

FILED

JUN 06 2016

TIMOTHY M. O'BRIEN CLERK
By: _____ Deputy

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF KANSAS

Crystalee Prothorne
\$ on behalf of A. _____ \$
A. _____ M. _____
(Enter above the full name of the Plaintiff(s))

vs.

Case Number _____

Judge
Name _____
111 W 11th St
Street and number _____
Lawrence KS 66044
City State Zip Code

Please see list of defendants
(Enter above the full name and address of the
Defendant in this action - list the name and
address of any additional defendants on the back
side of this sheet).

CIVIL COMPLAINT

I. Parties to this civil action:

(In item A below, place your name in the first blank and place your present address in the second blank. Do the same for additional plaintiffs, if any, on the back side of this sheet).

A. Name of plaintiff Crystalee Prothorne

Address _____

Lawrence KS 66044

(In item B below, write the full name of the defendant in the first blank. In the second blank, write the official position of the defendant. Use item C for the names and positions of any additional defendants).

B. Defendant Please see list of Defendants is
employed at _____

C. Additional Defendants u

II. Jurisdiction:

(Complete one or more of the following subparagraphs, A., B.1, B.2., or B.3., whichever is applicable.)

A. (If Applicable) Diversity of citizenship and amount:

1. Plaintiff is a citizen of the State of Kansas.
2. The first-named defendant above is either
 - a. a citizen of the State of _____, or
 - b. a corporation incorporated under the laws of the State of _____ and having its principal place of business in a State other than the State of which plaintiff is a citizen.

3. The second-named defendant above is either
 - a. a citizen of the State of Florida/Alabama; or
 - b. a corporation incorporated under the laws of the State of _____ and having its principal place of business in a State other than the State of which plaintiff is a citizen.

(If there are more than two defendants, set forth the foregoing information for each additional defendant on a separate page and attach it to this complaint.)

Plaintiff states that the matter in controversy exceeds, exclusive of interest and costs, the sum of seventy-five thousand dollars (\$75,000.00).

B. (If applicable) Jurisdiction founded on grounds other than diversity
(Check any of the following which apply to this case).

- ☒ 1. This case arises under the following section of the Constitution of the United States or statute of the United States (28 U.S.C. §1331):
Constitution, Article _____, Section _____;
Statute, US Code, Title A2, Section 241, 242, 1984
- ☒ 2. This case arises because of violation of the civil or equal rights, privileges, or immunities accorded to citizens of, or persons within the jurisdiction of, the United States (28 U.S.C. §1343).
- ☒ 3. Other grounds (specify and state any statute which gives rise to such grounds):

Other state agencies did not
follow protocol

III. Statement of Claim:

(State here a short and plain statement of the claim showing that plaintiff is entitled to relief. State what each defendant did that violated the right(s) of the plaintiff, including dates and places of such conduct by the defendant(s). Do not set forth legal arguments. If you intend to allege more than one claim, number and set forth each claim in a separate paragraph. Attach an additional sheet, if necessary, to set forth a short and plain statement of the claim[s].)

Please see "FBI Complaint"

IV. Relief:

(State briefly exactly what judgement or relief you want from the Court. Do not make legal arguments.)

Financial relief, relief from deprivation
of civil rights

V. Do you claim the wrongs alleged in your complaint are continuing to occur at the present time? Yes ☒ No ☐

VI. Do you claim actual damages for the acts alleged in your complaint? Yes ☒ No ☐

VII. Do you claim punitive monetary damages? Yes ☒ No ☐

If you answered yes, state the amounts claimed and the reasons you claim you are entitled to recover money damages.

\$1,000,000.00

The actions of above named has caused
a ripple effect that ultimately ended
in the destruction of my financial security,
(had to file bankruptcy), lost my career
in the Air Force, and lost my opportunity
to successfully graduate nursing school,
the emotional hardship and tremendous
pain and suffering I have endured to
to the "system" not working as intended
has initially destroyed my life, I have tried
to rebuild but the continuous deprivation
of my rights has caused an undue burden.
I am requesting review and relief.
writ of certiorari

VIII. Administrative Procedures:

A. Have the claims which you make in this civil action been presented through any type of Administrative Procedure within any government agency?

Yes ☒ No ☐

B. If you answered yes, give the date your claims were presented, how they were presented, and the result of that procedure:

Please see attached

C. If you answered no, give the reasons, if any, why the claims made in this action have not been presented through Administrative Procedures:

IX. Related Litigation:

Please mark the statement that pertains to this case:

☐

This cause, or a substantially equivalent complaint, was previously filed in this court as case number _____ and assigned to the Honorable Judge _____.

☒

Neither this cause, nor a substantially equivalent complaint, previously has been filed in this court, and therefore this case may be opened as an original proceeding.

CC Prothman
Signature of Plaintiff

Crystal C. Prothman
Name (Print or Type)

Address

Lawrence KS 66046
 City State Zip Code
785-
 Telephone Number

DESIGNATION OF PLACE OF TRIAL

Plaintiff designates { ☐ Wichita, ☒ Kansas City, or ☐ Topeka }, Kansas as the
 (Select One)
 location for the trial in this matter.

CC Roster
 Signature of Plaintiff

REQUEST FOR TRIAL BY JURY

Plaintiff requests trial by jury { ☐ Yes or ☐ No } undecided
 (Select One)

CC Roster
 Signature of Plaintiff

Dated: 6/5/16
 (Rev. 10/15)

List of Defendants

Jude

111 E 11th St

Lawrence, Kansas 66044

Lawrence Kansas

Olathe, KS 66061

New Century KS 66031

Lawrence Police Department

111 E 11th St Ste #2

Lawrence Kansas 66045

Olathe, KS 66061

Alabama

785-

Laurel Hill, FL

Lawrence, KS 66044

Phone:

Fax: