

INSTRUCTIONS FOR FILING A FEDERAL CIVIL RIGHTS COMPLAINT (BIVENS ACTION)

This packet is to be used by *pro se* prisoners filing a civil rights suit pursuant to Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics, 403 U.S. 388 (1971). A *Bivens* complaint may be filed by a <u>FEDERAL</u> prisoner, against a person or persons acting in his or her individual capacity, under color of <u>FEDERAL</u> authority, for violations of a prisoner's constitutional rights. (LR PL 27.1)

Do NOT use this form for anything other than a <u>FEDERAL</u> civil rights complaint filed under *Bivens***. Separate forms are available for other actions. The Clerk of Court can send you a copy upon request, or one should be available in the law library of your institution.**

GENERAL INFORMATION

THE RIGHT COURT AND THE RIGHT DEFENDANTS

You may file your federal civil rights complaint in the United States District Court for the Northern District of West Virginia **ONLY** if one or more of the defendants is located in the Northern District, or if the events about which you are complaining occurred in the Northern District of West Virginia.

EXHAUSTION

You may not bring an action challenging prison conditions <u>UNTIL YOU HAVE</u> <u>EXHAUSTED ALL AVAILABLE ADMINISTRATIVE REMEDIES</u>, including any grievance system. <u>See</u> 42 U.S.C. § 1997e(a).

SCREENING/DISMISSAL

The Court is required to screen your complaint and to dismiss your case at any time if it determines the following:

- 1. You failed to exhaust all administrative remedies; or
- 2. Your case is frivolous, or malicious, or fails to state a claim on which relief may be granted, or seeks money from a defendant who is immune from such relief.

THREE-STRIKES RULE

If, while incarcerated or detained in any facility, you have filed three or more civil actions or appeals in federal court which were dismissed, either by a district court or an appellate court, as being frivolous, malicious, or failing to state a claim, you are prohibited from bringing another civil action *in forma pauperis*.

COMPENSATORY DAMAGES

If your case is allowed to proceed and you are awarded compensatory damages against a federal officer, before payment of any compensatory damages, the government will attempt to notify victims of the crime for which you were convicted, because you must first pay all pending restitution orders before any part of the award goes to you.

BASIC GUIDELINES

When filing forms and documents with the Court, you must follow these guidelines:

- -Complete all forms as thoroughly as possible
- -Use letter size paper only (8 ½ x 11)
- -Sign all documents
- -Send the original

United States District Court

- -Do not use pencil. Either type or print neatly using black or blue pens only
- -Do not bind or staple documents
- -Write only on the fronts of documents, do not write on the backs of documents
- -Number all additional pages

FORMS AND INSTRUCTIONS FOR FILING DOCUMENTS

To file a civil action, you must use the forms provided by the Court and submit either: (a) the Complaint and filing fee of \$400.00 to be paid by money order or U.S. Treasury check, OR (b) the Complaint and *in forma pauperis* forms, which include: <u>Application and Affidavit to Proceed Without Prepayment of Fees</u> (Attachment B), <u>Consent to Collection of Fees from Trust Account</u> (Attachment C), and the <u>Prisoner Trust Account Report</u> (Attachment D). **FAILURE TO SUBMIT ALL OF THE REQUIRED FORMS WILL RESULT IN DISMISSAL OF YOUR COMPLAINT BY THE COURT**.

Directions for filing a complaint are listed below and all necessary forms are included. Please read all of the following instructions carefully before completing **ANY** of the attached forms. **PLEASE ALSO READ THE LOCAL RULES OF PRISONER LITIGATION**.

