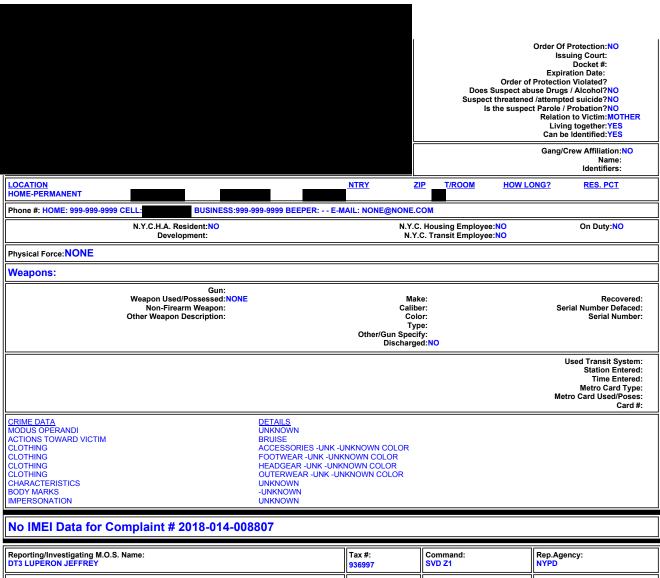
POLICE			ll o ve	Voul Cit	v Dolino	Donoutn	· ont	
					y Police ystem - 0			
Report Cmd:	Jurisdiction: N.Y. POLICE DEPT		ICAD#:	Record Status: Final, No Arrests		Complaint #: 2018-014-008807	No Other Legacy Versions	Blue No Other Complaint Revisions
OCCU Lo: Name Of Premis Locatio	rrence cation:)		NYC Parks Did this offense of	Dept. Property occur on NYC ParksNO Dept. Property? Command: opt. Property Name:	2010-014-000007	Versions	Precinct:014 Sector:C Beat:7 Post:65
		ce threporte	u:2018-08-1 d:2018-08-1	9	08:00 FRIE 05:00 16:35	DAY	Aide Acciden O.C.C.E	
Attempte	ssification: ALLEGATIOI d/Completed: COMPLETED us Offense Is: INVESTIGATION PD Code: 078 INVESTIGA PL Section: ? Keycode: 999 INVESTIGA	TE CH	IILD ABUSE	i.		Clearance C Log/Cas Clearance Arres Clearance AO C	TO:SPECIAL VICT ode: se #:0 st ld: cmd: le #:	IMS
Is This Related	o Stop And Frisk Report		SQF Numb 0000-000-0		Was The Victim's Per Taken Or Possessed' NO		Was The Victim's To Commit A Crir NO	Personal Information Used me?
Gang Related?	Detective Borough Wheel Lo	og #:	Name Of G	Bang:			Child Abuse Susp	pected?
DIR Required?	-		Child in Co	ommon?	Intimate Relationship	?	Officer Body Wor	n Camera:
	If Burglary: Forced Entry Struct Entry Meth Entry Locat	ure: nod:	Company 	Alarm: Bypassed? Comp Responded?: Name/Phone: Crime Prevention Survey Requested?: Complaint/Reporter Present?:	<u>If Ars</u>	Structure: Occupied?: Damage by:		xi Robbery: Partition Present:NO r Stress Light Activated:NO Method of Conveyance: Location of Pickup:
Supervisor On S	cene - Rank / Name / Comman	d :		Canvas Conducted:		Translator(if used)	:	
	IVED AN IRT # 77378 STATING HE MOTHER HAS NO EXPLAN						THE INJURIES WHI	LE IN THE CARE OF THE
No NYC T	RANSIT Data for Co	mpl	aint # 2	018-014-00880)7			
Tot	al Victims:		Total W	fitnesses: 0	Tot	al Reporters:		Total Wanted:
VICTIM: #	1 of 1			Name: MALEK,MAR	GARET		Complaint#: 2018-014-00	8807
			Ni	ck/AKA/Maiden: UMOS:NO Sex/Type:FEMAl Race:WHITE Age:3 Date Of Birth:10/29/2			Ga	ng/Crew Affiliation:NO Name: Identifiers:
	ls V Escalat	ictim f	If Yes, Ind N.Y.0 earful for th olence / abu	Disabled?NO ent in English?:NO icate Language: C.H.A Resident?NO neir safety / life?NO use by suspect?NO repared for C/V?NO			No	Vill View Photo:YES Will Prosecute:YES otified Of CrimeNO tim Comp. Law:
LOCATION HOME-PERMAN		DRES	S	<u>CITY</u> MANHATT		TE/COUNTRY / YORK	<u>ZIP</u>	APT/ROOM
	Not Provided/Unavailable CEL	L:		TI TI	ed/Unavailable BEEPER	R: Not Provided/Unav	ailable E-MAIL: Not	Provided/Unavailable
Action against V				UNKNOWN	Prior To Incident:			
Victim Of Simila NO	r Incident:			If Yes, When And	Where			
WANTED:	# 1 of 1				Name: INGOGLIA, MARGARET	Complaint#: 2018-014-008		rrested:
						II		



<u> </u>	Tax #: 936997		Rep.Agency: NYPD
Supervisor Approving Name: SDS MOTTA SALVATORE	Tax #:	Command:	Rep.Agency:
	891841	SVD Z1	NYPD
Complaint Report Entered By:	Tax #:	Command:	Rep.Agency:
DT3 LUPERON	936997	SVD Z1	NYPD
Signoff Supervisor Name:	Tax #:	Command:	Rep.Agency:
LT GREGO	926909	M PCT S	NYPD

END OF COMPLAINT REPORT # 2018-014-008807

NYPD Enterprise Case Management System

INDEX SHEET PD-113-140(190-95)-h2

COMPLAINT #: 2018-014-008807

CASE #: 2018-810 CASE COMMAND: 256-DET BUREAU MAN SPEC VIC SQUAD UNIT: CHILD ABUSE CASE OWNER: DT3 JEFFREY LUPERON CASE TITLE: MARGARET MALEK-IRT/3Y/O/ISCA/PHYSICAL ABUSE/DV

ITEM NO.	DATE	ITEM (Include brief description of item/subject matter)	New DD5 Approved since last DA Download
<u>1</u>	08/19/2018	(OTHER ATTACHMENTS) RECEIPT IRT/3Y/O/ISCA/PHYSICAL ABUSE/DV	
Α	08/19/2018	(OTHER ATTACHMENTS) RECEIPT IRT/3Y/O/ISCA/PHYSICAL ABUSE/DV	
<u>2</u>	08/19/2018	VICTIMS FULL TEXT SEARCH (MARGARET MALEK)	
<u>3</u>	08/19/2018	MOTHER/SUBJECT FULL TEXT SERACH (MARGARET INGOGLIA)	

