# IN THE UNITED STATES DISTRICT COURT FOR THE DISTRICT OF DELAWARE

	<del>-</del> -
(In the space above enter the full name(s) of the plaintiff(s).)	
-against-	Civ. Action No (To be assigned by Clerk's
agamst	Office)
	- COMPLAINT
	( <i>Pro Se</i> Prisoner)
	Jury Demand?
	□Yes
(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the 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 IV. Do not include addresses here.)	— □ No

## **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, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

## I. COMPLAINT

Indicate below the federal legal basis for your claim, if known. This form is designed primarily for pro se prisoners challenging the constitutionality of their conditions of confinement, claims which are often brought under 42 U.S.C. § 1983 (against state, county, or municipal defendants) or in a "Bivens" action (against federal defendants).

Check	one:		
	42 U.S.C. § 1983 (state, o	county, or municipal defenda	nts)
	Action under <i>Bivens v. Si</i> (federal defendants)	ix Unknown Federal Narcotic	cs Agents, 403 U.S. 388 (1971)
II.	PLAINTIFF INFORMAT	TION	
Nan	ne (Last, First, MI)		Aliases
Prise	oner ID #		
Plac	ee of Detention		
Insti	itutional Address		
Cou	nty, City	State	Zip Code
III.	PRISONER STATUS		
Indicat	e whether you are a prisone	er or other confined person a	s follows:
	Pretrial detainee		
	Civilly committed detain	ee	
	Immigration detainee		
	Convicted and sentenced	state prisoner	
	Convicted and sentenced	federal prisoner	

## IV. DEFENDANT(S) INFORMATION

Please list the following information for each defendant. If the correct information is not provided, it could result in the delay or prevention of service. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant 1:				
	Name (Last, First)			
	Current Job Title			
	Current Work Address			
	County, City	State	Zip Code	
Defendant 2:				
	Name (Last, First)			
	Current Job Title			
	Current Work Address			
	County, City	State	Zip Code	

Current Job Title

County, City

Current Work Address

**Defendant(s) Continued** 

# Defendant 3: Name (Last, First) Current Job Title Current Work Address County, City State Zip Code Name (Last, First)

State

Zip Code

# V. STATEMENT OF CLAIM

Place( occuri	
	s) of occurrence:hich of your federal constitutional or federal statutory rights have been violated:
person	ere briefly the FACTS that support your case. Describe how each defendant was ally involved in the alleged wrongful actions, state whether you were physically injured as tof those actions, and if so, state your injury and what medical attention was provided to s:
What happened to you?	

Who did		
what?		

(Del. Rev. 11/14) Pro Se Prisoner Civil Rights Complaint

Was anyone			
else involved?			

(Del. Rev. 11/14) Pro Se Prisoner Civil Rights Complaint

(Del. Rev. 11/14) Pro Se Prisoner Civil Rights Complaint		
VI. ADMINISTRATIVE PROCEDURES  WARNING: Prisoners must exhaust administrative procedures before filing as court about prison conditions. 42 U.S.C. § 1997e(a). Your case may be dismistrative your administrative remedies.		-
Is there a grievance procedure available at your institution?	□ Yes	□ No
Have you filed a grievance concerning the facts relating to this complaint?  If no, explain why not:	□ Yes	□ No
Is the grievance process completed?  If no, explain why not:	□ Yes	□ No
VII. RELIEF		
State briefly what you want the court to do for you. Make no legal arguments. statutes.	Cite no co	ises or

## VIII. PRISONER'S LITIGATION HISTORY

The "three strikes rule" bars a prisoner from bringing a civil action or an appeal in forma
pauperis in federal court if that prisoner has "on three or more occasions, while incarcerated or
detained in any facility, brought an action or appeal in a court of the United States that was
dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relies
may be granted, unless the prisoner is under imminent danger of serious physical injury." 28
U.S.C. §1915(g).

Have you brought any other lawsuits in state or federal court while a prisoner?	□ Yes	□ No
If yes, how many?		
Number each different lawsuit below and include the following:		
<ul> <li>Name of case (including defendants' names), court, and docket no</li> <li>Nature of claim made</li> </ul>	ımber	
• How did it end? (For example, if it was dismissed, appealed, or is below.)	still pending, e	explain

(Del. Rev. 11/14) Pro Se Prisoner Civil Rights Complaint		

### IX. PLAINTIFF'S DECLARATION AND WARNING

Under Federal Rule of Civil Procedure 11, by signing below, I 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; and (3) complies with the requirements of Rule 11.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Plaintiff must sign and date the complaint and provide prison identification number and prison address.

Dated	Plai	Plaintiff's Signature				
Printed Name (Last, First, MI)						
Timed Ivanic (Last, Frist, Wil)						
Prison Identification #						
Prison Address	City	State	Zip Code			

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