<u>THE COMPLAINT</u> (Attachment A). *Instructions for Completing the Complaint Form:*

- a. Submit one original complaint to the Court. Keep one exact copy of the complaint for your records. If you do not keep a copy of your complaint and later request a copy from the Court, you will be required to pay a copying fee of \$0.50 per page.
- b. Forms from other districts must not be submitted.
- c. Do not write on the back of the complaint forms. If you need more space, use additional sheets of paper not to exceed a total of five (5) typed pages or ten (10) neatly printed pages unless accompanied by a Motion for Leave to file excess pages. (LR PL 3.4.4). Additional pages must be numbered. Your complaint and all other pleadings/documents must be in English and must be neatly printed or typed. (LR PL 3.4.1).
- d. DEFENDANTS: You must provide the Clerk of Court with the complete name and address of each defendant. If the first name is unknown, provide an initial. Otherwise, the Clerk cannot prepare a summons for issuance of service of process by the Marshal. <u>See</u> Rule 4 of the Federal Rules of Civil Procedure.
- e. STATEMENT OF CLAIM: You are required to give facts regarding your complaint. When your complaint involves more than one incident, each

incident should be identified as a separate count. Each incident must include appropriate supporting facts and must be clearly described, including the relevant times, dates and locations. Each incident description must also clearly identify the relevant defendant and describe what the defendant's role was in the incident. You must explain what each defendant did to violate your civil rights. All of the claims described in your complaint must arise out of the same set of facts. CLAIMS ARISING OUT OF DIFFERENT SETS OF FACTS MUST BE PRESENTED AND FILED IN SEPARATE COMPLAINTS WHICH REQUIRE SEPARATE FILING FEES. THIS COMPLAINT SHOULD NOT CONTAIN LEGAL ARGUMENTS OR CITATIONS.

- f. RELIEF REQUESTED: State what you want the Court to do for you. Do not make legal arguments.
- g. VERIFICATION: You should make sure that all answers are true and correct. You must declare under "Penalty of Perjury" that the information contained in your complaint is true and accurate. This is done by signing the Complaint form on p. 16.
- h. Note: under RULE 11, Federal Rules of Civil Procedure: only the signature of a *pro se* party on pleadings will be acceptable to the Court.
- i. INSTRUCTIONS FOR A COMPLAINT WITH MORE THAN ONE PLAINTIFF: If you and any other plaintiff(s) have the same claims, events, and defendants to be stated in your complaint, each plaintiff must file a separate complaint.

<u>IN FORMA PAUPERIS FORMS</u> (Attachments B, C, D)

To file an application to proceed without prepayment of fees, you must complete and submit the following forms: <u>Application and Affidavit to Proceed Without Prepayment of Fees</u> (Attachment B), <u>Consent to Collection of Fees from Trust Account</u> (Attachment C), and the <u>Prisoner Trust Account Report</u> (Attachment D) with ledger sheets from your prisoner trust account which reflect your account's activity for the past six months.

After completing the complaint and all applicable forms, proofread them to ensure compliance with all instructions. Return the completed forms and the correct number of copies to the appropriate point of holding court in the County where the events about which you claim occurred. The West Virginia counties for each point of holding court are listed below.

Clerk, U.S. District Court
PO Box 2857
PO Box 471
Clarksburg, WV 26302
Attn: Inmate Litigation Clerk
Pleasants, Ritchie, Calhoun, Gilmer,
Braxton, Doddridge, Harrison,
Marion, Monongalia, Taylor and
Po Box 471
Wheeling, WV 26003
Attn: Inmate Litigation Clerk
Hancock, Brooke, Ohio,
Marshall, Wetzel and
Tyler Counties
Preston Counties

Clerk, U.S. District Court 217 W. King St., Room 102 Martinsburg, WV 25401 Attn: Inmate Litigation Clerk Mineral, Hampshire, Morgan, Berkeley and Jefferson Counties Clerk, U.S. District Court PO Box 1518 Elkins, WV 26241 Attn: Inmate Litigation Clerk Lewis, Upshur, Webster, Pocahontas, Randolph, Pendleton, Barbour, Tucker, Grant and Hardy Counties

FILING DOCUMENTS AFTER THE DEFENDANT(S) HAVE ANSWERED

Documents filed with the Clerk of Court after the defendant(s) have answered must be filed with the Court in writing in the form of a pleading, for example: motion, notice, memorandum, etc.