4	08/19/2018	CONFERRAL WITH IRT COORDINATOR / ACS HISTORY	
<u>5</u>	08/19/2018	CONFERRAL WITH DOCTOR	
<u>6</u>	08/19/2018	(INTERVIEW IN-PERSON) MOTHER'S / SUBJECT INTERVIEW (MARGARET INGOGLIA)	
<u>7</u>	08/19/2018	(OTHER ATTACHMENTS) 2ND IRT	
В	08/19/2018	(OTHER ATTACHMENTS) 2ND IRT	
<u>8</u>	08/20/2018	(OTHER ATTACHMENTS) SCANNED VICTIMS PHOTO	
С	08/20/2018	(OTHER ATTACHMENTS) SCANNED VICTIMS PHOTO	
9	08/20/2018	(INTERVIEW IN-PERSON) BROTHER'SINTERVIEW (JOE PALOMINO)	
<u>10</u>	08/20/2018	(DAS IMPORT) CRIMINAL PROPENSITY SEARCH OF POI (MARGARET INGOGLIA) DOB NYSID:NONE	
D	08/20/2018	(DAS IMPORT) CRIMINAL PROPENSITY SEARCH OF POI (MARGARET INGOGLIA) DOB NYSID:NONE	
<u>11</u>	08/20/2018	(DAS IMPORT) VICTIMS DAS LITE CHECK (MARGARET MALEK)	
E	08/20/2018	(DAS IMPORT) VICTIMS DAS LITE CHECK (MARGARET MALEK)	
<u>12</u>	08/20/2018	(DAS IMPORT) BROTHER'S DAS LITE CHECK (JOE PALOMINO)	
F	08/20/2018	(DAS IMPORT) BROTHER'S DAS LITE CHECK (JOE PALOMINO)	
<u>13</u>	08/20/2018	BROTHER FULL TEXT SEARCH (JOE PALOMINO)	
<u>14</u>	08/20/2018	(OTHER ATTACHMENTS) SCANNED HOSPITAL NOTIFICATION WORKSHEET	
G	08/20/2018	(OTHER ATTACHMENTS) SCANNED HOSPITAL NOTIFICATION WORKSHEET	
<u>15</u>	08/21/2018	(CLOSING) CLOSE CASE	
<u>16</u>	08/22/2018	(INTERVIEW IN-PERSON) VICTIMS INTERVIEW (MARGARET MALEK)	
<u>17</u>	08/23/2018	(MERGED CASE) MERGED CASE -2018-2596	
<u>18</u>	08/26/2018	CONFERRAL WITH SOURCE	
<u>19</u>	08/27/2018	(INTERVIEW TELEPHONE) FATHER'S INTERVIEW (ROBERT MALEK)	-
<u>20</u>	09/12/2018	CONFERRAL WITH DETECTIVE FROM 69 PDU	
<u>21</u>	09/12/2018	(CLOSING) CLOSING CASE # 810	

Compa	nion Case(s)							
Case Num	Command	Date Opened	Opened By	Case Title	UF61 Num	Kite Num	Case Type	Pattern
2018- 2596	241-DET SQD. MAN-MTS	08/19/2018	DT3 JOHN MONGIELLO	MARGARET INGOGLIA SEX ABUSE	2018-014- 008807		GENERAL INVESTIGATION	
2018- 879	014-MIDTOWN PRECINCT SOUTH	08/20/2018	POM WILLIAM SENA		2018-014- 008807		DOMESTIC VIOLENCE	



DE	ОТ	HER A	ГТАСНМЕ	NTS				ime/Cond VESTIGAT			BUSE	0		This	N PRE Repor		SOUTH	
	e of UF61 19/2018	Complai 2018-014		Date Case 08/19/2018		ase No. 018 - 810		it Reporti IILD ABUS				F 1	ollow-	Up No	Э.			
	oic/Subject HER ATTAC	HMENTS)	RECEIPT IF	RT/3Y/O/IS	CA/PHYSICAL A	BUSE/DV							ctivity 1/19/20			Activit	ty Time	
	nplainant's N LEK, MARGA					Address		MANHA	TTA	N NY				Apt N	о.			
Nic	kname/Alias	/Middle Na	ame															
Sex FEN	MALE		Race BLACK			Date of E 10/29/201				Age 3								
	ne Telephon -999-9999	е	Busines 999-999	ss Telepho -9999	one	Cell Pho	ne			Beeper 999-999					I Addı @NO	ress NE.COI	M	
Per	son Intervie	wed Last I	Name, First	M.I.				Address							Apt No	o.		
Nic	kname/Alias	/Middle Na	ame															
Pos	ition/Relatio	nship		Sex				Race			Date of	Birth		Į,	Age			
Hor	ne Telephon	е		Busine	ss Telephone			Cell Phon	е		Beeper	#			E-Mail	Addres	ss	
upp repo 2. T A) 6 B) A C) [er left thigh. Tort is a doctor	The c/v sus from Mou list of rep 008807 2018-14-0	stained the in nt Sinai Beth orts prepared	juries whili Israel Hos I in connec	ction with this case	e mother M												er
	ivity Addres	s Location	1			Street		City		State		Zip		Apt #				
Cro	ss Street						Inte and	ersection	of				I	Premi	se Typ	oe		
A T-	TA CUINTENE																	
	ACHMENT													In-	! 4!			
No 1	Attachment													Des	scripti	on		
	PDF 15347138	56245 180)819172257-	3066928 n	ndf													
		5 .50			-													
	Reportin	g Officer:	Rank DT3		Name JEFFREY LUPE	RON				x Reg. 1 5997	No.		Comn 256-M		PECIA	L VICTII	MS SQUA	D
R	eviewing Su	pervisor:	Manner of	Closing	Date Reviewed 08/19/2018	Date of N	Next I	Review	Na SA		RE MOT		Supv. 89184		lo.			

GE	NERAL	INVEST	IGATION			Crime/Cor INVESTIG		n CHILD ABUSE	014 Dat	mmand 4-MIDTOWN PRECINCT SOUTH te of This Report 19/2018
	Complair 2018-014		Date Case 08/19/2018		ase No. 018 - 810	Unit Repo			Fol 2	llow-Up No.
Complainant's N MALEK, MARGAI Nickname/Alias/I	RET	me			Address	MANH	IATTA	AN NY		Apt No.
Sex FEMALE		Race BLACI	<u> </u>		Date of B			Age 3		
Home Telephone 999-999-9999)		ess Telepho 99-9999	one	Cell Phon	е		Beeper # 999-999-9999		E-Mail Address NONE@NONE.COM
Activity Address	Location				Street	City		State	Zip	Apt # MCAS
Cross Street						Intersection and	n of	,		Premise Type
Activity Date 08/19/2018						Activity T	ime			
Topic/Subject: VICTIMS FULL T	EXT SEA	RCH (MA	RGARET MA	ALEK)						
	2018, at a welfare of	pproximate a child aga	inst her brot	her Joe Palomino						s a 2018 complaint report on file for was filed the c/vs father. Det.
Reporting	Officer:	Rank		Name				x Reg. No.	С	ommand
		DT3		JEFFREY LUPER	<u> </u>		93	6997		56-MAN SPECIAL VICTIMS SQUAD
Reviewing Sup	ervisor:	Manner o	f Closing	Date Reviewed 08/19/2018	Date of N	ext Review	1	I ME ALVATORE MOT		upv. Tax No. 91841

