 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. 31	

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. RADDI, ANTHONY	Nickname/Alias/Middle Name	Address 1 LEFRAK CITY PLAZA QUEENS NY	Apt No.
Position/Relationship	Sex MALE	Race WHITE	Date of Birth
Home Telephone	Business Telephone 718-876-4725	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 P.O. RADDI (AIDED)

Summary of Investigation:
1. On May 8, 2010, at approximately 1215 hrs I did conduct an on scene interview with P.O. Anthony Raddi Shield # [redacted] of the S.I. Ferry Unit in regards to the above listed investigation. P.O. Raddi states he was assigned to the Ferry Vessel Andrew Barbieri. P.O. Raddi further stated that while heading back to Staten Island from the Manhattan side he noticed the boat approaching the docks at a high rate of speed. P.O. Raddi further stated that he advised numerous passengers to remain seated and brace for impact. P.O. Raddi further states that when the boat crashed into the dock he lunged forward and hit his shoulder into the wall next to him. P.O. Raddi was removed to RUMC treated and released. ~ ~2. Case Active.

Reporting Officer:	Rank POM	Name DANIEL GUARIANO	Tax Req. No.	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. 4

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



Person Interviewed Last Name, First M.I. RIVERA, JOSE	Nickname/Alias/Middle Name	Address			Apt No.
Position/Relationship	Sex MALE	Race WHITE HISPANIC	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 10301	Apt #
Cross Street WALL STREET and SOUTH STREET		Intersection of corner:			Premise Type FERRY/FERRY TERMINAL

Topic/Subject:
(INTERVIEW) INTERVIEW OF AIDED JOSE RIVERA FROM FERRY.

Summary of Investigation:
1. On May 8, 2010, at approximately 1025 HRS. I WAS PRESENT AT THE ST. GEORGE FERRY TERMINAL TO ASSIST IN THE INVESTIGATION OF A FERRY BOAT DOCKING AT THE TERMINAL. AT THIS TIME I MET WITH AIDED MR. JOSE RIVERA WHO WAS BEING TREATED AT A MAKE SHIFT TRIAGE FOR THE INJURED. AT THIS TIME I INTERVIEWED THE AIDED AND HE STATED IN SUM & SUBSTANCE THAT HIS NAME WAS JOSE RIVERA, HE REPORTED THAT HE WAS ON BOARD THE FERRY, AT WHICH TIME IT WAS DOCKING AT THE TERMINAL. HE STATED THAT THE BOAT DID NOT SLOW DOWN AS I T ENTER THE SLIP AND SUDDENLY STOPPED CAUSING CAUSING HIM TO FALL FROM STAIR AREA AND INJURED HIS BACK. THIS AIDED DID NOT PROVIDE ANY FURTHER INFORMATION.

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

  COMPLAINT - FOLLOW UP INFORMATIONAL REPORT UNAPPROVED				Crime/Condition INVESTIGATIVE AIDED	Cmd Code 206	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. 25



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.J. ROMANS, RYAN		Nickname/Alias/Middle Name	Address	Apt No.
Position/Relationship STRANGER	Sex MALE	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 SI FERRY PASSENGER RYAN ROMANS
Summary of Investigation: 1. On May 8, 2010, at approximately 1100 HOURS I INTERVIEWED THE AIDED AT THE SI FERRY TERMINAL. THE AIDED STATED THAT WHILE WAITING FOR THE FERRY TO DOCK HE WAS KNOCKED OFF HIS FEET AND FELL TO THE GROUND DUE TO THE FORCE OF THE COLLISION. EMS STATED THAT IT APPEARS THAT THE AIDED'S ARM IS FRACTURE OR BROKEN. ~-2. CASE ACTIVE.

Reporting Officer:	Rank DT3	Name THOMAS DELACY	Tax Rec. 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. 46	



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	Ace
Home Telephone	Business Telephone 718-876-4725	Cell Phone	Beeper #
E-Mail Address			

Person Interviewed Last Name, First M.I. SILVA, FLABLO	Nickname/Alias/Middle Name	Address	Apt No.
Position/Relationship UNKNOWN/NONE	Sex MALE	Race WHITE HISPANIC	Date of Birth
Home Telephone	Business Telephone	Cell Phone	Beeper #
E-Mail Address			

Activity Address Location NYC	Street 78 RICHMOND TERRACE	City STATEN ISLAND	State NY	Zip	Apt #
Cross Street HAMILTON AVENUE and WALL STREET		Intersection of corner:		Premise Type	

Topic/Subject: (INTERVIEW) INTERVIEW FLABLO SILVA (AIDED)
Summary of Investigation: 1 On May 8, 2010, at approximately 1620 hrs the undersigned conducted an interview with Flablo Silva via phone# in regards to this case. Flablo Silva stated he was standing up waiting for the boat to dock on the second deck. He saw that the boat was going fast into the dock. The boat hit and he braced himself but injured his lower back. He was removed to RUMC where he was treated and released. ~ ~2. Case Active.

Reporting Officer:	Rank DT3	Name MICHAEL MENDEZ	Tax Reg. No. 904561	Command 431
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. 15	

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. STANLEY-BRUNO, JEAN	Nickname/Alias/Middle Name	Address NY	Apt No.
Position/Relationship	Sex MALE	Race BLACK	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	

Topic/Subject:
(INTERVIEW) INTERVIEW JEAN STANLEY-BRUNO (AIDED)

Summary of Investigation:
1. On May 8, 2010, at approximately 1010hrs., the undersigned spoke with Jean Stanley-Bruno in regards to the accident involving the Staten Island Ferry vessel "Anthony J Barberi". The aided states that he was standing in the front of the vessel waiting to exit when he heard people yelling "Get back". He was unsure if it was Ferry personnel's or civilians but following the warning, he felt the boat impact the dock and was immediately thrown to the ground resulting in his injuries (back). No additional information was given. ~ ~2. Case active.

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