You must serve defense counsel or the defendant(s), if not represented by counsel, with a copy of every pleading, letter, or other document submitted for consideration by the Court. The original of all documents filed with the Clerk should have a "Certificate of Service" (Attachment E).

The Court may return any document submitted to the Clerk of Court for filing that does not bear a proper Certificate of Service. You must sign all papers (pleadings, letters, motions, or other documents) relating to your case and must state the case number. All documents and correspondence submitted to the Clerk of Court should be on letter-size paper (8 ½ x 11 inches). Please do not use legal-size (8 ½ x 14 inches) paper.

IMPORTANT ADDITIONAL INFORMATION

- 1. IF YOU DO NOT KEEP THE COURT ADVISED OF YOUR CURRENT ADDRESS, YOUR CASE WILL BE DISMISSED BY THE COURT.
- 2. It is improper to communicate directly with Judges or Magistrate Judges concerning matters that may become a subject in their Court.
- 3. The Clerk, Judges, Law Clerks, and Magistrate Judges are prohibited from giving legal advice to litigants.

Thank you in advance for your cooperation regarding these instructions.

AT THE DIRECTION OF THE COURT

<u>Cheryl Dean Riley, Clerk</u>
UNITED STATES DISTRICT COURT FOR THE
NORTHERN DISTRICT OF WEST VIRGINIA

IN THE UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF WEST VIRGINIA

Your f	ull nam	ne	FEDERAL CIVIL RIGHTS COMPLAINT (BIVENS ACTION)
v.			Civil Action No.:
			(To be assigned by the Clerk of Court)
Enter	above t	he full name of defendant(s) in	this action
I.	<u>JURI</u>	<u>SDICTION</u>	
<u>Fede</u>	ral Bu	<u> </u>	to <u>Bivens v. Six Unknown Named Agents of</u> S. 388 (1971). The Court has jurisdiction over §§ 1331 and 2201.
II.	PAR'	<u>TIES</u>	
		ow, place your full name, inma e space provided.	te number, place of detention, and complete mailing
	A.	Name of Plaintiff:	Inmate No.:
		Address:	
		ow, place the full name of each and address in the space provi	defendant, his or her official position, place of ded.
r	, ,		

Name of Defendant:					
Position:					
Place of Employment:					
Address:					
Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? □ Yes □ No					
If your answer is "YES," briefly explain:					
Name of Defendant:					
Position:					
Place of Employment:					
Address:					
Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? □ Yes □ No					
If your answer is "YES," briefly explain:					
Name of Defendant:					
Position:					
Place of Employment:Address:					

Nam	ne of Defendant:
Posit	tion:
	e of Employment:
	ress:
Was	this Defendant acting under the authority or color of federal s
	at the time these claims occurred? \Box Yes \Box No
10000	
If yo	our answer is "YES," briefly explain:
Nam	e of Defendant:
	tion:
Place	e of Employment:
	ress:
Was	this Defendant acting under the authority or color of federal s
	at the time these claims occurred? \Box Yes \Box No
iaw c	it the time these claims occurred: — Tes — Tvo
If vo	our answer is "YES," briefly explain:
, ,	

	B.5	Name of Defendant:
		Position:
		Place of Employment:
		Address:
		Was this Defendant acting under the authority or color of federal state law at the time these claims occurred? □ Yes □ No
		If your answer is "YES," briefly explain:
III.	<u>PLA</u>	CE OF PRESENT CONFINEMENT
Nam	e of Pi	rison/ Institution:
	A.	Is this where the events concerning your complaint took place? □ Yes □ No
		If you answered "NO," where did the events occur?
	В.	Is there a prisoner grievance procedure in the institution
		where the events occurred? □ Yes □ No
	C.	Did you file a grievance concerning the facts relating to this complaint in the prisoner grievance procedure? □ Yes □ No
	D.	If your answer is "NO," explain why not:
	E.	If your answer is "YES," identify the administrative grievance procedure number(s) in which the claims raised in this complaint were addressed

