 COMPLAINT - FOLLOW UP INFORMATIONAL REPORT UNAPPROVED				Crime/Condition UNCLASSIFIED COMPLAINT	Cmd Code 120	Date of This Report 05/08/2010
Date of UF61 05/08/2010	Date Case Assigned 05/08/2010	Complaint No. 2010-120-05417	Case No. 1265	Unit Reporting SQUAD	Follow-Up No. 9	

Complainant's Name	Nickname/Alias/Middle Name	Address		Apt No.
Sex	Race	Date of Birth	Age	
Home Telephone	Business Telephone	Cell Phone	Beeper #	E-Mail Address

Person Interviewed Last Name, First M.I. HARRIS, ELEANOR		Nickname/Alias/Middle Name	Address	Apt No.
Position/Relationship	Sex FEMALE	Race BLACK	Date of Birth	Age
Home Telephone	Business Telephone	Cell Phone	Beeper #	E-Mail Address



Activity Address Location NYC	Street 1 RICHMOND TERRACE	City STATEN ISLAND	State NY	Zip	Apt #
Cross Street WALL STREET and SOUTH STREET		Intersection of corner:		Premise Type	

Topic/Subject:
(INTERVIEW) INTERVIEW ELEANOR HARRIS (AIDED)

Summary of Investigation:
1. On May 8, 2010, at approximately 0940 hrs the undersigned present at 1 Richmond Terrace did conduct an interview with the Eleanor Harris who was a passenger on the Andrew Barberi SI Ferry Boat, she stated that she was thrust forward and fell to the right side of the chair. She stated that she is suffering from neck pain along with pain to the right side of her body. ~ ~2. Submitted for PO Guariano

Reporting Officer:	Rank DT3	Name GENEE PARKER	Tax Reg. No. 928933	Command 431
Reviewing Supervisor:	Manner of Closing	UNAPPROVED		

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 		COMPLAINT - FOLLOW UP INFORMATIONAL REPORT UNAPPROVED		Crime/Condition AIDED	Cmd Code 431	Date of This Report 05/08/2010
Date of UF61 05/08/2010	Date Case Assigned 05/08/2010	Complaint No.	Case No. 1265	Unit Reporting STATEN ISLAND ROBBERY S		Follow-Up No. 3



Complainant's Name HERMAN, MARC		Nickname/Alias/Middle Name		Address		Apt No.
Sex MALE	Race WHITE		Date of Birth		Age	
Home Telephone		Business Telephone		Cell Phone	Beeper #	E-Mail Address

Activity Address Location NYC	Street	City STATEN ISLAND	State NY	Zip	Apt #
Cross Street		Intersection of RICHMOND TERRACE andSOUTH STREET corner:			Premise Type

Topic/Subject:
INTERVIEW SI FERRY WORKER(AIDED)

Summary of Investigation:
1. On Sturdav the 8th of May 2010, at approximately 1020hrs the undersigned did interview NYC DOT worker(SI Ferry) DOT id# Herman, Marc M/W/ The undersigned was informed by Mr Herman that he was standing on the lower level bridge that the ferry connects to the terminal at when its docked, and that he recalls only the ferry hitting the structure. ~ ~2. Case Active.

Reporting Officer:	Rank DT3	Name ANDREW BIRD	Tax Req. No.	Command 206
Reviewing Supervisor:	Manner of Closing	UNAPPROVED		

 		COMPLAINT - FOLLOW UP INFORMATIONAL REPORT UNAPPROVED		Crime/Condition UNCLASSIFIED COMPLAINT	Cmd Code 120	Date of This Report 05/08/2010
Date of UF61 05/08/2010	Date Case Assigned 05/08/2010	Complaint No. 2010-120-05417	Case No. 1265	Unit Reporting SQUAD		Follow-Up No. 40



Complainant's Name RADDI, ANTHONY	Nickname/Alias/Middle Name	Address 1 LEFRAK CITY PLAZA QUEENS NY		Apt No.
Sex MALE	Race WHITE	Date of Birth	Age	
Home Telephone	Business Telephone	Cell Phone	Beeper #	E-Mail Address

Person interviewed Last Name, First M.I. HOSMER WAYNE BILLINGTON EDWARD	Nickname/Alias/Middle Name	Address		Apt No.
Position/Relationship EMPLOYEE	Sex MALE	Race WHITE	Date of Birth	Age
Home Telephone	Business Telephone	Cell Phone	Beeper #	E-Mail Address

Activity Address Location NYC	Street 355 BARD AVENUE	City STATEN ISLAND	State NY	Zip	Apt #
Cross Street CASTLETON AVENUE and MOODY PLACE		Intersection of corner:		Premise Type	

Topic/Subject: (INTERVIEW) INTERVIEW DECKHAND WAYNE HOSMER (AIDED)
Summary of Investigation: 1. On May 8, 2010, at approximately 1400hrs., the undersigned spoke with Deckhand Wayne Hosmer in regards to an accident involving the Staten Island Ferry vessel "Anthony J Barbieri". Mr Hosmer states that he was working as a Deckhand on the vessel, stationed on the Bridgedeck (New Jersey side) when he noticed that the boat was travelling too fast for the boat to dock safely. Mr Hosmer began warning people to sit down and brace for impact. He then heard the "Brace for shock" warning on the loud speaker. Shortly thereafter, the vessel struck the dock, throwing Mr Hosmer against a line of chairs, causing his injuries. No additional information was given. ~ ~2. Case active.

