

Revision Date: 4/8/2013

## INSTRUCTIONS FOR PRISONERS SEEKING TO FILE A CIVIL RIGHTS COMPLAINT PURSUANT TO 42 U.S.C. § 1983

You must comply with the following instructions before the Clerk will file your Complaint

Local Rule CR 103, Local Rules for the Western District of Washington, requires you to submit your Complaint on the form furnished by the Court (a § 1983 form is attached). The clerk will upload the complaint to the docket and make copies of it for service upon the defendant(s). Plaintiff should keep a copy of the complaint for his or her own records; the clerk will not routinely return a copy of the complaint to plaintiff.

You must submit either the full \$400.00 filing fee or a completed *in forma pauperis* application, including a certified copy of your prisoner account. Carefully read the information sheet for prisoners seeking leave to proceed *in forma pauperis* (without prepayment of the entire filing fee).

You may bring your Complaint to the United States District Court for the Western District of Washington only if one or more of the named defendants is located within this district, or if your claim arose from this district. If you have more than one claim, you must file a separate complaint for each claim unless they are related to the same incident or issue.

Your Complaint must be legibly handwritten or typed. **NOTE: DO NOT WRITE ON THE BACK OF ANY OF THE PAGES OF THE COMPLAINT;** any writing on the back of any page might not be considered by the Court. You must sign the Complaint and declare under penalty of perjury that the facts stated in the Complaint are correct. If you need additional space to answer a question, you should attach an additional page.

You are required to state facts in support of each claim. The Complaint should refer to the provision of the federal constitution or federal law on which you are relying. **THE COMPLAINT SHOULD NOT CONTAIN LEGAL ARGUMENTS OR CITATIONS.**

You must keep the Clerk of the Court informed of any change of address. If you fail to do so, the Clerk cannot be responsible for your failure to receive Court Orders. This also could result in the dismissal of your suit.

If your claim arose in King, Snohomish, Skagit, Whatcom or Island Counties, mail your completed forms, the originals and all copies to:

Clerk, U.S. District Court  
700 Stewart Street, Suite 2310  
Seattle WA 98101-1271

If your claim arose in any other county in the Western District of Washington, mail your completed forms, the originals and all copies to:

Clerk, U.S. District Court  
1717 Pacific Ave, Room 3100  
Tacoma WA 98402

UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF WASHINGTON

\_\_\_\_\_  
(Name of Plaintiff)

vs.

CIVIL RIGHTS COMPLAINT  
BY A PRISONER UNDER 42  
U.S.C. § 1983

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Names of Defendant(s))

**I. Previous Lawsuits:**

A. Have you brought any other lawsuits in any federal court in the United States while a prisoner?:

Yes       No

B. If your answer to A is yes, how many?: \_\_\_\_\_. Describe the lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper using the same outline.)

1. Parties to this previous lawsuit:

Plaintiff: \_\_\_\_\_

Defendants: \_\_\_\_\_

2. Court (give name of District): \_\_\_\_\_

3. Docket Number: \_\_\_\_\_

4. Name of judge to whom case was assigned: \_\_\_\_\_

5. Disposition (For example: Was the case dismissed as frivolous or for failure to state a claim? Was it appealed? Is it still pending?):  
\_\_\_\_\_

6. Approximate date of filing lawsuit: \_\_\_\_\_

7. Approximate date of disposition: \_\_\_\_\_

**II. Place of Present Confinement:** \_\_\_\_\_

A. Is there a prisoner grievance procedure available at this institution?     Yes     No

B. Have you filed any grievances concerning the *facts* relating to this complaint?  
 Yes     No

If your answer is NO, explain why not:  
\_\_\_\_\_  
\_\_\_\_\_

C. Is the grievance process completed?     Yes     No

**If your answer is YES, ATTACH A COPY OF THE FINAL GRIEVANCE RESOLUTION for any grievance concerning facts relating to this case.**

**III. Parties to this Complaint**

A. Name of Plaintiff: \_\_\_\_\_ Inmate No.: \_\_\_\_\_

Address: \_\_\_\_\_

(In Item B below, place the full name of the defendant, his/her official position, and his/her place of employment. Use item C for the names, positions and places of employment of any additional defendants. Attach additional sheets if necessary.)

B. Defendant: \_\_\_\_\_ Official Position: \_\_\_\_\_

Place of employment: \_\_\_\_\_



**V. Relief**

(State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.)

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I declare under penalty of perjury that the foregoing is true and correct.

Signed this \_\_\_\_\_ day of \_\_\_\_\_ 20 \_\_\_\_\_.

\_\_\_\_\_  
(Signature of Plaintiff)