		state the result at level one, level two, and level three. ATTACH IEVANCES AND RESPONSES:			
	LEV	VEL 1			
		VEL 2			
		VEL 3			
PRE	EVIOU	US LAWSUITS AND ADMINISTRATIVE REMEDIES			
A.		re you filed other lawsuits in state or federal court dealing with the same involved in this action? □ Yes □ No			
В.	If your answer is "YES", describe each lawsuit in the space below. If there is more than one lawsuit, describe additional lawsuits using the same forma on a separate piece of paper which you should attach and label: "IV PREVIOUS LAWSUITS"				
	1.	Parties to this previous lawsuit:			
		Plaintiff(s):			
		Defendant(s):			
	2.	Court:(If federal court, name the district; if state court, name the county)			
	3.	Case Number:			
	4.	Basic Claim Made/Issues Raised:			
	5.	Name of Judge(s) to whom case was assigned:			
	6.	Disposition:(For example, was the case dismissed? Appealed? Pending?)			

7.

IV.

Approximate date of filing lawsuit:_____

8.	Approximate date of disposition. Attach Copies:
-	you seek informal or formal relief from the appropriate administrative ials regarding the acts complained of in Part B? Solution Yes Solution No
-	ur answer is "YES," briefly describe how relief was sought and the t. If your answer is "NO," explain why administrative relief was not ht.
Did y	you exhaust available administrative remedies? □ Yes □ No
exha	ur answer is "YES,", briefly explain the steps taken and attach proof of ustion. If your answer is "NO," briefly explain why administrative dies were not exhausted.
U.S. Unite was which is more appropriate whom	u are requesting to proceed in this action <i>in forma pauperis</i> under 28 C. § 1915, list each civil action or appeal you filed in any court of the ed States while you were incarcerated or detained in any facility that dismissed as frivolous, malicious, or for failure to state a claim upon h relief may be granted. Describe each civil action or appeal. If there are than one civil action or appeal, describe the additional civil actions appeals using the same format on a separate sheet of paper which you ld attach and label "G. PREVIOUSLY DISMISSED ACTIONS OR EALS"

1.

Parties to previous lawsuit:

Attachment A

		Defendant(s):
2. Name and location of court and case number:		
	3.	Grounds for dismissal: □ frivolous □ malicious □ failure to state a claim upon which relief may be granted
	4.	Approximate date of filing lawsuit:
	5.	Approximate date of disposition:
V. <u>STA</u>	<u>ATEM</u>	ENT OF CLAIM
defendant specific w Include al legal argu claims, y UNRELA ADDITIO NEATLY 3.4.4)	did to vrongfi so the ments o ou mu TED C NAL I PRINT	RIEFLY as possible, the facts of your case. Describe what each violate your constitutional rights. You must include allegations of al conduct as to EACH and EVERY defendant in the complaint. In the complaint and set of other persons involved, dates, and places. Do not give any or cite any cases or statutes. If you intend to allege a number of related st number and set forth each claim in a separate paragraph. ELAIMS MUST BE RAISED IN SEPARATE COMPLAINTS WITH FILING FEES. NO MORE THAN FIVE (5) TYPED OR TEN (10) TED PAGES MAY BE ATTACHED TO THIS COMPLAINT. (LR PL
	•	
Sup	porting	g Facts:

Plaintiff(s):

CLAIM 2:

Supporting Facts: _____

CLAIM 4: _____

Supporting Facts: _____

CLA	IM 5:						
	Supporting Facts:						
VI.	<u>INJURY</u>						
exact	Describe BRIEFLY and SPECIFICALLY how you have been injured and the nature of your damages.						
VII.	RELIEF						
	State BRIEFLY and EXACTLY what you want the Court to do for you. <i>Make no legal arguments. Cite no cases or statutes</i> .						

Attachment A

DECLARATION UNDER PENALTY OF PERJURY

The undersigned declares under penalty of perjury that he/she is the plaintiff in the above action, that he/she has read the above complaint and that the information contained in the complaint is true and accurate. Title 28 U.S.C. § 1746; 18 U.S.C. § 1621.