GEI	NERAL I	NVEST	IGATION				ne/Condition	on CHILD ABUSE			IDTOWN PRECINCT SOUTH of This Report
	Complaint 2018-014-0		Date Case 08/19/2018		ase No. 018 - 810		Reporting D ABUSE	ı		Follov 3	v-Up No.
Complainant's Na MALEK, MARGAR Nickname/Alias/N	RET	ne .			Address		MANHATI	AN NY			Apt No.
Sex FEMALE	madic Hai	Race BLACk	(Date of B			Age 3			
Home Telephone 999-999-9999	•		ess Telepho 9-9999	one	Cell Phon	ie		Beeper # 999-999-999	9		E-Mail Address NONE@NONE.COM
Activity Address	Location				Street		City	State	Zij	0	Apt# MCAS
Cross Street				•		Inters	section of	•	!		Premise Type
Activity Date 08/19/2018						Act 17:1	ivity Time				
Topic/Subject: MOTHER/SUBJE	CT FULL 1	EXT SE	RACH (MAF	RGARET INGOG	LIA)						
	2018, at ap										as no hit found for given criteria. Den cases with PDU.
2. Case active.											
Reporting		tank T3		Name JEFFREY LUPE	RON		T 9	ax Reg. No. 36997			mand MAN SPECIAL VICTIMS SQUAD
Reviewing Sup	ervisor: N	lanner o	Closing	Date Reviewed 08/19/2018	Date of N	ext R		ame ALVATORE M	ОТТА	Supv 8918	v. Tax No. 41

GE	NERAL	INVEST	IGATION			Crime/Co		n CHILD ABUSE	014-N Date	mand MIDTOWN PRECINCT SOUTH of This Report 1/2018
Date of UF61 08/19/2018	Complair 2018-014		Date Case 08/19/2018		ase No. 018 - 810	Unit Repo			Follo 4	w-Up No.
Complainant's N MALEK, MARGA					Address	MANI	НАТТ	AN NY		Apt No.
Nickname/Alias	Middle Na	ıme				· ·				
Sex FEMALE		Race BLAC	K		Date of B 10/29/201			Age 3		
Home Telephon 999-999-9999	е		ess Telepho 99-9999	ne	Cell Phor	ne		Beeper # 999-999-9999		E-Mail Address NONE@NONE.COM
Activity Address	s Location	1			Street	City		State	Zip	Apt# MCAS
Cross Street						Intersection and	n of	•	'	Premise Type
Activity Date 08/19/2018						Activity 17:20	Time			
Topic/Subject: CONFERRAL W	ITH IRT C	OORDINA	TOR / ACS I	HISTORY						
that the source D the c/v is active a Etware also state c/vs injuries. Ms. bruises on eth c/v somebody told he	r. Michelle and there is that the Kahabir ald I. I asked I er to take t	Gaba left in o sign of bruise don so stated the Ms. Kahabhe c/v to the	for the day. Note that the c/v hat the c/v hat made the hospital to	Ms. Khabir stated use. Ms. Khabir stated ected and there is ad a supervised vithe c/vs mother thave the c/v checkers.	that she sp tated that D s no pattern isit with her ake the c/v cked. Ms. K	oke to Dr. K br. Etware to to the injuri father on F to the hospi ahabir state	umari ld her es. Mariday a tal at d that	e Etware from pe that the injuries of s. Kahabir stated at the ACS office 3am. Ms. Kahabi the c/vs father h	ediatrics El do not look that the m and ACS r stated th as been fil	Ms. Khabir informed me that Ms. Khabir stated D and Dr. Etware informed her that k like a belt or hand marks. Dr. nother had no explanation for the did not notice any marks or at the mother told the doctors that ing a lot of cases against the nilly is known to ACS with 9 prior
Reporting	g Officer:	Rank DT3		Name JEFFREY LUPER	RON			x Reg. No. 6997		nmand -MAN SPECIAL VICTIMS SQUAD
Reviewing Su	pervisor:	Manner o		Date Reviewed 08/19/2018	Date of N	lext Review		ame ALVATORE MOT		ov. Tax No. 841

GE	ENERAL IN	VES1	TIGATION				ne/Condition ESTIGATE (on CHILD ABUSE	014-N Date	mand MIDTOWI of This F 0/2018	N PRECINCT SOUTH Report
Date of UF61	Complaint N		Date Case Assig		ase No.		Reporting			w-Up No	
08/19/2018	2018-014-08	807	08/19/2018	20	018 - 810	CHIL	D ABUSE		5		
Complainant's I					Address		MANHATT	AN NY		Apt N	D.
Nickname/Alias	/Middle Name)			-					,	
Sex FEMALE		Race BLAC	K		Date of 10/29/20			Age 3			
Home Telephon 999-999-9999	е		ess Telephone 99-9999		Cell Pho	one		Beeper # 999-999-9999			Address @NONE.COM
Activity Addres	s Location			Street 281 1 AVEN	UE		City MANHAT	TAN	State NY	Zip	Apt #
Cross Street EAST 17 STREE	T and EAST	16 STR	EET		I	ntersec	tion of		•		Premise Type HOSPITAL
Activity Date 08/19/2018						Act	tivity Time				
Topic/Subject: CONFERRAL W	ITH DOCTOR	l .				•					
York, NY 10003 c/v to the hospita will return back of thigh. Dr. Etware swelling, bleedin Gaba stated that the injures. Dr. E Etware stated that how the c/v got til. 2. Medical record.	2018, at app to speak to Di il for a checku in Wednesday stated that th g, and no sign she thinks the tware also sta at the mother he bruises and	. Kuma p. Dr. E , Augus e bruise of abus ere is n ted tha came ir I that th	rie Etware. I enqui tware informed me st 22, 2018. Dr. Etv e does not have a se. I asked Dr. Etw o pattern with the c t the mother did no	red about Me that Dr. Mi ware informed pattern and layare if the characters. In the characters are that are that are an expense. It is asked to the characters are asked to the characters are that asked to the characters are the	argaret M chelle Ga ed that the it does no v has any Dr. Etwar kplanatior Dr. Etwa	alek (F/ba who e c/v is vert look like other me stated and the re did the re	3). Dr. Etwa called in the ery active. see a belt manarks or brud that a fall, ec/v should be mother se	are informed me e case to the sta DR. Etware state ark or an adult he ises. Dr. Etware the c/v bumping I be getting dischay anything to he	that the mo te Central I ed that the and print. D stated no. into someth arged after er. Dr. Etwa	other was Registry in c/v has a r. Etware Dr. Etwar hing or a r ACS sp are stated	at 281 1 Avenue New told by ACS to bring the s gone for the day and bruise on her left upper stated that there is no e also stated that Dr. nything could of caused eaks to the mother. Dr. I that she did not know s not interviewed.
3. Case active.											

Reporting Officer:		Name JEFFREY LUPER	ON	Tax Reg. No. 936997	Command 256-MAN SPECIAL VICTIMS SQUAD
Reviewing Supervisor:	Manner of Closing	Date Reviewed 08/19/2018	Date of Next Review		Supv. Tax No. 891841

	ERVIEW	IN-PERSON			Crime/Condit INVESTIGATE	ion E CHILD ABUSE		IIDTOWN PRE	CINCT SOUTH
	Complaint I 2018-014-08		e Assigned 18	Case No. 2018 - 810	Unit Reportin		Follow 6	w-Up No.	
Topic/Subject (INTERVIEW IN-P	ERSON) M	OTHER'S / SUBJE	CT INTERVIEW	(MARGARET	Γ INGOGLIA)			ctivity Date 8/19/2018	Activity Time 17:35
Complainant's Na MALEK, MARGAR				Address	MANHAT	TAN NY		Apt No.	
Nickname/Alias/N	liddle Nam	e							
Sex FEMALE		Race BLACK		Date of B 10/29/201		Age 3			
Home Telephone 1999-999-9999		Business Telep 999-999-9999	hone	Cell Phor	10	Beeper # 999-999-9999		E-Mail Addre	
Person Interviewe		me, First M.I.		Addr		HATTAN NY		Apt No.	
lickname/Alias/N	liddle Nam	е							
Position/Relation:	ship	Sex FEMALE		Race WHIT		th		ge	
lome Telephone 199-999-9999		Business 999-999-99	Telephone 999	Cell F	Phone	Beeper #		E-Mail Add	
2. Case active.									
Activity Address	Location		Street 281 1 AVI		City MANHA		tate Y	Zip A	
Activity Address		16 STREET			City MANHA tersection of			Pren	t nise Type
Activity Address NYC Cross Street EAST 17 STREET Reporting	and EAST			In	MANHA tersection of		Com	Pren HOS	nise Type

