

IN THE \_\_\_\_\_ COURT OF \_\_\_\_\_ COUNTY  
STATE OF \_\_\_\_\_

\_\_\_\_\_  
)  
)  
)  
)  
**Petitioner/Plaintiff,**  
)  
)  
**Vs.**  
)  
)  
)  
\_\_\_\_\_  
**Respondent/Defendant** )  
)

NO. \_\_\_\_\_

**COMPLAINT**

1. \_\_\_\_\_ is an adult resident citizen of \_\_\_\_\_ County,  
\_\_\_\_\_, residing at \_\_\_\_\_, \_\_\_\_\_.

2. \_\_\_\_\_ is an adult resident citizen of \_\_\_\_\_ County,  
\_\_\_\_\_, residing at \_\_\_\_\_, \_\_\_\_\_.

3. \_\_\_\_\_ resides with her mother and father at  
\_\_\_\_\_, \_\_\_\_\_.

4. \_\_\_\_\_ (hereinafter referred to as \_\_\_\_\_ ) is a  
\_\_\_\_\_ Corporation, authorized to do business in \_\_\_\_\_, and may be served with  
summons and a copy of the Complaint by service upon their designated agent for service of  
process, who is \_\_\_\_\_ , located at \_\_\_\_\_,  
\_\_\_\_\_.

5. \_\_\_\_\_ and \_\_\_\_\_ were at all times material to this  
Complaint employees or agents of \_\_\_\_\_ and were acting in the course and scope

of their employment when the incident in question occurred. They may be served with summons and a copy of the complaint at \_\_\_\_\_, \_\_\_\_\_.

#### Facts

6. On or about the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, the Plaintiffs were walking to a neighbor's home on Highway \_\_\_\_\_ when the Defendants' negligence caused serious injuries to the Plaintiffs. The Defendant's vehicle ran over a group of downed power lines, which in turn snapped up and seriously injured the Plaintiffs.

7. As a proximate result of the negligence of the Defendants, the Plaintiffs were caused to suffer the following injuries and damages:

Plaintiff \_\_\_\_\_:

- A. Left foot injury;
- B. Broken knee;
- C. Loss of past wages;
- D. Medical bills exceeding \_\_\_\_\_ Dollars and No/00 (\$\_\_\_\_\_);
- E. Past and future pain and suffering;
- F. Permanent disability;
- G. Increased risk of arthritis or other future bone and joint deterioration;
- H. Diminished enjoyment of life.

Plaintiff \_\_\_\_\_:

- A. Neck injury;
- B. Loss of past wages;
- C. Medical bills exceeding \_\_\_\_\_ Dollars and No/00 (\$\_\_\_\_\_);
- D. Past and future pain and suffering;
- E. Diminished enjoyment of life.

Plaintiff \_\_\_\_\_:

- A. Acute mental distress;
- B. Past and future pain and suffering;
- C. Left foot injury;
- D. Medical bills exceeding \_\_\_\_\_ Dollars and No/00 (\$\_\_\_\_\_)

WHEREFORE PREMISES CONSIDERED, the Plaintiffs demand judgment of and from the Defendants in the amount of \_\_\_\_\_ Dollars and No/00 (\$\_\_\_\_\_) for Plaintiff \_\_\_\_\_; \_\_\_\_\_ Dollars and No/00 (\$\_\_\_\_\_) for Plaintiff \_\_\_\_\_; and \_\_\_\_\_ Dollars and No/00 (\$\_\_\_\_\_) for Plaintiff \_\_\_\_\_.

Respectfully submitted,

Dated: \_\_\_\_\_

\_\_\_\_\_

Name:  
 Title:  
 Address:  
 Address:  
 City, State, Zip:  
 Phone:  
 Fax:  
 E-Mail:  
 Attorney No.:

**CERTIFICATE OF SERVICE**

I, \_\_\_\_\_, do hereby certify that I have this day mailed,  
U.S. Mail, postage prepaid, a true and correct copy of the above and foregoing to  
\_\_\_\_\_, at the following address;

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THIS the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.