

# Complaint Report (CCRB)

<b>CCRB Case No :</b>	201209982	<b>C/V Report Date :</b>	Sun, 08/12/2012
<b>Complaint Type :</b>	CCRB	<b>Investigator :</b>	Alexander Opoku-Agyemang
<b>Complaint Made At :</b>	CCRB	<b>Ref. No</b>	12-42714
<b>Received Date (CCRB) :</b>	Sun, 08/12/2012	<b>Mode :</b>	Call Processing System
<b>Incident Date(s) :</b>	Sat, 08/11/2012 12:21 PM		
<b>Place of Occurrence:</b>	[REDACTED]	<b>Precinct:</b>	41
<b>Location :</b>	Street/highway	<b>Boro:</b>	Bronx
<b>Reason for Initial Contact :</b>	Moving violation		
<b>Charges:</b>	Arrest - other violation/crime		

## Complainant/Victim Details

<b>Name:</b>	[REDACTED]	<b>Type:</b>	Reporting Non-Witness
<b>Address:</b>	[REDACTED]		
<b>Contacts:</b>	[REDACTED]	[REDACTED]	
	[REDACTED]	[REDACTED]	
	[REDACTED]		
<b>Gender:</b>	[REDACTED]	<b>Ethnicity:</b>	[REDACTED]
<b>Person Assisting:</b>		<b>Date of Birth:</b>	[REDACTED]

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<b>Name:</b>	[REDACTED]	<b>Type:</b>	Reporting Non-Witness
<b>Address:</b>	[REDACTED]		
<b>Contacts:</b>	[REDACTED]	[REDACTED]	
	[REDACTED]	[REDACTED]	
	[REDACTED]		
<b>Gender:</b>	[REDACTED]	<b>Ethnicity:</b>	[REDACTED]
<b>Person Assisting:</b>		<b>Date of Birth:</b>	[REDACTED]

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<b>Name:</b>	[REDACTED]	<b>Type:</b>	Victim
<b>Address:</b>	[REDACTED]		
<b>Contacts:</b>	[REDACTED]	[REDACTED]	
	[REDACTED]	[REDACTED]	
	[REDACTED]		
<b>Gender:</b>	[REDACTED]	<b>Ethnicity:</b>	[REDACTED]
<b>Person Assisting:</b>		<b>Date of Birth:</b>	[REDACTED]
<b>Injury Details:</b>	<u>Type of Injury</u>	<u>Description</u>	
	Death		

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<b>Name:</b>	[REDACTED]	<b>Type:</b>	Comp/Victim
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**Address:** [REDACTED]  
**Contacts:** [REDACTED]  
**Gender:** [REDACTED] **Ethnicity:** [REDACTED]  
**Person Assisting:** [REDACTED] **Date of Birth:** [REDACTED]  
**Injury Details:** Type of Injury Description  
 Fracture Broken leg

**Name:** [REDACTED] **Type:** Reporting Non-Witness  
**Address:** [REDACTED]  
**Contacts:** [REDACTED]  
**Gender:** [REDACTED] **Ethnicity:** [REDACTED]  
**Person Assisting:** [REDACTED] **Date of Birth:** [REDACTED]

### Officer(s) Named in Complaint

Rank	Officer	S/W Officer	Tax No	Race	Cmd	Allegations/Board Dispositions
POM	Edward McClain	Subject Officer	[REDACTED]	White	041	Vehicle - (F) Substantiated (Charges)
POM	Edward McClain	Subject Officer	[REDACTED]	White	041	Vehicle - (F) Substantiated (Charges)
POM	David Signor	Witness Officer	[REDACTED]	White	041	
SGT	John Fennessy	Witness Officer	[REDACTED]	White	041	

### Initial Complaint Narrative

[REDACTED] who is not a witness, is reporting this complaint on behalf of § 87(2)(b) [REDACTED] who was killed while riding a bike or motorcycle on August 11, 2012 at 12:15 p.m. by two officers in RMP#3536 or 3556. He was struck by the RMP at § 87(2)(b) [REDACTED], Bronx. [REDACTED] stated that [REDACTED] sustained injuries to the head and was "left to die." She reported that an ambulance was not called when [REDACTED] was on the ground and that he was not taken to the hospital in time. [REDACTED] named PO "Gonzalez" as present at the scene. She obtained his last name from news and print media regarding the incident. [REDACTED] is representing [REDACTED] and his mother [REDACTED] sister), § 87(2)(b) [REDACTED]

### Witness

**Name of Witness:** [REDACTED]  
**Address:** [REDACTED]  
**Contacts:** [REDACTED]  
**Gender :** [REDACTED] **Ethnicity:** [REDACTED]  
**Date of Birth :** [REDACTED]  
**Name of Witness:** [REDACTED]

<b>Address:</b>	[REDACTED]	
<b>Contacts:</b>	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]
	[REDACTED]	
<b>Gender :</b>	[REDACTED]	<b>Ethnicity:</b> [REDACTED]
<b>Date of Birth :</b>	[REDACTED]	
<b>Name of Witness:</b>	[REDACTED]	
<b>Address:</b>	[REDACTED]	
<b>Contacts:</b>	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]
	[REDACTED]	
<b>Gender :</b>	[REDACTED]	<b>Ethnicity:</b> [REDACTED]
<b>Date of Birth :</b>	[REDACTED]	
<b>Name of Witness:</b>	[REDACTED]	
<b>Address:</b>	[REDACTED]	
<b>Contacts:</b>	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]
	[REDACTED]	
<b>Gender :</b>	[REDACTED]	<b>Ethnicity:</b> [REDACTED]
<b>Date of Birth :</b>	[REDACTED]	
<b>Name of Witness:</b>	[REDACTED]	
<b>Address:</b>	[REDACTED]	
<b>Contacts:</b>	[REDACTED]	[REDACTED]
	[REDACTED]	[REDACTED]
	[REDACTED]	
<b>Gender :</b>	[REDACTED]	<b>Ethnicity:</b> [REDACTED]
<b>Date of Birth :</b>	[REDACTED]	