OT.	HER AT	TACHME	NTS			Crime/Con INVESTIGA			BUSE		IDTOV	WN PRECINCT SOUTH is Report	
Date of UF61 08/19/2018	Complair 2018-014		Date Case 18/19/2018		ase No. 018 - 810	Unit Repor				Follow 7	/-Up N	No.	
Topic/Subject (OTHER ATTACH	HMENTS)	2ND IRT					ctivit 8/19/2	y Date 2018			Activ 17:45	vity Time 5	
Complainant's N MALEK, MARGA					Address	MANH	IATTA	AN NY			Apt	No.	
Nickname/Alias/	Middle Na	ıme											
Sex FEMALE		Race BLACK			Date of Bi 10/29/2014								
Home Telephone 999-999-9999 999-999-9999999999999999			one	Cell Phon	е		Beeper 999-99				ail Address NE@NONE.COM		
Person Interviewed Last Name, First M.I.					Address	5					Apt No.		
Nickname/Alias/	Middle Na	ıme											
Position/Relation	nship		Sex			Race		Date of Birth		rth		Age	
Home Telephone	е		Busine	ess Telephone		Cell Phone Beeper #		Beeper #			E-Mail Address		
Details						•			•			1	
Summary of Inve 1. On August 19, provided any exp mother Margaret.	2018, at a lanation. T	pproximately he c/v has s	even bruis	urs, I received a 2r ses on the buttocks c/v's father Robert	in the shap	378 stating the of finger r	nat the	e c/v (F/ . The inj	3) has susp uries occurr	cious in	juries the c/	for which the family cannot /v is in the care of the	t
Summary of Inve 1. On August 19, provided any exp	2018, at a lanation. T	pproximately he c/v has s	even bruis	ses on the buttocks	in the shap	378 stating the of finger r	nat the	e c/v (F/ . The inj	3) has susp uries occurr	cious in	juries the c/	for which the family cannol /v is in the care of the	t
Summary of Inve 1. On August 19, provided any exp mother Margaret.	2018, at a lanation. T The sourd	pproximately he c/v has s ce of this rep	even bruis	ses on the buttocks c/v's father Robert	in the shap	378 stating the period of finger r	hat the	e c/v (F/ . The inj	3) has susp uries occurr	ed while	juries the c/	/v is in the care of the	t
Summary of Invo 1. On August 19, provided any exp mother Margaret. 2. Case active. Activity Address	2018, at a lanation. T The sourd	pproximately he c/v has s ce of this rep	even bruis	ses on the buttocks c/v's father Robert	s in the shap Melek. Street	oe of finger r	narks	. The inj	uries occurr	ed while	Apt #	/v is in the care of the	t
Summary of Inve 1. On August 19, provided any expi mother Margaret. 2. Case active. Activity Address OFFICE Cross Street	2018, at a lanation. T The sourd	pproximately he c/v has s ce of this rep	even bruis	ses on the buttocks c/v's father Robert	s in the shap Melek. Street	City Intersection	narks	. The inj	uries occurr	ed while	Apt #	/v is in the care of the	t
Summary of Inve 1. On August 19, provided any expirated any expirated and the sum of the	2018, at a lanation. T The sourd	pproximately he c/v has s ce of this rep	even bruis	ses on the buttocks c/v's father Robert	s in the shap Melek. Street	City Intersection	narks	. The inj	uries occurr	ed while	Apt # MCA: Prem	/v is in the care of the # S nise Type	t
Summary of Invo 1. On August 19, provided any expi mother Margaret. 2. Case active. Activity Address OFFICE Cross Street ATTACHMENT No Attachment	2018, at a lanation. T The sourd	pproximately he c/v has s ce of this rep	even bruis	ses on the buttocks c/v's father Robert	s in the shap Melek. Street	City Intersection	narks	. The inj	uries occurr	ed while	Apt # MCA: Prem	/v is in the care of the	t
Summary of Inve 1. On August 19, provided any explimater Margaret. 2. Case active. Activity Address OFFICE Cross Street ATTACHMENT No Attachment 1	2018, at a lanation. T The source	pproximately he c/v has s ce of this rep	even bruis ort is the c	ses on the buttocks: ///s father Robert	s in the shap Melek. Street	City Intersection	narks	. The inj	uries occurr	ed while	Apt # MCA: Prem	/v is in the care of the # S nise Type	t
Summary of Inve 1. On August 19, provided any explimater Margaret. 2. Case active. Activity Address OFFICE Cross Street ATTACHMENT No Attachment 1	2018, at a lanation. The source Location	pproximately he c/v has size of this rep	even bruis ort is the c	ses on the buttocks: ///s father Robert	s in the shap Melek.	City Intersection	n of Ta	. The inj	zi	p Com	Apt # MCA: Prem	/v is in the care of the	

O.	THER ATTACHM	ENTS	Crime/Condition INVESTIGATE CHILD ABUSE	Command 014-MIDTOWN PRECINCT SOUTH Date of This Report 08/20/2018	
Date of UF61 08/19/2018	Complaint No. 2018-014-08807	Date Case Assigned 08/19/2018	Unit Reporting CHILD ABUSE	Follow-Up No. 8	

		Activity Time
R ATTACHMENTS) SCANNED VICTIMS PHOTO	08/20/2018	07:30

Complainant's Name MALEK, MARGARET		Address MANHATTA	Apt No.					
Nickname/Alias/Middle Name								
Sex FEMALE		Date of Birth 10/29/2014	Age 3					
	Business Telephone 999-999-9999			E-Mail Address NONE@NONE.COM				

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

Details

Summary of Investigation:

1. On August 19, 2018, at approximately 1212 hours, Det. Harris and I were present at Mount Sinai Beth Israel Pediatrics ER located at 281 1 Avenue New York, NY 10003. The following was learned; I asked the c/vs mother Ms. Margaret Ingoglia permission to take a picture of the c/v for case purpose. Ms. Ingoglia stated that its ok. At the time I with the c/v the c/v was sleeping. I observed circular bruises on the left upper thigh of the c/v. I took the picture in front of the c/v's mother and brother.

