



**COMPLAINT - FOLLOW UP  
INFORMATIONAL**  
PD 313-001A (Rev. 4-89)-31

Crime **Sex Abuse/Abduction** Pct **010** DECB No.

PAGE **65179** OF **08/21/04** PAGE **14**

Date of Orig. Report **9/17/04**

Date Assigned **09/16/04**

Case No. **973**

Unit Reporting **MSVS**

Complaint No. **65179**

Date of Report **08/21/04**

Complainant's Name - Last, First, M.I.

**F/KTD**

Victim's Name - If Different

Last Name, First, M.I.

Address, include City, State, Zip

Home Telephone

Business Telephone

Position / Relationship

Sex

Race

Date of Birth

Age

Total No. of

Wanted

Arrested

Weapon

Describe Weapon (If firearm, give color, make, calibre, type, model, etc.)

Wanted

Arrested

Last Name, First, M.I.

Address, include City, State, Zip

Apt. No.

Res. Pct.

Sex

Race

Date of Birth

Age

Height

Weight

Eye Color

Hair Color

Hair Length

Facial Hair

NYSID No.

Eyeglasses

Sunglasses

Nickname, First Name, Alias

Clothing Description,  
Scars, Marks, M.O., Etc.  
(Continue in "Details")

Wanted

Arrested

Last Name, First, M.I.

Address, include City, State, Zip

Apt. No.

Res. Pct.

Sex

Race

Date of Birth

Age

Height

Weight

Eye Color

Hair Color

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Facial Hair

NYSID No.

Eyeglasses

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Nickname, First Name, Alias

Clothing Description,  
Scars, Marks, M.O., Etc.  
(Continue in "Details")

**AREA WITHIN BOX FOR DETECTIVE/LATENT FINGERPRINT OFFICER ONLY. THIS BOX WILL BE UTILIZED BY INVESTIGATOR WHENEVER POSSIBLE AND MUST BE FULLY COMPLETED WHEN USING THIS FORM TO CLOSE A CASE "NO RESULTS."**

Comp. Interviewed

Yes ☐ No ☐

In Person

By Phone

Date

Time

Results: Same as Comp. Report - Different (Explain in Details)

Witness Interviewed

Yes ☐ No ☐

In Person

By Phone

Date

Time

Results: Same as Comp. Report - Different (Explain in Details)

ERP 1

Canvass Conducted

Yes ☐ No ☐

If Yes - Make Entry in Body Re: Time, Date, Names, Addresses, Results

Crime Scene Visited

Yes ☐ No ☐

If Yes - Make Entry in Details Re: Time, Date, Evidence Obtained

ERP 2

Complainant Viewed Photos

Yes ☐ Refused ☐ Future ☐

Results:

5

Witness Viewed Photos

Yes ☐ Refused ☐ Future ☐

Results:

ERP 1

Crime Scene Dusted

Yes ☐ No ☐

By (Enter Results in Details)

Crime Scene Photos

Yes ☐ No ☐

By (Enter Results in Details)

ERP 2

If Closing Case "No Results," Check Appropriate Box and State Justification in Details:  
☐ C-1 Improper Referral ☐ C-2 Inaccurate Facts ☐ C-3 No Evidence / Can't ID ☐ C-4 Uncooperative Complainant ☐ C-5 "Leads" Exhausted

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DETAILS:

Investigation: Sex Abuse Abduction 10 Pct  
Subject: Cell phone owner contact/interview

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ERP 1

ERP 2

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ERP 1

ERP 2

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ERP 1

ERP 2

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CHOICE 1

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Crime	Sex Abuse Att Abduction	Pct.	010	OCCB No.	
Complaint No.	65179	Date of This Report	10/05/04	Follow-Up No.	19
Case No.	973	Unit Reporting	MSVS	Victim's Name - If Different	

A. M. I.

Home Telephone	Business Telephone	Position / Relationship	Sex	Race	Date of Birth	Age	Apt. No.	
Wanted	Arrested	Weapon	Describe Weapon (If firearm, give color, make, calibre, type, model, etc.)					
Arrested	Arrested	Last Name, First, M.I.	Address, include City, State, Zip		Apt. No.	Res. Pct.		
Sex	Race	Date of Birth	Age	Height	Weight	Eye Color	Hair Color	
Eyeglasses		Sunglasses		Clothing Description, Scars, Marks, M.O., Etc. (Continue in "Details")	NYSID No.			
Wanted	Arrested	Last Name, First, M.I.	Address, include City, State, Zip		Apt. No.	Res. Pct.		
Sex	Race	Date of Birth	Age	Height	Weight	Eye Color	Hair Color	
Eyeglasses		Sunglasses		Clothing Description, Scars, Marks, M.O., Etc. (Continue in "Details")	NYSID No.			
Nickname, First Name, Alias								

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Comp. Interviewed	In Person	By Phone	Date	Time	Results: Same as Comp. Report - Different (Explain in Details)	
Yes	No	No				
Witness Interviewed	In Person	By Phone	Date	Time	Results: Same as Comp. Report - Different (Explain in Details)	
Yes	No	No				
Canvass Conducted	If Yes - Make Entry in Body Re: Time, Date, Names, Addresses, Results				Crime Scene Visited	
Yes	No					Yes
					If Yes - Make Entry in Details Re: Time, Date, Evidence Obtained	

