

(1" from top of page, and centered,
begin title of Court)

**UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA**

Case No. _____ – Civ (Judge’s Last Name/Magistrate’s Last Name)

(Full Name of Plaintiff/s),

Plaintiff (s)

vs.

(Full Name of Defendant/s),

Defendant(s).

_____ /

COMPLAINT

I, _____, plaintiff, in the above styled cause, sue defendant(s): _____

This action is filed under (indicate under which federal law or section of the U.S. Constitution this action is being filed): _____

Dated: Month, day, year

Respectfully submitted,

Name of Filer
Attorney Bar Number (if applicable)
Attorney E-mail Address (if applicable)
Firm Name (if applicable)
Street Address
City, State, Zip Code
Telephone: (xxx)xxx-xxxx
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Attorneys for Plaintiff/Defendant [Party Name(s)]
(if applicable)

Certificate of Service

I hereby certify that a true and correct copy of the foregoing was served by [specify method of service] on [date] on all counsel or parties of record on the Service List below.

Signature of Filer

SERVICE LIST

Party or Attorney Name
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[Party's Name(s)] (if applicable)

Party or Attorney Name
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[Party's Name(s)] (if applicable)