2. Case active.

Activity Address Location NYC	Street 281 1 AVENUE		City MANHATTAN	State NY	Zip	Apt #
Cross Street EAST 17 STREET and EAST 16 STREET			ion of			Premise Type

ATTACHMENT No Attachment Description 1534764640284_15347646402.png VICTIMS MARGARET





Reporting Officer:	Rank DT3	Name JEFFREY LUPER		Command 256-MAN SPECIAL VICTIMS SQUAD
Reviewing Supervisor:	Manner of Closing	Date Reviewed 08/20/2018		Supv. Tax No. 891841

INT	ERVIEV	V IN-PE	RSON				e/Condit STIGATE) ABUSE	0		DTOWN This Re	PRECINCT eport	SOUTH
Date of UF61 08/19/2018	Complair 2018-014		Date Case 08/19/2018		ase No. 118 - 810		Reportin D ABUSE			F	Follow	-Up No.		
Topic/Subject (INTERVIEW IN-I	PERSON)	BROTHE	R'SINTERVIE	EW (JOE PALOM	INO)					Act 08/2	ivity D 20/201	ate 8	Activit 11:05	y Time
Complainant's N MALEK, MARGA	lame RET				Addres		MANHAT	TAN N	Y			Apt No.	•	
Nickname/Alias/	Middle Na	ıme												
Sex FEMALE				Date of Birth Age 10/29/2014 3										
Home Telephone 999-999-9999	me Telephone Business Telephone 999-999-9999 Cel		Cell Ph	one			per # 999-9999				Address DNONE.CO	M		
Person Interviewed Last Name, First M.I. PALOMINO, JOE Nickname/Alias/Middle Name				Ad	dress	MAN	Apt No.							
Nickname/Alias/	Middle Na	ıme												
Position/Relationship BROTHER Sex MALE			Rac Wh	ce IITE		th		ge 						
Home Telephone 999-999-9999	e		Business Te 999-999-999		Cel	I Phone		E	Beeper#				I Address MONE.C	ОМ
Details														
Summary of Inve	estigation													
Activity Address	Location	l		Street 281 1 AVENU	JE		City MANHA	TTAN		State)	Zip	Apt #	
Cross Street EAST 17 STREE	T and EAS	ST 16 STF	REET			Intersect	tion of						Premise Ty HOSPITAL	ype
Reporting	Officer:	Rank DT3		Name JEFFREY LUPER	RON			Tax Reg. No. 936997 Command 256-MAN SPECIAL VICTIMS			MS SQUAD			
Reviewing Su	pervisor:	Manner o		Date Reviewed 08/20/2018	Date of	Next Re		Name SALVA	TORE MOT	TA	Supv. 89184	. Tax No I1		

DAS IMPORT				Crime/Condition INVESTIGATE CHILD ABUSE	Command 014-MIDTOWN PRECINCT SOUTH Date of This Report 08/20/2018	
Date of UF61 08/19/2018	Complaint No.	Date Case Assigned 08/19/2018		Unit Reporting CHILD ABUSE	Follow-Up No.	

Topic/Subject
(DAS IMPORT) CRIMINAL PROPENSITY SEARCH OF POI (MARGARET INGOGLIA)DOB

NYSID:NONE

Activity Date
08/20/2018
12:45

DAS Import					
Owner/Team Member	From Date	To Date	Case Folder No	Created Date	Description

Reporting Officer:	Rank DT3	Name JEFFREY LUPER	Tax Reg. No. 936997	Command 256-MAN SPECIAL VICTIMS SQUAD
Reviewing Supervisor:		Date Reviewed 08/21/2018		Supv. Tax No. 891841

DA	S IMPORT			INVESTIGATE CHILD ABUSE	Command 014-MIDTOWN PRECINCT SOUTH Date of This Report 08/20/2018
Date of UF61 08/19/2018	Complaint No.	Date Case Assigned 08/19/2018	Case No. 2018 - 810	Unit Reporting	Follow-Up No. 11

Topic/Subject	Activity Date	Activity Time
(DAS IMPORT) VICTIMS DAS LITE CHECK (MARGARET MALEK)	08/20/2018	12:52

DAS Import					
Owner/Team Member	From Date	To Date	Case Folder No	Created Date	Description
936997 DT3 JEFFREY LUPERON - 256-MAN SPECIAL VICTIMS SQUAD	08/19/2018	08/19/2018	168553-2018	08/19/2018	MARGARET MALEK

AT	TACHMENT								
No	Attachment	Description							
1		MARGARET_MALEK10_29_2014_612323 RECORDS SNAPSHOT							
	MARGARET MALEK - 10 29 2014 612323 RECORDS SNAPSHOT								
2		MARGARET_MALEK10_29_2014_612323 MAP							
	MARGARET MALEK - 10 29 2014 612323 MAP								
3		MARGARET_MALEK10_29_2014_612323 DAS SNAPSHOT							
	MARGARET MALEK - 10 29 2014 612323 DAS SNAPSHOT								

Details

Summary of Investigation:

1. On August 19, 2018, at approximately 0945 hours, I conducted a Das Lite check for Margaret Malek (F/3). Margaret has a 2018 complaint report on file for endangering the welfare of a child against her brother Joe Palomino (M/14). Complaint report # 2018-077005024. Report was filed the c/vs father. Det. Brunetti from the 77PDU is investigating the allegation.

2. Case active.

Reporting Officer:	Rank DT3	Name JEFFREY LUPER	ON	Tax Reg. No. 936997	Command 256-MAN SPECIAL VICTIMS SQUAD		
Reviewing Supervisor:	Manner of Closing	Date Reviewed 08/21/2018			Supv. Tax No. 891841		

DA	AS IMPORT		Crime/Condition INVESTIGATE CHILD ABUSE	Command 014-MIDTOWN PRECINCT SOUTH Date of This Report 08/20/2018
Date of UF61 08/19/2018	Complaint No.	Date Case Assigned 08/19/2018	Unit Reporting CHILD ABUSE	Follow-Up No. 12

Topic/Subject	Activity Date	Activity Time
(DAS IMPORT) BROTHER'S DAS LITE CHECK (JOE PALOMINO)	08/20/2018	13:00

DAS Import					
Owner/Team Member	From Date	To Date	Case Folder No	Created Date	Description
936997 DT3 JEFFREY LUPERON - 256-MAN SPECIAL VICTIMS SQUAD	08/19/2018	08/19/2018	168592-2018	08/19/2018	JOE PALOMINO

Reporting Officer	Rank DT3	Name JEFFREY LUPER	Tax Reg. No. 936997	Command 256-MAN SPECIAL VICTIMS SQUAD		
Reviewing Supervisor	Manner of Closing	Date Reviewed 08/21/2018		Supv. Tax No. 891841		

GENERAL INVESTIGATION						INVESTIGATE CHILD ABUSE 014-N Date					nmand -MIDTOWN PRECINCT SOUTH e of This Report :0/2018	
Date of UF61 08/19/2018	Complair 2018-014		ase No. 018 - 810	Unit Reporting Follow CHILD ABUSE 13					-Up No.			
Complainant's N MALEK, MARGA Nickname/Alias/	RET		Address	MANHATTAN NY								
Sex FEMALE	illiadio itt	Race BLACE	<		Date of B		A 3	\ge				
Home Telephone Business Telephone 999-999-9999 999-999-9999999999999					Cell Phon	e		Beeper # 999-999-9999			E-Mail Address NONE@NONE.COM	
Activity Address	s Location	1			Street	City	;	State	Zip		Apt# MCAS	
Cross Street						Intersection of and Premise Type						
Activity Date 08/20/2018						Activity Tim	ie					
Topic/Subject: BROTHER FULL	. TEXT SE	ARCH (J	DE PALOMI	NO)								
1. On August 19, for endangering t	Summary of Investigation: 1. On August 19, 2018, at approximately 1305 hours, I conducted a full text search for Mr. Joe Palomino (M/14). Mr. Palomino has a complaint report on file for endangering the welfare of child against his sister Margaret Malek (F/3). Complaint report # 2018-077-005024. Report was filed the c/vs father. Det. Brunetti from the 77PDU is investigating the allegation.											
Reporting	g Officer:	Rank DT3		Name JEFFREY LUPER	DON		Tax 9369	Reg. No.			mand	
Reviewing Su	pervisor:	Manner o	f Closing	Date Reviewed 08/21/2018	-	ext Review	Nam		ГА	256-MAN SPECIAL VICTIMS SQUAD Supv. Tax No. 891841		

