United States District Court Southern District of New York	3 CV
James Howard	3CV2746
(In the space above enter the full name(s) of the plaintiff(s).)  -against-  Jason Diaz (officer) #12452  Supervisor - Moses Reyes  Officer - Umos	COMPLAINT  under the  Civil Rights Act, 42 U.S.C. § 1983  (Prisoner Complaint)  Jury Trial: Yes □ No
	(check one)
(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)	
I. Parties in this complaint:	
A. List your name, identification number, and the name confinement. Do the same for any additional plaintiffs no as necessary.	
Plaintiff Name James Howard  ID # 349.13.0184  Current Institution GMDC  Address 15.15 Hazen Street  East Elmhurst, N.Y. 1131	70
B. List all defendants' names, positions, places of employmen may be served. Make sure that the defendant(s) listed belo above caption. Attach additional sheets of paper as necessary.	ow are identical to those contained in the
Defendant No. 1  Name Jason Diaz  Where Currently Employed 23rd F  Address 162 East 102ND 3  New York New 1000  Rev. 05/2010  10 : Classification of the second of the sec	
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Defenda	nt No. 2	Name Moses Reyes Where Currently Employed 23rd Precint Address 162 East 102nd St.	Shield # NA
		Where Currently Employed 23rd Precint	
		Address 162 Eas 102 nd St.	
		Address 162 East 102 Nd St. New York, N.Y. 10029	
Defends	ant No. 3	Llmane	Shield # N/A
Derende	int ivo. 5	Where Currently Employed 23rd Precint	
		Where Currently Employed 23rd Precint  Address 162 East 102 d St.  New York, N.Y. 10029	
		New York, N. V. 10029	
Defenda	ant No. 4	Name	Shield #
		Where Currently Employed	
		Address	
		N.	Shield #
Defenda	ant No. 5	Name Where Currently Employed	
		Address	
II.	Statement of (	Claim:	
State as	briefly as poss	sible the facts of your case. Describe how each of the defe	ndants named in the
caption	of this complain	at is involved in this action, along with the dates and locations of	of all relevant events.
You ma	y wish to inclu-	de further details such as the names of other persons involved to not cite any cases or statutes. If you intend to allege a numb	per of related claims,
number	and set forth ea	ach claim in a separate paragraph. Attach additional sheets of	f paper as necessary.
A.		estitution did the events giving rise to your	claim(s) occur?
	County a	of Manhaltan.	
B.	• •	he institution did the events giving rise to you	
		est corner of 106m St. Frederick	D. RUSE
	VelT D	rive.	
_	TTT1 . 1	nd approximate time did the events giving rise to yo	ur claim(s) occur?
C.	Januar		ui ciaiin(s) occui:
	Januar	)	

	on the attramentation of all and a page that a time I say
	D. Facts: On The atorementioned dale, and approximate Time, I was
	walking down 106 in Street and Poosevelt Drive, when an unmar
What happened	Ked Car came speeding toward me and suddenly stopped. The
to you?	doors opened and Officer's Diaz, umos, and Supervisor
	Reyes came charging toward me . Officer's Diaz and Umos
	Attacked me From Goth sides, holding my arms while Super
Who did	Visor Reyes repeatedly punched sole about the Face and
what?	body. The two officers then slammed me down take first
	on the ground, handoutted me, squeezing the cutts to the
	last noten, then prodecided to kick punch and hit me all
	my body with some type of metal object. Supervisor
Was	Reves then instructed the two officers to lift me you
anyone else involved?	Off ground. They then litted me up, and proceeded to litt
Involved:	my handcutted hands all the way you I was litted of
	my Feet officer Dia then grabbed my left middle Finger
	and began bending and trying to break It. Afterward's he
Who else saw what happened?	purched me in the Tade and in the ribs repeatedly. Supervi
	Sor Reyes then began twisting my ankles and poked the in the
	eyes. They then used me like a battering ram, ramming my head in
	to the side door of the unmarked car. No one was around.

