No			
		If y	f your answer is no, explain why not			
	3.	Is t	he grievance procedure completed? \Box Yes \Box No			
		If y	your answer is no, explain why not			
	4.	Ple	ase attach copies of papers related to the grievance procedure.			
C.	JU	RIS	DICTION			
	This complaint alleges that the civil rights of plaintiff					
	(print plaintiff's name)					
	who presently resides at					
			olated by the actions of the defendant(s) named below, which actions were directed against plaintiff at			
			(institution/city where violation occurred)			

n (date o	1 uate	(Claim I)	,(Claim II)	, (Clair	n III)
OTE:			one defendant or allege more py of this page to provide the		
Defen	dant	(full name of first defendant)			resides or works at
		(full address of first defendant)			
		(defendant's position and title, if	any)		
The d	efend	ant is sued in his/her (Check	k one or both): □ individual	□ official capacity	
Expla	in hov	w this defendant was acting	under color of law:		
Defen	dant	(full name of first defendant)			resides or works at
		(full address of first defendant)			
		(defendant's position and title, if	any)		
The d	efend	ant is sued in his/her (Checl	k one or both): □ individual	□ official capacity	
Expla	in hov	w this defendant was acting	under color of law:		
Defen	dant	(full name of first defendant)			resides or works at
		(full address of first defendant)			
		(defendant's position and title, if	any)		
The d	efend	ant is sued in his/her (Checl	k one or both): □ individual	□ official capacity	
Expla	in hov	w this defendant was acting	under 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)