OTHER ATTACHMENTS								Crime/Condition INVESTIGATE CHILD ABUSE					Command 014-MIDTOWN PRECINCT SOUTH Date of This Report 08/20/2018			
	e of UF61 19/2018	Complain 2018-014		ate Case 8/19/2018		ase No. 018 - 810	it Reporti				Follow 14	Follow-Up No.				
	ic/Subject HER ATTAC	HMENTS)	SCANNED H	WORKSHE							Activity Date 08/20/2018					
Complainant's Name MALEK, MARGARET							MANHATTAN NY									
Sex	kname/Alias MALE	/Middle Na	Race BLACK			Date of E 10/29/201				Age						
	ne Telephon -999-9999	ie	Busines 999-999-	s Telepho 9999	one	Cell Pho	ne			Beeper 999-999				ail Addre E@NON		
Per	son Intervie	wed Last I	Name, First N	1.1.			[,	Address						Apt No.	,	
Nic	kname/Alias	/Middle Na	ame													
Pos	ition/Relatio	nship		Sex			Race				Date of Bi	rth		Age		
Hor	ne Telephon	ie		Busine	ess Telephone		- 1	Cell Phon	ell Phone Beeper #			E-Mail Address				
Det	ails															
1. C	nmary of Inv on August 20, case active.			1430 hou	urs, I am submittin	g this repor	rt for t	the purpos	se of	scannii	ng Hospital	notification	on wo	rksheet i	nto the case file.	
	ivity Addres	s Locatior	1			Street		City		State	Zi		Apt# MCAS			
Cro	ss Street						Inte and	ersection	of		•		Prem	ise Type)	
ΑTΊ	ACHMENT															
No Attachment							Descr	iptio	n							
1	hospital notification worksheet hospital notification worksheet															
	Reportin	g Officer:	Rank DT3		Name JEFFREY LUPE	RON			Tax 9369	Reg. N	No.	Comr 256-M		PECIAL	VICTIMS SQUAD	
R	eviewing Su	pervisor:	Manner of C	losing	Date Reviewed 08/21/2018	Date of N	Next	ext Review Name SALVATORE M			RE MOTTA	Supv. Tax No.				

CLOSING					Condition IGATE C	n CHILD ABUSE	1 1	IDTOWN I	PRECINCT SOUTH port
Date of UF61 Complair 2018-014			ase No. 018 - 810	Unit Re SQUAD	porting		Follov 15	v-Up No.	
Reference Case No 2018 - 810	Comma 256-DE	I nd T BUREAU MAN S	SPEC VIC	SQUAD					nplaint No 8- 14- 8807
Complainant's Name MALEK, MARGARET			Address	MA	NHATTA	AN NY		Apt No.	
Nickname/Alias/Middle Na	ime								
Sex FEMALE	Race WHITE		Date of B 10/29/201			Age 3			
Home Telephone 999-999-9999	Business Telepho 999-999-9999	one	Cell Phon	ne		Beeper # 999-999-9999)	E-Mail A NONE@	Address NONE.COM
Perpetrator's Last Name, INGOGLIA, MARGARET	First M.I.		Wanted/Arrested WANTED						
Nickname/Alias/Middle Na	ime								
MANHATTA	AN NY		No.		Res. Po	ct.	NYSIE	No.	
	ex EMALE	Race WHITE	Date of	Birth	Age		Heigh	t	Weight
	susiness Telephone 99-999-9999	Cell Phone	Beeper	#		Address @NONE.COM		itizen	State/Country of Birth NEW YORK
Description Eye Color:UNKN Hair Color	:UNKNWN Hair Length	n:NORMAL Hairsty	/le:UNKNO	WN Com	olexion:U	JNKNOWN Sk	in Tone:LIGH	Т	
Accent No	Veapon	Describe Weapo	on (If firear	m, give o	olor, ma	ake, caliber, t	ype, model, e	etc.)	Discharged
Gang Affiliation No		Gang Name			Gang I	dentifier			
M.O.		Transit M.O.							
Action Toward Victim		Special Charact			New B	urglary/Grand	Larceny Sp	ecific M.O).
Mask:			Gloves:						
Clothing Description Head Gear: UNK Foot Gear:	UNK Outer Wear:UNK	Other Clothing/Ac	ccessories:	UNK					
Scars, Marks 1.Distinguishing Body Mark	UNKNOWN								
Impersonation of UNKNOWN			If other						
Frequents Areas in the Co	onfines of the Precinc	t(s)							
Activity Address Location OFFICE	l		Street	Cit	у	State	Zip	Apt#	
Cross Street		•		Intersec	tion of	•		Premise	Туре
Activity Date 08/21/2018				Activity 19:30	/ Time				
Topic/Subject: (CLOSING) CLOSE CASE									
Summary of Investigation 1. On August 21, 2018, at a SEX ABUSE FROM INSIDE	pproximately 1930 HO THE								E COMPLAINT IS A SSIGNED CASE #810.
2. CASE STATUS CLOSED	<i>)</i> .								
Reporting Rank Officer: DT3			Name JOHN MC	NGIELLO)		Tax Reg. No 895751).	Command 241-MTS DET SQUAD
Supervisor: B-5 - B	r of Closing -5 REFERRAL / REAS R UNIT FOR INV	SIGNMENT TO	Transfer 256-MAN VICTIMS	SPECIAL	AL Reviewed		Date of Nex Review	t Name JAME GRILI	Supv. Tax No. 922454

IN ^T	TERVIE\	W IN-PE	RSON				ne/Cond ESTIGAT		HILD ABUSE	(DTOWN PRI This Repor	ECINCT SOUTH	
Date of UF61 08/19/2018	Complair 2018-014		Date Case 08/19/2018		ase No. 018 - 810		t Reporti LD ABUS				Follow 16	-Up No.		
Topic/Subject (INTERVIEW IN-	PERSON)	VICTIMS	INTERVIEW	' (MARGARET M	ALEK)						tivity [/22/201		Activity Time 10:10	
Complainant's N MALEK, MARGA					Addres	s	MANHA	TTAN	N NY			Apt No.		-
Nickname/Alias	/Middle Na	ame												
Sex FEMALE		Race WHIT			Date of 10/29/2			3	Age }					_
Home Telephon 999-999-9999	е		ness Teleph 199-9999	one	Cell Phone Beeper # 999-999-9999							E-Mail Add NONE@NO		_
Person Interviewed Last Name, First M.I. MALEK, MARGARET Nickname/Alias/Middle Name				Add	dress	MAI	NHA	ITAN NY			Apt No.		_	
		ame							_					_
Position/Relationship UNKNOWN/NONE Sex FEMALE				Race WHITE				Date of Bir 10/29/2014			Age 3			
Home Telephon 999-999-9999	е		Business T 999-999-999		Cel	l Phone	9		Beeper #			E-Mail Ad	Idress IONE.COM	
observe a forens recorded to prese questioning prese between the truth. 2. Ms. McArthur a was asked what with. The c/v state	2018, at a ic interview erve the intented by the and a lie. asked the chappen. The dwith more asked with more	approxima v of Marga tegrity of t ne intervie c/v if she on the c/v state pmmy and	aret Malek (F. he interview. wer. It was d can tell her he ted she got h I Joe. It was a		Christina I healthy a nd. She w he c/v sta vas asked vas the bl	McArthu and well vas not a sted the d where ock. The	air plane she got t e c/v stat	Fore r. The out th . The the br	nsic Specialise c/v appeared to rules of the c/v stated she ruise from. The	t for Sa to har intervie e got a e c/v st	afe Hor we diffic ew nor bruise tated bl	izon. The int culty following was she ask and pointed ock. It was a	g the line of teed the difference to buttocks area. It asked who she lives	
Activity Address	s Location	1			Street		City		State	Zip		Apt#		
OFFICE										'		CAC		
Cross Street						Inter and	section	of				Premise Ty _l	ре	
Penortin	g Officer:	Pank		Name				Tav	Peg No		Comr	nand		-
izebortini	g Officer.	DT3		JEFFREY LUPE			Tax Reg. No. 936997		Command 256-MAN SPECIAL VICTIMS SQUAD					
Reviewing Supervisor: Manner of Closing Date Reviewed 08/23/2018								Supv. Tax No. 891841						