Reporting Officer:	Rank DT3	Name JAMES MASSA	Tax Rec. No.	Command 431
Reviewing Supervisor:	Manner of Closing	UNAPPROVED		

 		COMPLAINT - FOLLOW UP INFORMATIONAL REPORT UNAPPROVED		Crime/Condition 	Cmd Code 431	Date of This Report 05/08/2010
Date of UF61 05/08/2010	Date Case Assigned 05/08/2010	Complaint No.	Case No. 1265	Unit Reporting SQUAD		Follow-Up No. 33



Complainant's Name		Nickname/Alias/Middle Name		Address		Apt No.
Sex		Race		Date of Birth	Age	
Home Telephone		Business Telephone		Cell Phone	Beeper #	E-Mail Address

Person Interviewed Last Name, First M.I. JOHNSON, TONI		Nickname/Alias/Middle Name		Address		Apt No.
Position/Relationship		Sex	Race		Date of Birth	Age
Home Telephone		Business Telephone	Cell Phone		Beeper #	E-Mail Address

Activity Address Location NYC		Street 1 RICHMOND TERRACE		City STATEN ISLAND	State NY	Zip	Apt #
Cross Street WALL STREET and SOUTH STREET				Intersection of corner:		Premise Type	

Topic/Subject: (INTERVIEW) INTERVIEW TONI JOHNSON (AIDED)	
Summary of Investigation: 1. On May 8, 2010, at approximately 1000hrs., the undersigned spoke with Toni Johnson of who states she was sitting on a seat in the ferry towards the front of the vessel when she heard nonking and people yelling. Shortly after, she was thrown from her seat causing her injury (head). No additional information was given. Further investigation. ~ ~2. Case active.	

Reporting Officer:	Rank DT3	Name JAMES MASSA	Tax Reg. No. 904470	Command 431
Reviewing Supervisor:	Manner of Closing UNAPPROVED			

  COMPLAINT - FOLLOW UP INFORMATIONAL REPORT UNAPPROVED		Crime/Condition AIDED / S.I. FERRY	Cmd Code 431	Date of This Report 05/08/2010	
Date of UF61 05/08/2010	Date Case Assigned	Complaint No.	Case No. 1265	Unit Reporting STATEN ISLAND ROBBERY S	Follow-Up No. 7

Complainant's Name MEDINA, EVA	Nickname/Alias/Middle Name	Address	Apt No.
Sex FEMALE	Race BLACK HISPANIC	Date of Birth	Age
Home Telephone	Business Telephone	Cell Phone	Beeper #
E-Mail Address			

Person Interviewed Last Name, First M.I. MEDINA, EVA	Nickname/Alias/Middle Name	Address	Apt No.
Position/Relationship	Sex FEMALE	Race BLACK HISPANIC	Date of Birth
Home Telephone	Business Telephone	Cell Phone	Beeper #
E-Mail Address			

Activity Address Location NYC	Street 1 RICHMOND TERRACE	City STATEN ISLAND	State NY	Zip	Apt #
Cross Street WALL STREET and SOUTH STREET		Intersection of corner:		Premise Type FERRY/FERRY TERMINAL	

Topic/Subject:
(INTERVIEW) INTERVIEW OF AIDED MRS. EVA MEDINA / S.I. FERRY.

Summary of Investigation:
1. On May 8, 2010, at approximately 1105 HRS. I MET WITH AIDED MRS. EVA MEDINA WHO STATED IN SUM & SUBSTANCE THAT SHE WAS ON BOARD THE S.I. FERRY AND COMING INTO S.I. WHEN THE S.I. FERRY BOAT FAILED TO SLOW DOWN AS IT WAS DOCKING, AND SHE WAS THROWN WHEN THE BOAT HIT THE DOCK AND SHE SUSTAIN INJURIES TO HER KNEES AND LOWER BACK. SHE DID NOT PROVIDE ANY FURTHER INFORMATION.

Reporting Officer:	Rank DT3	Name ROBERTO FUNES	Tap Rec. No.	Command 206
Reviewing Supervisor:	Manner of Closing	UNAPPROVED		