Executed at		on		
	(Location)	(Date)		
		Your Signature		

IN THE UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF WEST VIRGINIA

	<u></u>
Your full name	<u> </u>
V.	APPLICATION AND AFFIDAVIT TO PROCEED WITHOUT PREPAYMENT OF FEES
	Civil Action No:
	(To be assigned by the Clerk of Court)
	<u> </u>
Enter above the full name of defendant(s) in this action
I, □ Plaintiff/petitioner/movant □ other in this case.	_ declare that I am the (check appropriate box) ☐ Appellant (on appeal to the Fourth Circuit)
In support of my request to proceed § 1915, I declare that I am unable entitled to the relief sought in the country that, if I am granted this application.	without prepayment of fees or costs under 28 U.S.C to pay the costs of these proceedings and that I am complaint/petition/motion/notice of appeal. I agree ion, a portion of any recovery, as directed by the f Court for reimbursement of all unpaid fees and

costs incurred by me in this case.

In su perju	pport of this application, I answer the following que ry:	stio	ns und	er pen	alty of			
1.	I am currently incarcerated at					_•		
<u>ACC</u> CER	ORTANT: HAVE THE INSTITUTION FILL OU OUNT REPORT PORTION OF THIS APPLICATION OF THIS APPLICATION OF THIS ACCOUNTS.	CAT	ION	AND	ATTAC	H A		
2.	Are you employed at the Institution? □ Yes		No					
	If the answer is "YES," state the amount of your p	ay:				_		
3.	In the past twelve (12) months have you received any money from any of the following sources?							
	a. Business, profession or other self-employment		Yes		No			
	b. Rent payments, interest, or dividends		Yes		No			
	c. Pensions, annuities, or life insurance payments		Yes		No			
	d. Disability or workers compensation payments		Yes		No			
	e. Gifts or inheritances		Yes		No			
	f. Any other sources		Yes		No			
	If you answered "YES" to any portion of question #3, describe each source of money and state the amount received and what you expect you will continue to receive.							
4.	Do you have <u>any</u> cash, checking, or savings acco	unt	s othe	r than	vour pris	oner		
ч.	Do you have <u>any</u> cash, checking, or savings acco	unt	s, ome	ı ıllall	your pris	OHEI		

□ Yes	als as an account holder? □ No	·
where your accou	ants are located, the type of	(s) and address(es) of the institutions f account, and the present balance of
•	IRA/money market/ or Cl Yes □ No	Ds separate from the accounts listed
where your accou	ants are located, the type of	(s) and address(es) of the institutions f account, and the present balance of
	n automobile(s) or does	your name appear with any other
	e title of any automobile(s)	•
individuals on the		? □ Yes □ No
individuals on the	e title of any automobile(s) 'YES" above, for <u>each</u> such	? □ Yes □ No
individuals on the If you answered 'Make	e title of any automobile(s) 'YES" above, for <u>each</u> such	? □ Yes □ No n automobile please state:
If you answered ' Make Is it financed?	e title of any automobile(s) "YES" above, for <u>each</u> such Model □ Yes □ No	? □ Yes □ No n automobile please state:
If you answered ' Make Is it financed? If you answered '	e title of any automobile(s) "YES" above, for each sucl Model Ves No "YES," what is the amount real estate, stocks, bonds, se	? □ Yes □ No n automobile please state:Year

	If you answered "YES," describe the property and state its value.
8.	Do you have any assets or personal property other than clothing? □ Yes □ No
	If you answered "YES," describe each such asset and state its value.
9.	Have you placed any property, assets, or cash in the name(s) or custody of anyone else in the last two (2) years? □ Yes □ No
	If you answered "YES," describe each type of property, asset and/or money, give the name(s) of the person(s) given custody, and the reason(s) for the transfer.
	Petitioner's Declaration
	I understand that if I am released or transferred, it is my responsibility to keep ourt informed of my whereabouts and failure to do so will result in this action dismissed by the Court.
Exec	uted at on (Location) (Date)
	Your Signature

