
IN THE MATTER OF THE CLAIM OF
xxxxxx
-against-
**THE CITY OF NEW YORK, NEW YORK POLICE DEPARTMENT,
NEW YORK CITY DEPARTMENT OF CORRECTIONS,
RIKERS ISLAND CORRECTIONAL CENTER, CORRECTIONAL HEALTH SERVICES**

TO: THE COMPTROLLER OF THE CITY OF NEW YORK

PLEASE TAKE NOTICE that the undersigned claimant(s) hereby make(s) claim and demand against the City of New York as follows: [Office of the Comptroller requests the following additional information in Section 2, specific defect (e.g. pothole) if applicable, in Section 3, street address wherever possible)

1. The name and post-office address of each claimant and claimants attorney is:

xxxxxx, 1658 Dean Street, Brooklyn, NY 11213.

WYLIE M. STECKLOW, ESQ., 10 Spring Street New York, N.Y. 10012.

2. The nature of the claim:

Unlawful imprisonment, false arrest, negligence, medical malpractice, violation of state, federal civil rights, intentional infliction of emotional distress, negligent infliction of emotional distress, pain and suffering on behalf of the claimant, xxxxx, disability from his usual activities, loss of time from school and mental anguish on behalf of xxxxx

3. The time when, the place where and the manner in which the claim arose:

The claimant was unlawfully arrested and detained on or about July 26, 2006. He was continuously held against his will and not released until July 28, 2006 a bullet to his left arm injured the claimant. The claimant was negligently removed from Kings County Hospital at the urging of the NYPD arresting officers. The claimant was held in various correctional facilities for a period of 2 days due to the negligence of all parties involved including, **THE CITY OF NEW YORK AND THE NEW YORK POLICE DEPARTMENT**. Moreover, while the claimant was being held at Rikers Island, the medical staff removed the suturing that had been placed on his elbow/arm at Kings County Hospital. As his humerus bone had been shattered, re-broken and set at the hospital, the act of removing the setting by Riker's Island Staff estopped the proper setting and healing of the arm. The claimant's arm is unable to heal properly and he will be irreparably harmed. The claimant was made to suffer due to the carelessness, recklessness and negligence of The City of New York, the New York Police Department, The Rikers Island Correctional Center and their agents, servants, and or employees in the management, maintenance, supervision, control, and inspection of all individuals who assisted in the continued incarceration medical care and prosecution of the claimant.

4. The items of damages or injuries claimed are:

Claimant xxxxxJOHN sustained loss of freedom, liberty, enjoyment of life, unlawful imprisonment, strip searches, incarceration for a period of 2 days, damage to his permanent record, permanent injury to his elbow and other damages the extent of which are not yet known.

TOTAL AMOUNT CLAIMED: \$5,000,000.00 (FIVE MILLION DOLLARS)

The undersigned parent of the minor claimant(s) therefore present this claim for adjustment and payment. You are hereby notified that unless it is adjusted and paid within the time provided by law from the date of presentation to you, the claimant(s) intend(s) to commence an action on this claim.

Dated: New York, New York
September 24, 2006

XXXXX

WYLIE M. STECKLOW
Attorney for Claimant(s)
10 SPRING – SUITE 1
New York, New York 10012
(212) 566-8000

INDIVIDUAL VERIFICATION

STATE OF NEW YORK, COUNTY OF NEW YORK: ss.:

being duly sworn, deposes and says that deponent is the parent and guardian of the minor claimant in the within action; that he has read the foregoing Notice of Claim and knows the contents thereof; that the same is true to deponent's own knowledge, except as to matters therein stated to be alleged on information and belief, and that as to those matters deponent believes it to be true.

XXXXX

Sworn to before me this
24th day of SEPTEMBER 2006

NOTARY PUBLIC
WYLIE M. STECKLOW
Notary Public, State of New York
No. O2ST5063370
Qualified in New York County
Term Expires July 22, 2010