FORM TO BE USED BY A PRISONER IN FILING A CIVIL RIGHTS COMPLAINT

IN THE UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF OHIO

| (Ente | er above the full name of the plaintiff in this action) | CIVIL CASE NO JUDGE COMPLAINT |
|--------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|
| the fi | (Enter above all name of the defendant(s) in this action | |
| ſ. | Previous Lawsuits A. Have you begun other lawsuits in state or feder this action or otherwise relating to your imprison. | nment? YES NO |
| | B. If your answer to A is yes, describe the lawsulawsuit, describe the additional lawsuits on anot1. Parties to this previous lawsuit | |
| | Plaintiffs | |
| | 2. Court (if federal court, name the district; if state of | |
| | 3. Docket Number 4. Name of judge to whom case was assigned | |

| | 6. Approximate date of filing lawsuit |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | 7. Approximate date of disposition |
| | Place of Present Confinement |
| | A. Is there a prisoner grievance procedure in this institution? YES \square NO \square |
| | B. Did you present the facts relating to your complaint in the state prisoner grievance procedure? YES NO |
| | C. If your answer is YES, |
| | 1. What steps did you take? |
| | 2. What was the result? |
| | D. If your answer is NO, explain why not |
| | E. If there is no prison grievance procedure in the institution, did you complain to prison authorities? YES NO |
| | F. If your answer is YES, |
| | 1. What steps did you take? |
| | 2. What was the result? |
| | Parties |
| | (In item A below, place your name in the first blank and place your present address in the second blank. Do the same for additional plaintiffs, if any). |
| | A. Name of the PlaintiffAddress |
| | (In item B below, place the full name of the defendant in the first blank, his or her official position in the second blank, and his or her place of employment in the third blank. Use item C for the |
| itio | ons and places of employment of any additional defendants). |

| (| Statement of Claim | |
|---|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| | (State here as briefly as possible the facts of your case. Describe how each defer Include also the names of other persons involved, dates and places. Do not give an or cite any cases or statutes. If you intend to allege a number of related claims forth each claim in a separated paragraph. Use as much space as you need. (Att if necessary). | y legal arg s, number |
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| | (continued) (Statement of Claim Continued) | |
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| V. | Relief | |
| | (State briefly exactly what you want the court to do for you. Make no legal argument cases or statutes). | nts. Cite n |
| | cases of statutes). | |
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| | Signed thisday of | • |

I declare under penalty of perjury that the foregoing is true and correct. (Date) (Signature of Plaintiff)

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