Complainant Viewed Photos	Results:	
Yes	Refused	Future

Witness Viewed Photos	Results:	
Yes	Refused	Future

Crime Scene Dusted	By (Enter Results in Details)	Crime Scene Photos	By (Enter Results in Details)
Yes	No	Yes	No

If Closing Case "No Results," Check Appropriate Box and State Justification in Details:				
C-1 Improper Referral	C-2 Inaccurate Facts	C-3 No Evidence / Can't ID	C-4 Uncooperative Complainant	C-5 "Leads" Exhausted

DETAILS:

Investigation: Sex Abuse/Att Abduction 10 Pct.  
Subject: NJ Witness contact

1. The u/s contacted NJ witness Norissa Wharton regarding her viewing a photo array at MSVS on 10/09/04. Mrs Wharton said she would be present at MSVS as planned. I gave Mrs Wharton directions to MSVS and advised her to call me when she arrives in NYC.
2. Case active.

CASE	DATE REVIEWED / CLOSED	IF ACTIVE, DATE OF NEXT REVIEW
ACTIVE	CLOSED	
REPORTING OFFICER:	RANK	SIGNATURE
Det		
REVIEWING / CLOSING SUPERVISOR:	CASE	ENTER DESIGNATION
	CLOSED: C	OR B
NAME PRINTED	TAX REG. NO.	COMMAND
Arduis 831	913279	MSVS
SIGNATURE	C.O.'s INITIALS	





Crime		Pct.	CCCB No.	Complaint No.	Date of This Report
Sex Abuse- Att Abduction		010		65179	10/16/04
Date Assigned	Case No.	Unit Reporting	Follow-Up No.		
09/16/04	973	MSVS	26		
Perpetrator's Name - Last, First, M.I.		Victim's Name - If Different			
F/KTD					
Last Name - First, M.I.		Address, Include City, State, Zip			
Home Telephone		Business Telephone	Position / Relationship	Sex	Race
Date of Birth		Age	Date of Birth	Age	
Wanted		Arrested	Weapon	Describe Weapon (If firearm, give color, make, caliber, type, model, etc.)	
Used		Possessed			
Arrested		Last Name, First, M.I.	Address, Include City, State, Zip		
Sex		Age	Height	Weight	Eye Color
Date of Birth		Age	Height	Weight	Eye Color
Eyeglasses		Sunglasses	Clothing Description	Scars, Marks, M.O., Etc.	
Nickname, First Name, Alias		(Continue in "Details"):			
Arrested		Last Name, First, M.I.	Address, Include City, State, Zip		
Sex		Age	Height	Weight	Eye Color
Date of Birth		Age	Height	Weight	Eye Color
Eyeglasses		Sunglasses	Clothing Description	Scars, Marks, M.O., Etc.	
Nickname, First Name, Alias		(Continue in "Details"):			
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Comp. Interviewed		In Person	By Phone	Date	Time
Yes		No	Yes	No	Results: Same as Comp. Report - Different (Explain in Details)
Witness Interviewed		In Person	By Phone	Date	Time
Yes		No	Yes	No	Results: Same as Comp. Report - Different (Explain in Details)
Crime Scene Visited		If Yes - Make Entry in Details Re: Time, Date, Evidence Obtained			
Yes		No			
Complainant Viewed Photos		Results:			
Yes		Refused	Future		
Witness Viewed Photos		Results:			
Yes		Refused	Future		
Crime Scene Dusted		By (Enter Results in Details)		Crime Scene Photos	
Yes		No	Yes		No
By (Enter Results in Details)		By (Enter Results in Details)			
If Closing Case "No Results," Check Appropriate Box and State Justification in Details:					
C-1 Improper Referral C-2 Inaccurate Facts C-3 No Evidence / Can't ID C-4 Uncooperative Complainant C-5 "Leads" Exhausted					
DETAILS:					
Investigation: Sex Abuse attempt Abduction					
Subject: Arrest report information (x3)					
1. The u/s recieved arrest information for possible subject Dean Crawford NISID# 1346781L. Subject Crawford was arrested on 04/26/04 with 2 others for Criminal Possession Marijuana. Subject contact information also recieved.					
2. Subject Dean Crawford information along with codefendants Jessica Lyons NYSID# 2413172N and Silverio Lebron NYSID# 1889955J was recieved with arrest paperwork. No further information.					
3. Case active.					
CASE		DATE REVIEWED / CLOSED		IF ACTIVE, DATE OF NEXT REVIEW	
ACTIVE		CLOSED			
REPORTING OFFICER:		RANK	SIGNATURE	NAME PRINTED	TAX REG. NO.
		Det		Arbuiso 831	913279
REVIEWING / CLOSING SUPERVISOR:		CASE	ENTER DESIGNATION	SIGNATURE	C.O.'s INITIALS
		CLOSED: C	OR B		