# IN THE UNITED STATES DISTRICT COURT

# FOR THE DISTRICT OF COLORADO

Civil Action No.

 (To be supplied by the court)

 , Plaintiff

v. **Jury Trial requested:**

**(please check one)**

 **\_\_\_\_ Yes \_\_\_\_ No**

 ,

 ,

 ,

 , Defendant(s).

(*List each named defendant on a separate line. If you cannot fit the names of all defendants in the space provided, please write “see attached” in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Section B. Do not include addresses here.*)

**PRISONER COMPLAINT**

**NOTICE**

Federal Rule of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual’s full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual’s birth; a minor’s initials; and the last four digits of a financial account number.

**Plaintiff need not send exhibits, affidavits, grievances, witness statements, or any other materials to the Clerk’s Office with this complaint.**

# PLAINTIFF INFORMATION

# *You must notify the court of any changes to your address where case-related papers may be served by filing a notice of change of address. Failure to keep a current address on file with the court may result in dismissal of your case*.

#

#  (Name, prisoner identification number, and complete mailing address)

#

#  (Other names by which you have been known)

# *Indicate whether you are a prisoner or other confined person as follows: (check one)*

#  Pretrial detainee

#  Civilly committed detainee

#  Immigration detainee

#  Convicted and sentenced state prisoner

#  Convicted and sentenced federal prisoner

#  Other: (*Please explain*)

# B. DEFENDANT(S) INFORMATION

# *Please list the following information for each defendant listed in the caption of the complaint. If more space is needed, use extra paper to provide the information requested. The additional pages regarding defendants should be labeled “B. DEFENDANT(S) INFORMATION.”*

# Defendant 1:

# (Name, job title, and complete mailing address)

#

#  At the time the claim(s) in this complaint arose, was this defendant acting under color of state or federal law? Yes No (*check one*). Briefly explain:

#

#

# Defendant 1 is being sued in his/her individual and/or official capacity.

# Defendant 2:

# (Name, job title, and complete mailing address)

#

#  At the time the claim(s) in this complaint arose, was this defendant acting under color of state or federal law? Yes No (*check one*). Briefly explain:

#

#

# Defendant 2 is being sued in his/her individual and/or official capacity.

# Defendant 3:

# (Name, job title, and complete mailing address)

#

#  At the time the claim(s) in this complaint arose, was this defendant acting under color of state or federal law? Yes No (*check one*). Briefly explain:

#

#

# Defendant 3 is being sued in his/her individual and/or official capacity.

# C. JURISDICTION

# *Indicate the federal legal basis for your claim(s): (check all that apply)*

#  State/Local Official (42 U.S.C. § 1983)

#  Federal Official

#  As to the federal official, are you seeking:

#  \_\_\_ Money damages pursuant to *Bivens v. Six Unknown Named Agents of Fed. Bureau of Narcotics*, 403 U.S. 388 (1971)

#  \_\_\_ Declaratory/Injunctive relief pursuant to 28 U.S.C. § 1331, 28 U.S.C. § 1361, or 28 U.S.C. § 2201

#  Other: (*please identify*)

#

# D. STATEMENT OF CLAIM(S)

# *State clearly and concisely every claim that you are asserting in this action. For each claim, specify the right that allegedly has been violated and state all facts that support your claim, including the date(s) on which the incident(s) occurred, the name(s) of the specific person(s) involved in each claim, and the specific facts that show how each person was involved in each claim. You do not need to cite specific legal cases to support your claim(s). If additional space is needed to describe any claim or to assert additional claims, use extra paper to continue that claim or to assert the additional claim(s). Please indicate that additional paper is attached and label the additional pages regarding the statement of claims as “D. STATEMENT OF CLAIMS.”*

CLAIM ONE:

 Claim one is asserted against these Defendant(s):

Supporting facts:

**E. PREVIOUS LAWSUITS**

Have you ever filed a lawsuit, other than this lawsuit, in any federal or state court while you were incarcerated? Yes No (*check one*).

*If your answer is “Yes,” complete this section of the form. If you have filed more than one previous lawsuit, use additional paper to provide the requested information for each previous lawsuit. Please indicate that additional paper is attached and label the additional pages regarding previous lawsuits as “E. PREVIOUS LAWSUITS.”*

Name(s) of defendant(s):

Docket number and court:

Claims raised:

Disposition: (is the case still pending?

has it been dismissed?; was relief granted?)

Reasons for dismissal, if dismissed:

Result on appeal, if appealed:

**F. ADMINISTRATIVE REMEDIES**

*WARNING: Prisoners must exhaust administrative remedies before filing an action in federal court regarding prison conditions. See 42 U.S.C. § 1997e(a). Your case may be dismissed or judgment entered against you if you have not exhausted administrative remedies.*

Is there a formal grievance procedure at the institution in which you are confined?

 Yes No (*check one*)

Did you exhaust administrative remedies?

 Yes No (*check one*)

**G. REQUEST FOR RELIEF**

*State the relief you are requesting or what you want the court to do. If additional space is needed to identify the relief you are requesting, use extra paper to request relief. Please indicate that additional paper is attached and label the additional pages regarding relief as “G. REQUEST FOR RELIEF.”*

**H. PLAINTIFF’S SIGNATURE**

I declare under penalty of perjury that I am the plaintiff in this action, that I have read this complaint, and that the information in this complaint is true and correct. *See* 28 U.S.C. § 1746; 18 U.S.C. § 1621.

Under Federal Rule of Civil Procedure 11, by signing below, I also certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending or modifying existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

 (Plaintiff’s signature)

 (Date)

(Revised November 2022)