Angelo Nesimi	V17-4300
Plaintiff,	CIVIL RIGHTS COMPLAINT 42 U.S.C, § 1983
nsert full name of plaintiff/prisoner]	KUNTZ, J.
	YES_XNO
22nd Precinct Narcotics Divis	sion,
fficers John Doe#1 & John Doe	BLOOM
taten Island University Hospi	
urses & Doctors & its Agents	, IRECEIVED
	JUL 1 4 2017
Defendant(s).	PRO SE OFFICE
sert full name(s) of defendant(s). If you need addit ace, please write "see attached" and insert a separ ge with the full names of the additional defendants mes listed above must be identical to those listed in	rate : The
Parties: (In item A holey place ways	
address and telephone number. Do the s	me in the first blank and provide your present same for additional plaintiffs, if any.)
A. Name of plaintiff Angelo Nesi	
If you are incarcerated, provide the name	
1000 nazen Street E.E.III	nhurst New York 11370.(0.B.C.C.)
•	

		If you are not incarcera	ated, provide your current address:
	·		
•••		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.
		Postanda de Ala d	John Doe#1
		Defendant No. 1	Full Name
			122nd Precinct Narcotics Division
			Job Title
			2320 Hylan Blvd Staten Island
			New York 10306
•	• •	•	Address
	:	Defendant No. 2	John Doe#2
			Full Name
			122nd Precinct Narcotics Division
			Job Title 2320 Hylan Blvd Staten Island
			New York 10306
•			Address
		Defendant No. 3	John Doe#3 (Doctor)
			Full Name
			Staten Island University Hospital
			Job Title
		•	Doctor

Defendant No. 4  John Doe#4 (Nurse)  Full Name  Staten Island University Hospi Job Title  Nurse  Address  Defendant No. 5  Full Name  Job Title  Address  II. Statement of Claim:  (State briefly and concisely, the facts of your case, include the date(s) of the event(s) a well as the location where the events occurred. Include the names of each defendant thew each person named was involved in the event you are claiming violated your right need not give any legal arguments or cite to cases or statutes. If you intend to allege a of related claims, number and set forth each claim in a separate paragraph. You may additional 8 ½ by 11 sheets of paper as necessary.)  Where did the events giving rise to your claim(s) occur? Staten Island University Hospital.	•	Address
Staten Island University Hospi Job Title Nurse  Address  Defendant No. 5  Full Name  Job Title  Address  II. Statement of Claim:  (State briefly and concisely, the facts of your case, include the date(s) of the event(s) a well as the location where the events occurred. Include the names of each defendant thew each person named was involved in the event you are claiming violated your right need not give any legal arguments or cite to cases or statutes. If you intend to allege a of related claims, number and set forth each claim in a separate paragraph. You may additional 8 ½ by 11 sheets of paper as necessary.)  Where did the events giving rise to your claim(s) occur? Staten Island Univ	Defendant No. 4	John Doe#4 (Nurse)
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	••	
When did the events happen? (include approximate time and date) April 1st 2	n did the events happen? (inclu	de approximate time and date) <u>April 1st 2015</u>

On April 1st 2015 the Narcotics Division From the 122nd Precinct arrested me and made me strip, During the strip search they made me bend over and seen nothing, which made them angry and they started inflicking blows to my midsection, cursing and screaming were is the drugs, The Narcotics Unit then escorted me to staten island University Hospital. Between the time i was transported till the time they took me to the Hospital a search warrant was suppossedly issued for a full cavity search of my rectum area, looking for a narcotic substance while cuffed. The Doctor & Nurse told me to bend over while the Officers were present in the room then told the Officers to go inside my rectum and grab out what they think was a drug. Before there arrival on the scene the Narcotics Officers went inside my rectum violently by tossing me on the bed holding me face down with both arms cuffed to the bed then injected me with 3 different drugs without X-Rays or asked me what I was allergic to, just in case the injections didnot agree with my system. While I was being injected and held down violently I passed out then woke up in alot of pain coming from my rectum area. I woke up only to be inbarresed by the same Officers from the 122nd Precinct Narcotics Unit who went in my rectum area violently. I felt ripped apart -- CONTINUI

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?

No Medical Treatment Only Gave Petitioner

Tylonol and told him to rest, Injuries received by the Officers and Medical Staff consist of Rectum Pain, Mental and Physical Anguish, The Imbarrassment Petitioner indoored by being Sexually Assaulted will Damage Himself & his well being every day he wakes up and fear of Doctors & Nurses when in need of care.

and extremely violated. The Nurse did not give me pain meds or any care I asked for. Moments later from the pain and anxiety I suffered a seizure when I was shipped back over to 12000 PCT and Rikers Island in the intake area in pain with little help and lots of embarressment, I felt as if the Officers sexually assaulted me and laughed at me wen I woke up, Like this was ammusing them. I am tramatized and had complications physically and mentally due to this horrific incident.

III. Relief: State what re	lief you are seeking if you prevail on your complaint.
Plaintiff is r	equesting that these john doe Officers from
the 122nd Precinct	Narcotics division be brought up on charges
or at the least su	spended until further notice/Investigation
without pay and Pla	aintiff is requesting Damages for Cruel &
Unusual Punishment	. Pain and Suffering and Sexual Harrassment he
· · · · · · · · · · · · · · · · · · ·	he Officers and Medical staff involved Petition
oner is requesting	damages Monitary, Punitive & Declatory releif
& Suit a individua	1 & Official Capacity in the Amount of \$17,000 ty of perjury that on The Amount of \$17,000
I NACIALE I UNITER MENSI	TV OT DATUSTV TIDAL DI)
	7 (date)
complaint to prison authoritie	s at Angelo Nesini to be mailed to the United (name of prison)
	s at Angelo Nesini to be mailed to the United (name of prison)
complaint to prison authorities States District Court for the E	s at Angelo Nesimi to be mailed to the United (name of prison)  Eastern District of New York.
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