## Case 1:20-cv-00171-CCC-JFS Document 1 Filed 02/04/20 Page 1 of 5 FORM TO BE USED BY A PRISONER IN FILING A CIVIL RIGHTS COMPLAINT

## IN THE UNITED STATES DISTRICT COURT FOR THE MIDDLE DISTRICT OF PENNSYLVANIA

(1) LEOn HAYY A Frat 19P-2509 (Name of Plaintiff) (Inmate Number)	
730 EAST WAInut STR 18banon P.AIRGY2 (Address)	: : :
(Name of Plaintiff) (Inmate Number)	1:20-CV-0/7/ (Case Number)
(Address)	
(Each named party must be numbered, and all names must be printed or typed)	
Michael Ott (dePuty Warden	CIVIL COMPLAINT
(2) Tina Litz (Deputy Warden)	FILED SCRANTON
(3) Robert di Karnes (warden) (Names of Defendants)	JAN 3 1 2020
(Each named party must be numbered, and all names must be printed or typed)	DEPUTY CLERK
TO BE FILED UNDER: 42 U	U.S.C. § 1983 - STATE OFFICIALS
28 U.	S.C. § 1331 - FEDERAL OFFICIALS
I. PREVIOUS LAWSUITS	
	eral court while a prisoner, please list the caption and case ne of the judicial officer to whom it was assigned:
121	

## Case 1:20-cv-00171-CCC-JFS Document 1 Filed 02/04/20 Page 2 of 5 II. EXHAUSTION OF ADMINISTRATIVE REMEDIES

In order to proceed in federal court, you must fully exhaust any available administrative remedies as to

	each ground on which you request action.	
	A.	Is there a prisoner grievance procedure available at your present institution? Yes No
	B.	Have you fully exhausted your available administrative remedies regarding each of your present claims? Yes No
	C.	If your answer to "B" is Yes:
		1. What steps did you take? I filed A Grievance to the deputy
		Warden. Then appealed it to the Warden.
		2. What was the result? Both Denied.
	D.	If your answer to "B" is No, explain why not:
III. DEFENDANTS  (1) Name of first defendant: Tina Litz  Employed as Deputy Warden at Lebanon County Correctional Facility Mailing address: 730 EAST Walnut STR LeBanon P.A 17043  (2) Name of second defendant: Robert J. Karnes Employed as Warden at Lebanon County Correctional Facility Mailing address: 730 EAST Walnut STR LeBanon P.A 17043  (3) Name of third defendant: Michael Lott Employed as Deputy Warden at Lebanon County Correctional Facility Mailing address: 730 EAST Walnut STR Lebanon P.A 17043  (List any additional defendants, their employment, and addresses on extra sheets if necessary)  IV. STATEMENT OF CLAIM  (State here as briefly as possible the facts of your case. Describe how each defendant is involved, including		
date	s and pl	aces. Do not give any legal arguments or cite any cases or statutes. Attach no more than three necessary.)
	1.	Part of the administration Classification Committee who placed me
		in Segragation. Also who I sent my griEVANCE to And denied it.
		Im in Ad-seq for having Breadlocks.
		7 7

V.

I declare under penalty of perjury that the foregoing is true and correct.

Signed this January day of 2380, 20 20

(Signature of Plaintiff)