## III. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received. I sustained lacerations on my wrist, a indidental break to my left middle tinger. Blood shot eye, left eye lost of feel that in both units. Severe pain and weakness in both ankles Swolen where bones and a deep by uise in the bend of my left Arm A cut over my left eye and ear. I required physical therepy for my finger and pain killers for the pain to my face and lower body. I salvouled to see the eye doctor and bore doctor.

## IV. Exhaustion of Administrative Remedies:

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted." Administrative remedies are also known as grievance procedures.

A.	Did your	claim(s)	arise while	you were	confined in	n a jail,	prison,	or other	correctional	facility?
	Yes	No V								

If YE givin	S, name the jail, prison, or other correctional facility where you were confined at the time of the events g rise to your claim(s).
В.	Does the jail, prison or other correctional facility where your claim(s) arose have a grievance procedure?
	Yes No Do Not Know Does Not Apply.
C.	Does the grievance procedure at the jail, prison or other correctional facility where your claim(s) arose cover some or all of your claim(s)?
	Yes No Do Not Know
	If YES, which claim(s)?
D.	Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose?
	Yes No(D \( A \)
	If NO, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?
	Yes No DNA
Ε.	If you did file a grievance, about the events described in this complaint, where did you file the grievance?
	1. Which claim(s) in this complaint did you grieve?
	2. What was the result, if any?
	3. What steps, if any, did you take to appeal that decision? Describe all efforts to appeal to the highest level of the grievance process.
F.	If you did not file a grievance:
	1. If there are any reasons why you did not file a grievance, state them here: I are not file a grievance bocause it did not happen in a correctional teathirty, and I am unawaye it there is a grievance procedure for claims against officers in scarely.
	2. If you did not file a grievance but informed any officials of your claim, state who you informed

	when and how, and their response, if any: I intorrised NC Civilian complaint Review Board sometime in tebruary. I Asked my attorney to interview, he declined I recently write them a gain informing them that I desire to be interviewed. I've received no response as of yet.
G.	Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.
Note:	You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.
v.	Relief:
are see	what you want the Court to do for you (including the amount of monetary compensation, if any, that you king and the basis for such amount). I want the Court to Near My Case.  Vender a judgement in My tavor. I would like the Court award me movestary damages in the amount \$250,000.00 basis for this amount is due to the extent, as well as severity of the injuries.
VI.	Previous lawsuits:  Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?  Yes No

On these claims

e e e e e e e e e e e e e e e e e e e	B.	If your answer to A is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another sheet of paper, using the same format.)				
		1. Parties to the previous lawsuit:				
		Plaintiff				
		Defendants				
		2. Court (if federal court, name the district; if state court, name the county)				
		3. Docket or Index number				
		4. Name of Judge assigned to your case				
£		5. Approximate date of filing lawsuit				
		6. Is the case still pending? Yes No				
		If NO, give the approximate date of disposition				
		7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?)				
On other claims	C.	Have you filed other law suits in state or federal court otherwise relating to your imprisonment?  Yes No				
	D.	If your answer to C is YES, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same format.)				
		1. Parties to the previous lawsuit:				
		Plaintiff				
		Defendants				
		2. Court (if federal court, name the district; if state court, name the county)				
		3. Docket or Index number				
		4. Name of Judge assigned to your case				
		5. Approximate date of filing lawsuit				
		6. Is the case still pending? Yes No				
		If NO, give the approximate date of disposition				
		7. What was the result of the case? (For example: Was the case dismissed? Was there judgment in your favor? Was the case appealed?)				

I declare under penalty of perjury	y that the foregoing	is true and correct.
Signed this 29th day of March		
Inm	nature of Plaintiff nate Number titution Address	James Howard 349.13.01841  GMDC-C-73  15.15 Hazen Street  East Elmhurst, N.y. 11370
Note: All plaintiffs named in the cinmate numbers and address	caption of the compla	aint must date and sign the complaint and provide their
I declare under penalty of perjury t complaint to prison authorities to b Southern District of New York.	that on this 29Th da	y of March, 2013, I am delivering this  Se Office of the United States District Court for the
Sig	nature of Plaintiff:	James Hourard