

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

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

**Petitioner/Plaintiff,**  
**Vs.**  
**Respondent/Defendant**

COMPLAINT

(NEGLIGENCE-AUTOMOBILE-GUEST PASSENGER VS. BOTH DRIVERS)

COMES NOW the Plaintiff, *[insert name of plaintiff]*, by counsel, and for his (or her)  
Complaint against the Defendants, *[insert name of defendants]*, alleges and states

PARTIES

1. The Plaintiff, *[insert name of plaintiff]*, (hereinafter referred to as the Plaintiff), at  
all times relevant hereto, is an adult citizen of the State of *[insert state jurisdiction]* and resides  
in *[insert county name]*.

2. The Defendant, *[insert name of driver #1]*, (hereinafter referred to as  
"Defendant"), at all times relevant hereto, is an adult citizen of the State of *[insert state  
jurisdiction]* and resides in *[insert county name]*.

3. The Defendant, *[insert name of driver #2]*, (hereinafter referred to as  
Defendant #2"), at all times relevant hereto, is an adult citizen of the State of *[insert state  
jurisdiction]* and resides in *[insert county name]*.

FACTS

4. On or about [insert date] the Plaintiff was a guest passenger in an [insert description of vehicle] automobile being operated by Defendant #1 on [insert name of roadway, direction of travel and the nearest intersection or traffic control device or other landmark], which said roadway is a: [insert description of roadway and traffic control, e.g., 2 or 4 lane roadway, north and south directions, stop lights or stop signs, etc.]. At said time and place, the road and weather conditions were: [insert road and weather conditions at time of accident].

5. At said time and place, Defendant #2 was operating a [insert description of vehicle] automobile on insert name of roadway, direction of travel and the nearest intersection or traffic control device or other landmark], which said roadway is a: [insert description of roadway and traffic control, e.g., 2 or 4 lane roadway, north and south directions, stop lights or stop signs, etc.].

6. At said time and place, Defendant # 1 operated his automobile in a negligent and careless manner by: [insert description of violation of traffic laws, rules, regulations, rules of the road, etc., e.g., failure to yield right-of-way, failure to keep a proper look out, speeding, failure to keep vehicle under proper control, intoxication, etc.].

7. At said time and place, Defendant # 2 operated his automobile in a negligent and careless manner by: [insert description of violation of traffic laws, rules, regulations, rules of the road, etc., e.g., failure to yield right-of-way, failure to keep a proper look out, speeding, failure to keep vehicle under proper control, intoxication, etc.].

8. At said time and place, the automobiles being operated by Defendant #1 and Defendant #2 collided causing the Plaintiff to sustain: [insert the types of damages, e.g., severe & permanent personal injuries; past, present & future pain & suffering; past, present & future mental anguish; loss of enjoyment of life's activities; permanent or temporary partial/total

1 *disability; lost wages, lost or diminished earning capacity, past, present & future medical bills*  
2 *and expenses; etc.].*

3 CLAIMS

4 9. The Defendants, and each of them, had a duty to: *[insert traffic statutes, rules,*  
5 *regulations, & ordinances].*

6 10. The Defendants, and each of them, breached the duties delineated hereinabove  
7 proximately causing or proximately contributing to the cause of the collision and Plaintiff's  
8 damages alleged herein.  
9

10 DEMAND FOR RELIEF

11 11. The Plaintiff prays for the following relief:

12 (1) Trial by jury;

13 (2) Judgment for Plaintiff and against Defendants, jointly and severally;

14 (3) An award of damages which will fully and fairly compensate Plaintiff for *[insert*  
15 *the types of damages, e.g., severe & permanent personal injuries; past, present &*  
16 *future pain & suffering; past, present & future mental anguish; loss of enjoyment*  
17 *of life's activities; permanent or temporary partial/total disability; lost wages,*  
18 *lost or diminished earning capacity, past, present & future medical bills and*  
19 *expenses; etc.].*

20 (4) Such other and further relief deemed just and proper in the premises.  
21  
22  
23  
24

25 Respectfully submitted,

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

27 Name: \_\_\_\_\_  
28 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;  
\_\_\_\_\_

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

\_\_\_\_\_