IN THE UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF WEST VIRGINIA

Your full n	ame
V.	Civil Action No.:
v.	(To be assigned by the Clerk of Court)
Enter abov	ve the full name of defendant(s) in this action
<u>CO</u>	NSENT TO COLLECTION OF FEES FROM TRUST ACCOUNT
I,_	, Inmate #, hereby consen
for the ap Clerk of	oppropriate prison officials to withhold from my prison account and pay to the Court for the United States District Court, at Elkins, West Virginia, an initial of 20 percent of the greater of the following choices:
(a)	The average monthly deposits to my account for the six month period immediately preceding the filing of the complaint.
OR	miniedately preceding the iming of the complaint.
(b)	The average monthly balance in my account for the six month period immediately preceding the filing of the complaint.
Haitad State	s District Court Northarn District of West Virginia 201

I further consent for the appropriate prison officials to collect from my account, on a continuing basis each month, an amount equal to 20 percent of each month's income. Each time the amount in the account reaches \$10.00, the Trust Officer shall forward the interim payment to the Clerk's Office in Elkins, West Virginia, until such time as the filing fee is paid in full (\$350.00 if request to proceed IFP is granted; \$400.00 if request to proceed IFP is denied, or as otherwise specified by order of this Court).

By executing this document, I also authorize collection on a continuing basis of any additional fees, costs, or sanctions imposed by the United States District Court for the Northern District of West Virginia.

Date	Your Signature	

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IN THE UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF WEST VIRGINIA OFFICE OF THE CLERK P.O. Box 1518 ELKINS, WV 26241-1518

PRISONER TRUST ACCOUNT REPORT

Name:	Inmate #:
TO:	Trust Officer
FROM:	Cheryl Dean Riley, Clerk, U. S. District Court, Northern District of West Virginia
RE:	Civil Action No
from the Tr preceding s	Prison Litigation Reform Act, a prisoner initiating a civil action must obtain rust Officer of each institution in which the prisoner was confined during the fix months, a certified copy of the prisoner's trust account statement for the six or to the filing of his or her petition.
to the priso	pete this form, attach the supporting ledger sheets, and return these documents ner for mailing to the Clerk of Court. The ledger sheets MUST be attached urt to process this form.
Date petition	on to be filed:
Account B	alance at time of filing petition:
	E MONTHLY DEPOSITS during the six months prior to the filing of the civil

Attachment D

AVERAGE MC action:	ONTHLY BALANCE during the six month	hs prior to the filing of the civil
applicant's trust	e above information accurately states the account for the period shown and that the count records maintained in the ordinary	attached ledger sheets are true
Date	Authorized Signature	Title

IN THE UNITED STATES DISTRICT COURT FOR THE NORTHERN DISTRICT OF WEST VIRGINIA

	-
Your full name	-
v.	Civil Action No.:
	-
	- -
Enter above the full name of defendant(s) in	this action
Certi	ficate of Service
Ι,	_(your name here), appearing <i>pro se</i> , hereby certify
that I have served the foregoing	(title of
document being sent) upon the defend	lant(s) by depositing true copies of the same in the
United States mail, postage prepaid	, upon the following counsel of record for the
defendant(s) on	_ (insert date here):
(List name and address of coun	isel for defendant(s))
	(sign your name)

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF WEST VIRGINIA

Case Number: _____ v. NOTICE OF CHANGE OF ADDRESS AND/OR CONTACT INFORMATION FOR PRO SE **LITIGANTS** (Note: You must keep your contact information (address and phone number) current with the Court. The Court and opposing counsel will send orders, correspondence, motions, pleadings, notices, etc., to the last address filed with the Court in writing. Please file a separate Notice of Change of Address form for each case in which you are involved.) I hereby notify the Court that my address has changed as follows: Your name: _____ Old Address:____ New address: My current telephone number is: I hereby request that copies of any future orders, correspondence, motions, pleadings, notices, etc., be provided to me at this new address. I will notify the Clerk of Court in writing by filing a new Notice form if my address or telephone number changes.

Signature_____

Date: _____