

\_\_\_\_\_  
Name

\_\_\_\_\_  
Mailing address

\_\_\_\_\_  
Telephone

**IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF ALASKA**

\_\_\_\_\_,  
(Full name of plaintiff in this action)

Plaintiff,

vs.

Case No. \_\_\_\_\_  
(To be supplied by Court)

**COMPLAINT UNDER  
THE CIVIL RIGHTS ACT  
42 U.S.C. § 1983**

**(NON-PRISONERS)**

\_\_\_\_\_,  
\_\_\_\_\_,  
\_\_\_\_\_,  
\_\_\_\_\_,  
(Full names of ALL defendant(s) in this action.  
Do NOT use *et al.*)

Defendant(s).

**A. Jurisdiction**

Jurisdiction is invoked under 28 U.S.C. § 1343(a)(3) and 42 U.S.C. § 1983. If you assert jurisdiction under any different or additional authorities, list them below:

**B. Parties**

1. Plaintiff: This complaint alleges that the civil rights of \_\_\_\_\_,  
(print your name)  
who presently resides at \_\_\_\_\_, were  
(mailing address)  
violated by the actions of the below named individual(s).

2. Defendants (Make a copy of this page and provide same information if you are naming more than 3 defendants):

Defendant No. 1, \_\_\_\_\_, is a citizen of \_\_\_\_\_,  
(name)  
\_\_\_\_\_, and is employed as a \_\_\_\_\_.  
(state) (defendant's government position/title)

\_\_\_\_\_ This defendant **personally participated** in causing my injury, and I want **money damages**.

**OR**

\_\_\_\_\_ The **policy or custom** of this official's government agency violates my rights, and I seek **injunctive relief** (to stop or require someone do something).

Defendant No. 2, \_\_\_\_\_, is a citizen of \_\_\_\_\_,  
(name)  
\_\_\_\_\_, and is employed as \_\_\_\_\_.  
(state) (defendant's government position/title)

\_\_\_\_\_ This defendant **personally participated** in causing my injury, and I want **money damages**.

**OR**

\_\_\_\_\_ The **policy or custom** of this official's government agency violates my rights, and I seek **injunctive relief** (to stop or require someone do something).

Defendant No. 3, \_\_\_\_\_, is a citizen of \_\_\_\_\_,  
(name)  
\_\_\_\_\_, and is employed as \_\_\_\_\_.  
(state) (defendant's government position/title)

\_\_\_\_\_ This defendant **personally participated** in causing my injury, and I want **money damages**.

**OR**

\_\_\_\_\_ The **policy or custom** of this official's government agency violates my rights, and I seek **injunctive relief** (to stop or require someone do something).

**C. Causes of Action** (You may attach additional pages alleging other causes of action and facts supporting them if necessary. Make copies of page 5 and rename them pages 5A, 5B, etc. and rename the claims, "Claim 4," "Claim 5, etc.").

Claim 1: On or about \_\_\_\_\_, my civil right to \_\_\_\_\_  
(Date) (Right to medical care, access to courts, due process,

freedom of religion, free speech, freedom of association, freedom from cruel and unusual punishment, etc. List **only one** violation.)







**D. Previous Lawsuits**

1. Have you begun other lawsuits in **state or federal court** dealing with the **same facts** involved in this action? \_\_\_\_\_ Yes \_\_\_\_\_ No

2. If your answer is “Yes,” describe each lawsuit. (If there is more than one lawsuit, describe the additional lawsuits by copying this blank page and labeling it page “6A.”)

a. Parties to previous lawsuit:

Plaintiff(s): \_\_\_\_\_

\_\_\_\_\_

Defendant(s): \_\_\_\_\_

\_\_\_\_\_

b. Name and location of court: \_\_\_\_\_

\_\_\_\_\_

c. Docket number: \_\_\_\_\_

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

e. Disposition: \_\_\_\_\_

(For example, was the case dismissed, appealed or still pending?)

f. Issues Raised: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

g. Approximate date case was filed: \_\_\_\_\_

h. Approximate date of final decision: \_\_\_\_\_

**F. Request for Relief**

Plaintiff requests that this Court grant the following relief:

- 1. Damages in the amount of \$ \_\_\_\_\_
- 2. Punitive damages in the amount of \$ \_\_\_\_\_
- 3. An order requiring defendant(s) to \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 4. A declaration that \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- 5. Other: \_\_\_\_\_  
\_\_\_\_\_

Plaintiff demands a trial by \_\_\_\_\_ Jury \_\_\_\_\_ Court. (Choose one.)

**DECLARATION UNDER PENALTY OF PERJURY**

The undersigned declares under penalty of perjury that s/he is the plaintiff in the above action, that s/he has read the above civil rights complaint and that the information contained in the complaint is true and correct.

\_\_\_\_\_  
**Plaintiff's Original Signature**

\_\_\_\_\_  
Plaintiff's Full Name

Executed at \_\_\_\_\_ on \_\_\_\_\_  
(Location) (Date)

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Original Signature of Attorney (if any)

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(Date)

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Attorney's Address and Telephone Number