MARIN N	IERGED CASE		Crime/Condition MARGARET MALEK-IRT/3Y/O/ISCA/PHYSICAL ABUSE/DV	Command 000- Date of This Report 08/23/2018
			Unit Reporting SYSTEM GENERATED	Follow-Up No. 17

Topic/Subject (MERGED CASE) MERGED CASE -2018-2596 Activity Date 08/23/2018 Activity Time

Details

Summary of Investigation:

Case Number: 2018-2596 - Case Number: 2018-2596 Owner: JOHN MONGIELLO, DT3 Command: 241 - MTS DET SQUAD Complaint: 2018-014-008807

Taxid : 891841
Name : MOTTA, SALVATORE
Rank : SDS
Command : MN - MAN SPECIAL VICTIMS SQUAD

Reporting Officer:		Name SYSTEM GENER	Tax Reg. No. 999999	Command 256-MAN SPECIAL VICTIMS SQUAD	
Reviewing Supervisor:	Manner of Closing	Date Reviewed 08/23/2018		Supv. Tax No. 891841	

GE							Crime/Condition INVESTIGATE CHILD ABUSE			Command 014-MIDTOWN PRECINCT SOUTH Date of This Report 08/26/2018		
Date of UF61 08/19/2018	Complair 2018-014		Date Case 08/19/2018	Assigned Ca	ase No. 118 - 810	Unit Reporting Follow-U CHILD ABUSE 18					r-Up No.	
Complainant's N MALEK, MARGA					Address	ddress Apt No. MANHATTAN NY						
Nickname/Alias	/Middle Na	ame										
Sex Race Date of Birth Age FEMALE WHITE 10/29/2014 3												
Home Telephone Business Telephone 999-999-9999						ne		Beeper # 999-999-9999			E-Mail Address NONE@NONE.COM	
Activity Address Location OFFICE Street							City	State Zip			Apt# MCAS	
Cross Street						Intersection of and Premise Type					Premise Type	
Activity Date 08/26/2018						Act 18:4	tivity Time					
Topic/Subject: CONFERRAL W	ITH SOUR	CE										
Summary of Investigation: 1. On August 22, 2018, at approximately 1200 hours, I telephoned Dr. Michelle Gaba from Mount Sinai Beth Israel Pediatrics ER at following was learned; I introduced myself and informed Dr. Gaba that I am investigating a physical abuse report she filed with the state central registry regarding a 3 year old female name Margaret Malek. Dr. Gaba stated that she did not have any concerns with the c/v or the mother. Dr. Gaba stated that the mother was told to bring the c/v to the hospital by ACS because the father filed a report regarding the c/v having a bruise. Dr. Gaba stated that she examined the c/v. Dr. Gaba stated that the c/v had one bruise which did not have any pacific pattern in her upper left thigh. DR. Gaba stated that the pattern was not consist with abuse and the c/v did not have no other bruises on her. Dr. Gaba stated that she filed a report with the state central registry because the mother did not have an explanation of what happen. Dr. Gaba referred the mother to take the c/v to a loco pediatrician.												
2. Case active.	. Case active.											
Reportin	Reporting Officer: Rank DT3 Name JEFFREY LUPERON			RON	· · · · · · · · · ·			1	Command 256-MAN SPECIAL VICTIMS SQUAD			
Reviewing Su	331111111111111111111111111111111111111			Date of I	Next R		w Name Supv			Supv. Tax No. 916273		

INTERV	EW T	ELEP	PHONE					ne/Conditi ESTIGATE		HILD ABUSE		Command 014-MIDTOWN PRECINCT SOUTH Date of This Report 08/27/2018			
	aint No 14-088		Date Case 08/19/2018	Assigned		ise No. 18 - 810		Reporting				Follow 19	/-Up No.		
Topic/Subject (INTERVIEW TELEPHO	NE) FA	THER'	S INTERVIE	EW (ROBER	T MA	LEK)						tivity I 27/20			Activity Time 01:35
Complainant's Name MALEK, MARGARET						Address		MANHAT	TAI	N NY			Apt No.		
Nickname/Alias/Middle	Name														
Sex FEMALE	1 -	Race WHITE				Date of Bi 10/29/2014				Age 3					
Home Telephone 999-999-9999			ess Telepho 9-9999	ne	Cell Phone Beeper # 999-999-9999							E-Mail		ess NE.COM	
Person Interviewed Last Name, First M.I. MALEK, ROBERT Nickname/Alias/Middle Name				Add 1110		1 STR	REET BRO	OK	LYN NY 11236				pt No	D. IND FL	
Nickname/Alias/Middle	Name												-		
Position/Relationship Sex FATHER MALE				Race	e NOWN				Date of Birth 04/06/1969			A 4	.ge 9		
Home Telephone 718-614-2860			ness Teleph 99-9999	one	Cell Phone 929-441-8429				Beeper#					Address @NONE.COM	
Details															
Summary of Investigat 1. On August 26, 2018, i introduced myself and in asked Mr. Malek to tell in bruises on her buttocks and realize that the bruis filed a report with the Sta no because the ACS wo filed a report regarding t 2. Case active.	t approformed e what area. Miles the centre	him that happe r. Male c/v had tral Req . Hudso	at I am investon. Mr. Malek k stated that I in her butto gistry. I aske on confronte	stigating a phosistigating a phosist stated that of the asked the ocks area where d Mr. Maleked him about	ysical on Fri- e c/v v ere no if he t a prio	l abuse rep day Augus what happe of mosquito cold his ass or report he	ort he t 17, 2 en and bites igned filed	e filed with 2018 during d the c/v to . Mr. Male I ACS case regarding a	the g su old l k st	state central re upervise visit at him its mosquito ated that he dec orker Ms. Hudso	egistry the A bites cided n abo	y regai ACS of s. Mr. I that h out the	rding his fice he ol Malek state had to e c/vs brui	daugl bserv ated the do so ises.	hter Margaret. I sed the c/v with hat he got home omething so he Mr. Malek stated
Activity Address Locat	ion				S	Street		City		State	Zip		Apt # MCAS		
Cross Street							Intera	section of	F .				Premise	тур	е
				Tu u											
Reporting Offic	r: Ran			Name JEFFREY L	UPERON						Command 256-MAN SPECIAL VICTIMS SQUAD				
Reviewing Supervisor: Manner of Closing Date Review 08/30/2018			ved	ved Date of Next Review							Supv. Tax No. 16273				

