# UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

HOPETON Francis	
Write the full name of each plaintiff.	No. $18 - CV - 646$ (To be filled out by Clerk's Office)
-against-	AMENDED COMPLAINT
City of New York,	(Prisoner)
P.O. Evelyn OROPEZA Buniga, 4071	Do you want a jury trial?  ✓ Yes □ No
Sergeant Luis Robriguez	
Write the full name of each defendant. If you cannot fit the	

#### NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

Section IV.

USDC SDNY
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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 above must be identical to those contained in

Rev. 5/6/16

State below the federal legal basis for your claim, if known. This form is designed primarily for

## I. LEGAL BASIS FOR CLAIM

☐ Other:

orisoners challenging the constitutionality of their conditions of confinement; those claims are often brought under 42 U.S.C. § 1983 (against state, county, or municipal defendants) or in a Bivens" action (against federal defendants).
Violation of my federal constitutional rights
Other: Human curl Rights Fabe Arrest
I. PLAINTIFF INFORMATION /
ach plaintiff must provide the following information. Attach additional pages if necessary.
topelon K Francis
irst Name Middle Initial Last Name
tate any other names (or different forms of your name) you have ever used, including any name ou have used in previously filing a lawsuit.
3001900036
Prisoner ID # (if you have previously been in another agency's custody, please specify each agency and the ID number (such as your DIN or NYSID) under which you were held)
RNDC
Current Place of Detention
11-11 HAZEN STREET
nstitutional Address
Queens NY. 1370
ounty, City State Zip Code
II. PRISONER STATUS
ndicate below whether you are a prisoner or other confined person:
Pretrial detainee
☐ Civilly committed detainee
Immigration detainee
Convicted and sentenced prisoner

## IV. DEFENDANT INFORMATION

To the best of your ability, provide the following information for each defendant. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are identical to those listed in the caption. Attach additional pages as necessary.

Defendant 1:	CH	1 OL N	ion / Ork	/
	First Name	Last Name	Shield #	/
	Current Job Title (or other identifying information)			
	Current Work Ado	lress		·\$.
	County, City	State	Zip Code	
Defendant 2:	Evelyn	()RORZAZUN	194 4070	
	First Name ()	Last Name	/ Shield #	
	Police	0//101		
	Current Job Title (or other identifying information)			
	Current Work Ado	<b>.</b> /	17 * 9 2	
	10 9	NY	10023	
Defendant 3:	County, City	Rodicales	Zip Code	
	First Name	Last Name	Shield #	
	Serg	cant		
ere.	Current Job Little (	or other identifying informat	ool ool	
	Current Work Add	lress A. L. D.c.	10023	
	County, City	State	Zip Code	
Defendant 4:				
	First Name	Last Name	Shield #	
	Current Job Title (	or other identifying informat	ion)	
	Current Work Add	lress		
	County, City	State	Zip Code	

v. STATEMENT OF CLAIM
Place(s) of occurrence: 50 th St Subway Station (Down-
Date(s) of occurrence: On or about April 6,2018
FACTS:
State here briefly the FACTS that support your case. Describe what happened, how you were harmed, and how each defendant was personally involved in the alleged wrongful actions. Attach additional pages as necessary.
on or about donil 6,2018
on the Donartown area 2 officers
approach me and told me I am being
did "I Said I want down and thing
that westled me to ground and started
Spraying we when I asked again
What I did. The lady officer lives
telling the sergeant that the wahole
want stop moving whereby the sereent
also starled spranging me saynel Damn
the Shit doesn't soon to bother him"
as he constance to some me in wouth
and oues. He also ups band a Mu Iwels
and they had thour knows on my back
and and case was domissed upper
on or about June 28, 2018. They
Rough me up until i got to preunt

## **INJURIES:**

If you were injured as a result of these actions, describe your injuries and what medical treatment, if any, you required and received.

My fingers and hack are mossed up separate from workells messed up behand this action. My leyer were teally bad for a while and I have clest pairs sometimes way he from being sprayed in worth and eyes.

VI. RELIEF

State briefly what money damages or other relief you want the court to order.

to an esting for 2 million dollars in paintine damags. "And I would have been able to better help my where and 2 run boys 7 years old I am Severely depressed more so now e thank you for gour attention to they waster.

#### VII. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

I understand that if I file three or more cases while I am a prisoner that are dismissed as frivolous, malicious, or for failure to state a claim, I may be denied *in forma pauperis* status in future cases.

I also understand that prisoners must exhaust administrative procedures before filing an action in federal court about prison conditions, 42 U.S.C. § 1997e(a), and that my case may be dismissed if I have not exhausted administrative remedies as required.

I agree to provide the Clerk's Office with any changes to my address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

Dated
Plaintiff's Signature
First Name
Middle Initial
Prison Address

Out

Prison Address

State

Dated

Plaintiff's Signature

Francis

Francis

Francis

Francis

First Name

Francis

Date on which I am delivering this complaint to prison authorities for mailing: