UNITED STATES DISTRICT COURT EASTERN DISTRICT OF NEW YORK Edgus Grazaler	US DISTRICT COURT E.D.N.Y. MAY 3 1 2016 * BROOKLYN OFFICE
Plaintiff, [Insert full name of plaintiff/prisoner]	CIVIL RIGHTS COMPLAINT 42 U.S.C. § 1983 JURY DEMAND
-against- Police Officer Sherman In ms Individual Capicity. and ms Official (apicity)	DORIGINAL AMON, J.
Defendant(s). [Insert full name(s) of defendant(s). If you need additional space, please write "see attached" and insert a separate page with the full names of the additional defendants. The names listed above must be identical to those listed in Page 1.	ne e
I. Parties: (In item A below, place your name address and telephone number. Do the same of plaintiff	e for additional plaintiffs, if any.)
If you are incarcerated, provide the name of DTIS Bantaum Correct LOO HAZEN Street EAST Elmhurst, N.Y. Prisoner ID Number: B/C 14115	the facility and address:

CARCY WAR TO TOIR CAR HOLVIAN

ริเดิมเพรียน ราบาร ค.ศ. พ.ศ. 18 ก. 15 ค.ศ. 15 (ค.ศ. 1866) - อริการเลียน พร้อง ค.ศ. 25 ค.ศ. 17 ค.ศ. 14 (ค.ศ. 1864)

to the chief makes the country and a compar-

ใ<mark>ส่เดิดเห็น ใน</mark>เห็น เข้าให้เลื่องได้แล้ว เกี่ยนได้ เหมือน โดยมีเกี่ยนเมื่อ เกิดสุด และ และ และ และ และ และ และ และ

BROOKLYN OPRICE

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AMON, J.

PLOOM, M.J.

Telephone Number:		
	s. You must provide the full names of each defendant and the ndant may be served. The defendants listed here must match the on on page 1.	
Defendant No. 1	Full Name	
	Job Title TOMKINS ONE	
Defendant No. 2	Address Full Name	
	Job Title	
	Address	
Defendant No. 3	Full Name	
	Job Title	

	Address	
Defendant No. 4		
	Full Name	
	Job Title	
	Address	
Defendant No. 5	Full Name	
	Job Title	
II. Statement of Claim:	Address	
(State briefly and concisely, the <u>facts</u> of your case. Include the date(s) of the event(s) alleged as well as the location where the events occurred. Include the names of each defendant and state how each person named was involved in the event you are claiming violated your rights. You need <u>not</u> give any legal arguments or cite to cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. You may use additional 8 ½ by 11 sheets of paper as necessary.)		
Where did the events giving rise to		
65 Tomkins que	120 KIN 11 11 120 P	
When did the events happen? (include approximate time and date) On May 24, 2014 of about 12:30 pm I was of My circleral mouse		

Facts: (what happened?)
on that day in grestioned I was talsely
Acrestin Volation of My Constitutional
rights under the 4th, oth, 10th, and 14th
Emendment of the united Storte Constitutional
The Process Clause. The Retitioner was change
With Assays in the 3rd, 250, and Possession it a wegan
Therespondent Proceeded under the Color of
Lew and made an arrest without Kroable
Cause There is no esidences to Support
Any Allegations of a Crime I do Not
From who called the My Exquil Movie
Frizzary ran Across the Street and Made
a Complaint. I was Accuse of Possession
er French, however, It has been Netermine
by a Jury of My Pears. There was no Crime,
and the Police made a false Arrest.
II.A. Injuries. If you are claiming injuries as a result of the events you are complaining about, describe your injuries and state what medical treatment you required. Was medical
treatment received?
The Pet Honer Das Struckson the head
With the object night Stick. I receive a Cut
On My night hard. I was locked up too
a 11 Morths As a result of three failse Arrest
·

III. Relief: State what relief you are seeking if you prevail on your complaint. Law boking to be confersated in the Amount of 15 million dollars for time in and to violating My civil Rights. Pan and Suffering. Cruiel and ubusuals hums showert. emotional distress		
I declare under penalty of perjury that on 5)5/16, I delivered this complaint to prison authorities at 0.6.0 (date) to be mailed to the United (name of prison) States District Court for the Eastern District of New York.		
I declare under penalty of perjury that the foregoing is true and correct.		
Dated: 5/28/16	Signature of Plaintiff	
i \	VIIS Bartaum Correctiona) CIR Name of Prison Facility or Address if not incarcerated 1600 Hazen Street EAST Elmhurt, M/1370	
;	Address	
·	B)c 1411510808	