GI	ENERAL	INVEST	IGATION				ne/Conditio ESTIGATE (n CHILD ABUSE	014- Date	mand MIDTOWN PRECINCT SOUTH of This Report 2/2018		
Date of UF61 08/19/2018	Complair 2018-014		Date Case 08/19/2018		ase No. 018 - 810		Reporting LD ABUSE		Follo 20	ow-Up No.		
Complainant's					Address		MANHATTA	AN NY		Apt No.		
Nickname/Alias	/Middle Na	ıme										
Sex FEMALE		Race WHITE			Date of B 10/29/201			Age 3				
Home Telephone Business Telephone 999-999-9999 999-999-9999					Cell Phor	ne		Beeper # 999-999-9999		E-Mail Address NONE@NONE.COM		
Activity Addres	s Location	1			Street		City	State	Zip	Apt # MCAS		
Cross Street				•		Inter	section of	•	•	Premise Type		
Activity Date 09/12/2018						Ac 00:	tivity Time					
Topic/Subject: CONFERRAL W	/ITH DETE	CTIVE FR	OM 69 PDU									
informed Det. Sh computer checks Robert Malek. C mother and she	r 11, 2018, narp that I as on the fan omplaint re stated that	at approxion conduct in conduct it show port 2018-is she gave.	ing an invest ed that Det. 69-003650 a loe the mone	Sharp has an ope nd case # 2018-00	r old femal n Petit Lar 01213. Det and he did	e child ceny c Shar not st	l (Margaret I case against p informed r ceal it from th	Malek) regarding my c/vs Brother ne that he is clos	allegation Joe Palor sing his ca	The following was learned; I of child abuse. After conducting mino (M/14) filed by the c/vs father use because he spoke to the c/vs lalek. Det. Sharp also stated that		
Sharp that I am of delay when spear is closing the case	aking to him	case none and I don	criminal bec t know if he i	ause no disclosuro s capable of takino	e was mad g money. [e of al Det. Sh	buse during narp informe	my investigation d me that he is n	. I also int ot looking	ormed Det. Sharp that Joe has a to speak to Mr. Palomino and he		
2. Case active.												
Reportin	g Officer:	Rank DT3		Name JEFFREY LUPER	RON			Tax Reg. No. 936997		Command 256-MAN SPECIAL VICTIMS SQUAD		
D i i 0-				Data Davisonal	D-4 C1	14-5			O T N-			

Reporting Officer:	Rank DT3	Name JEFFREY LUPER		 Command 256-MAN SPECIAL VICTIMS SQUAD	
Reviewing Supervisor:				Supv. Tax No. 891841	

	CLOSING			Crime/Condition INVESTIGATE CHILD ABUSE	Command 014-MIDTOWN PRECINCT SOUTH Date of This Report 09/12/2018
Date of UF61 08/19/2018	Complaint No. 2018-014-08807	Date Case Assigned 08/19/2018	Case No. 2018 - 810	Unit Reporting CHILD ABUSE	Follow-Up No. 21

Complainant's Name MALEK, MARGARET	Address MANHATTAN NY					Apt No.		
Nickname/Alias/Middle Name								
Sex FEMALE	Race WHITE	Date of B 10/29/201			Age 3			
Home Telephone 999-999-9999			Cell Phone		Beeper # 999-999-9999		E-Mail Address NONE@NONE.COM	
Activity Address Location OFFICE		Street		City	State		Apt # MCAS	
Cross Street			Inters	section of	•		Premise Type	

Activity Date	Activity Time
09/12/2018	00:45

Topic/Subject:

(CLOSING) CLOSING CASE #810

Summary of Investigation:

- 1. On August 19, 2018, at approximately 0933 hours, I received an IRT #77378 from the Special Victims Division alleging that the c/v (F/3) has bruises on her upper left thigh. The c/v sustained the injuries while in the care of the mother Margaret. The mother has no explanation for the injuries. The source of this report is a doctor from Mount Sinai Beth Israel Hospital.
- 2. On August 20, 2018, at approximately 1602 hours, I with Ms. Hudson the assigned ACS caseworker and Manhattan District Attorney Vimi Bhatia, did observe a forensic interview of Margaret Malek (F/3) performed by Christina McArthur Clinical Forensic Specialist for Safe Horizon. The interview was recorded to preserve the integrity of the interview. The c/v appeared healthy and well cared for. The c/v appeared to have difficulty following the line of questioning presented by the interviewer. It was difficult to understand. She was not asked about the rules of the interview nor was she asked the difference between the truth and a lie. Ms. McArthur asked the c/v if she can tell her how she got hurt. The c/v stated the air plane. The c/v stated she got a bruise and pointed to buttocks area. It was asked what happen. The c/v stated she got hurt in the back. It was asked where she got the bruise from. The c/v stated block. It was asked who she lives with. The c/v stated with mommy and Joe. It was asked what color was the block. The c/v stated green. (The c/v was playing with green play-duh during the interview). There was no further disclosure made regarding the bruise on her buttocks area.
- 3. On August 22, 2018, at approximately 1200 hours, I telephoned Dr. Michelle Gaba from Mount Sinai Beth Israel Pediatrics ER at following was learned; I introduced myself and informed Dr. Gaba that I am investigating a physical abuse report she filed with the state central registry regarding a 3 year old female name Margaret Malek. Dr. Gaba stated that she did not have any concerns with the c/v or the mother. Dr. Gaba stated that the mother was told to bring the c/v to the hospital by ACS because the father filed a report regarding the c/v having a bruise. Dr. Gaba stated that she examined the c/v. Dr. Gaba stated that the c/v had one bruise which did not have any pacific pattern in her upper left thigh. DR. Gaba stated that the pattern was not consist with abuse and the c/v did not have no other bruises on her. Dr. Gaba stated that she filed a report with the state central registry because the mother did not have an explanation of what happen. Dr. Gaba referred the mother to take the c/v to a loco pediatrician.
- 4. On August 20, 2018, at approximately 1602 hours, I with Ms. Hudson the assigned ACS caseworker and Manhattan District Attorney Vimi Bhatia, did observe a forensic interview of Margaret Malek (F/3) performed by Christina McArthur Clinical Forensic Specialist for Safe Horizon. The interview was recorded to preserve the integrity of the interview. The c/v appeared healthy and well cared for. The c/v appeared to have difficulty following the line of questioning presented by the interviewer. It was difficult to understand. She was not asked about the rules of the interview nor was she asked the difference between the truth and a lie. Ms. McArthur asked the c/v if she can tell her how she got hurt. The c/v stated the air plane. The c/v stated she got a bruise and pointed to buttocks area. It was asked what happen. The c/v stated she got hurt in the back. It was asked where she got the bruise from. The c/v stated block. It was asked who she lives with. The c/v stated with mommy and Joe. It was asked what color was the block. The c/v stated green. (The c/v was playing with green play-duh during the interview). There was no further disclosure made regarding the bruise on her buttocks area.
- 5. Based upon the above information provided and the lack of any criminal wrong doing on the mother, I respectfully request that this case be closed as a B1 no criminal charges surface.

Reporting Officer:	Rank DT3	Name JEFFREY LUPE		936997	Command 256-MAN SPECIAL VICTIMS SQUAD
	Manner of Closing B-1 - B-1 AIDED PERSON NON- CRIMINAL	Date Reviewed 09/12/2018	Review		Supv. Tax No. 891841