

UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF MICHIGAN

Prisoner Civil Rights Complaint under 42 U.S.C. § 1983

Purpose

This form is for use by state prisoners filing under 42 U.S.C. § 1983 and federal prisoners filing pursuant to *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 288 (1971).

You may file a complaint in the United States District Court for the Eastern District of Michigan if one or more of the named defendants is located within the Eastern District of Michigan or if the cause of action arose in this District.

Filling out the form

Fill out the attached form and answer each item completely in the space provided. Be sure all answers are typewritten or legibly handwritten. You must file a separate complaint for each claim, unless all the claims are related to the same incident, issue, or defendant.

- You must provide a complete and accurate list of the name of each defendant, the address for each defendant, and the capacity in which each defendant is being sued.
- If additional pages are needed, they must be typed or neatly written on 8 ½ x 11" white paper and securely attached to the complaint.
- You must tell the truth and each plaintiff must sign and date the form. If you make a false statement of a material fact, you may be prosecuted for perjury.

Filing Fee

For the current filing fee, consult the Fee Schedule on the court's website at www.mied.uscourts.gov. You are obligated to pay the fee even if the court dismisses your complaint or you voluntarily dismiss your complaint.

If unable to pay the filing fee, each plaintiff must:

- Complete an Application to Proceed In Forma Pauperis,
- Sign the Application to Proceed In Forma Pauperis, and
- Provide a certified copy of the prison trust fund account statement for the preceding 6 month period.

If paying the fee: Checks or money orders must be made payable to "Clerk, U.S. District Court" and sent with the complaint to the address indicated below. If you pay the filing fee when you file your complaint, you will be responsible for serving the defendants. (See Instructions for Preparation and Service of Summons Forms.)

Submitting Forms

When the complaint is fully completed, mail the original and one copy of the complaint along with all attachments to:

Office of the Clerk
United States District Court
231 W. Lafayette Boulevard, Fifth Floor
Detroit, MI 48226

Failure to comply with all of the instructions will result in unnecessary delays

Official Use Only		
Case Number	Judge	Magistrate Judge

PRISONER CIVIL RIGHTS COMPLAINT

This form is for use by state prisoners filing under 42 U.S.C. § 1983 and federal prisoners filing pursuant to Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics, 403 U.S. 388 (1971).

Plaintiff's Information			
Name		Prisoner No.	
Place of Confinement			
Street	City	State	Zip Code
Are there additional plaintiffs? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, any additional plaintiffs to this action should be listed on a separate 8½" x 11" sheet of paper and securely attached to the back of this complaint. <u>You must provide names, prisoner numbers and addresses for all plaintiffs.</u>			

Defendant's Information			
Name		Position	
Street/P.O. Box	City	State	Zip Code
Are you suing this defendant in his/her: <input type="checkbox"/> Personal Capacity <input type="checkbox"/> Official Capacity <input type="checkbox"/> Both Capacities			
Are you suing more than one defendant? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, any additional defendants to this action should be listed on a separate 8½" x 11" sheet of paper and securely attached to the back of this complaint. <u>You must provide their names, positions, current addresses and the capacity (personal, official or both) in which you are suing them.</u>			

I. PREVIOUS LAWSUITS

Have you filed any other lawsuits in state or federal court relating to your imprisonment?

Yes No

If "Yes," complete the following section. If "No," proceed to Part II.

Please list all prior civil actions or appeals that you have filed in federal court while you have been incarcerated.

Docket or Case Number:
Name of Court:
Parties (Caption or Name of Case):
Disposition:

Docket or Case Number:
Name of Court:
Parties (Caption or Name of Case):
Disposition:

Docket or Case Number:
Name of Court:
Parties (Caption or Name of Case):
Disposition:

Any additional civil actions should be listed on a separate sheet of 8½" x11" paper and securely attached to the back of this complaint.

II. STATEMENT OF FACTS

State here, as briefly as possible, the facts of your case. Describe how each defendant is involved. Include the names of other people, dates and places involved in the incident. Do not give any legal arguments or cite any cases or statutes.

III. STATEMENT OF CLAIMS

State what rights under the Constitution, laws, or treaties of the United States have been violated, and be specific. Set forth each claim in a separate paragraph. If you intend to allege several related claims, number and set forth each claim on a separate 8½" x 11" sheet of paper and securely attach the papers to the back of this complaint.

IV. RELIEF

State briefly and exactly what you want the Court to do for you.

I declare (or certify, verify, or state) under penalty of perjury that the foregoing is true and correct.

Executed (signed) on _____ (date).

Signature of Plaintiff