

# UNITED STATES DISTRICT COURT

for the

\_\_\_\_\_ District of \_\_\_\_\_

Case No. \_\_\_\_\_

(to be filled in by the Clerk's Office)

Jury Trial: (check one)  Yes  No

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

Defendant, Third-party plaintiff(s)

(Write the full name of each defendant/third-party plaintiff. If the names of all the defendants/third-party plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

Third-party defendant(s)

(Write the full name of each third-party defendant. If the names of all the third-party defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

## THIRD – PARTY COMPLAINT

### I. The Parties to This Complaint

#### A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address (if known)

**B. The Defendant(s)/Third-Party Plaintiff(s)**

Provide the information below for each defendant/third-party plaintiff named in the complaint. Attach additional pages if needed.

Name	_____
Street Address	_____
City and County	_____
State and Zip Code	_____
Telephone Number	_____
E-mail Address	_____

**C. The Third-Party Defendant(s)**

Provide the information below for each third-party defendant named in the complaint, whether the third-party defendant is an individual, a government agency, an organization, or a corporation. For an individual third-party defendant, include the person's job or title (*if known*). Attach additional pages if needed.

Third-Party Defendant No. 1

Name	_____
Job or Title ( <i>if known</i> )	_____
Street Address	_____
City and County	_____
State and Zip Code	_____
Telephone Number	_____
E-mail Address ( <i>if known</i> )	_____

Third-Party Defendant No. 2

Name	_____
Job or Title ( <i>if known</i> )	_____
Street Address	_____
City and County	_____
State and Zip Code	_____
Telephone Number	_____
E-mail Address ( <i>if known</i> )	_____

Third-Party Defendant No. 3

Name

Job or Title *(if known)*

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address *(if known)*

---

---

---

---

---

---

---

---

Third-Party Defendant No. 4

Name

Job or Title *(if known)*

Street Address

City and County

State and Zip Code

Telephone Number

E-mail Address *(if known)*

---

---

---

---

---

---

---

---

**II. Initial Complaint**

A. Identify the initial complaint filed against you and the date it was filed. Describe the events that gave rise to the plaintiff's complaint, the nature of the claims asserted, and the relief sought. Attach the complaint as an exhibit.

---

B. State whether you have filed an answer to the complaint and, if so, briefly summarize what admissions or denials that answer asserted. Attach the answer as an exhibit.

---

**III. Third-Party Complaint**

A. Describe the nature of the relationship between you and the third-party defendant. Attach any contracts or documents showing the nature of the relationship.

---

B. Explain why, if the plaintiff received any judgment against you, you will be entitled to judgment against the third-party defendant for contribution to or indemnification for the amount of damages and costs awarded to the plaintiff. Include the percentage of the plaintiff's recovery that the third-party defendant will be required to contribute. Describe the facts, or relevant provisions of state law, that demonstrate you are entitled to collect from the third-party defendant.

---

**IV. Certification and Closing**

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, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

**A. For Parties Without an Attorney**

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.

Date of signing: \_\_\_\_\_

Signature of Defendant/Third-Party Plaintiff \_\_\_\_\_

Printed Name of Defendant/Third-Party Plaintiff \_\_\_\_\_

**B. For Attorneys**

Date of signing: \_\_\_\_\_

Signature of Attorney \_\_\_\_\_

Printed Name of Attorney \_\_\_\_\_

Bar Number \_\_\_\_\_

Name of Law Firm

Street Address

State and Zip Code

Telephone Number

E-mail Address

---

---

---

---

---