

# **EXHIBIT 1**



Report Cmd: 006	Jurisdiction: N.Y. POLICE DEPT	ICAD#:	Record Status: No Status	Complaint #: 1996-006-007241	No Other Legacy Blue Versions	No Other Complaint Revisions
<b>Occurrence 114 GREENE</b> <b>Location: STREET</b> Name Of Premise: Premises Type: COMMERCIAL BUILDING Location Within Premise: OFFICE AREA. Visible By Patrol?: NO		<b>NYC Parks Dept. Property</b> Did this offense occur on NYC Parks Dept. Property? Command: NYC Parks Dept. Property Name:		Precinct: 006 Sector: H Beat: 11 Post: 32		
<b>Occurrence From: 1996-07-11 12:00:00 THURSDAY</b> Occurrence thru: 1996-07-17 00:00:00 Reported: 1996-08-29 18:20:09 Complaint Received: WALK-IN					Aided #	Accident #
Classification: AGG HARRASSMENT 2M Attempted/Completed: COMPLETED Most Serious Offense Is: N/A PD Code: 639 AGGRAVATED HARASSMENT 2 PL Section: 24030 Keycode: 361 OFF. AGNST PUB ORD SENSBLTY &		<b>Case Status: CLOSED</b> Unit Referred To: PATROL Clearance Code: Log/Case #: 0 Clearance Arrest Id: Clearance AO Cmd: File #: Prints Requested? NO				
Is This Related To Stop And Frisk Report NO		SQF Number: 0000-000-0000		Was The Victim's Personal Information Taken Or Possessed?		Was The Victim's Personal Information Used To Commit A Crime?
Gang Related?	Detective Borough Wheel Log #:		Name Of Gang:		Child Abuse Suspected?	
DIR Required? NO	Child in Common?		Intimate Relationship?		Officer Body Worn Camera:	
If Burglary: Forced Entry? Structure: Entry Method: Entry Location:	Alarm: Bypassed? Comp Responded?: Company Name/Phone: Crime Prevention Survey NO Requested?: Complaint/Reporter Present?:	If Arson: Structure: Occupied?: Damage by:	<b>Taxi Robbery:</b> Partition Present: Amber Stress Light Activated: Method of Conveyance: Location of Pickup:			
Supervisor On Scene - Rank / Name / Command		Canvas Conducted:		Translator(if used):		
<b>NARRATIVE:</b> <b>WITNESS STATES @ T/P/O THE ABOVE MENTIONED PERSON DID CALL HER AND STATED HE WAS GOING TO BURN VICTIM'S PAINTING AND SEND HER POLAROIDS OF THE BURNT PAINTINGS. THE ABOVE MENTIONED PERSON HAS KEYS TO VICTIM'S APARTMENT.</b>						
<b>No NYC TRANSIT Data for Complaint # 1996-006-007241</b>						
Total Victims: 1	Total Witnesses: 1		Total Reporters: 0		Total Wanted: 1	
<b>VICTIM: # 1 of 1</b>			Name: FARMER,MARIA K		Complaint#: 1996-006-007241	
Nick/AKA/Maiden: UMOS: Sex/Type: FEMALE Race: WHITE Age: 26 Date Of Birth: 1969-11-28 Disabled? NO				Gang/Crew Affiliation: Name: Identifiers:  Will View Photo: NO Will Prosecute: NO Notified Of Crime NO Victim Comp. Law:		
Is this person not Proficient in English?: If Yes, Indicate Language: N.Y.C.H.A Resident? Is Victim fearful for their safety / life? Escalating violence / abuse by suspect? Were prior DIR's prepared for C/V?						
<b>LOCATION</b> ADDRESS CITY STATE/COUNTRY ZIP APT/ROOM HOME-PERMANENT 52 BARROW STREET NYC NEW YORK 100140000 4B						
Phone #: HOME: 212-243-6033						
Action against Victim:		Actions Of Victim Prior To Incident:				
Victim Of Similar Incident:		If Yes, When And Where				
<b>WITNESS : # 1 of 1</b>			Name: REGAN,ANNE		Complaint #: 1996-006-007241	
Nick/AKA/Maiden: Sex/Type: FEMALE Race: WHITE Age: 025 Date Of Birth: 1971-02-07				Gang/Crew Affiliation: NO Name: Identifiers:  Relationship To Victim:		
Is this person not Proficient in English?: NO						

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<b>WANTED: # 1 of 1</b>		Name: <b>EPSTEIN, JEFFERY</b>	Complaint#: <b>1996-006-007241</b>	Arrested:
Nick/AKA/Maiden: Height: <b>6FT 0IN</b> Sex: <b>MALE</b> Weight: <b>200</b> Race: <b>WHITE</b> Eye Color: <b>BLUE</b> Age: <b>45</b> Hair Color: <b>GRAY</b> Date Of Birth: <b>--</b> Hair Length: <b>SHORT</b> U.S. Citizen: Hair Style: Place Of Birth: Skin Tone: Is this person not Proficient in English?: Complexion: If Yes, Indicate Language: Accent: S.S. #: .		Order Of Protection: Issuing Court: Docket #: <b></b> Expiration Date: Order of Protection Violated? Does Suspect abuse Drugs / Alcohol? Suspect threatened /attempted suicide? Is the suspect Parole / Probation? Relation to Victim: Living together: Can be Identified: Gang/Crew Affiliation: Name: Identifiers:		

LOCATION ADDRESS CITY STATE/COUNTRY ZIP APT/ROOM HOW LONG? RES.PCT  
HOME-PERMANENT 9 EAST 71 STREET NYC NEW YORK 0 0

Phone #:

N.Y.C.H.A. Resident: N.Y.C. Housing Employee: On Duty:  
Development: N.Y.C. Transit Employee:

Physical Force:

Used Transit System:  
Station Entered:  
Time Entered:  
Metro Card Type:  
Metro Card Used/Poses:  
Card #:

CRIME DATA DETAILS

CLOTHING ACCESSORIES --UNKNOWN COLOR  
CLOTHING FOOTWEAR --UNKNOWN COLOR  
CLOTHING HEADGEAR --UNKNOWN COLOR  
CLOTHING OUTERWEAR --UNKNOWN COLOR

<b>EVIDENCE</b>		Complaint # <b>1996-006-007241</b>			
Evidence Collected?:	Evidence Collection Team/Crime Scene Requested?:	ECT Responded?:	ECT Run#:	Crime Scene Responded?:	Crime Scene Number: <b>-</b>

Evidence Invoice #

**No IMEI Data for Complaint # 1996-006-007241**

Reporting/Investigating M.O.S. Name: <b>PO CHANDLER, DOLOE</b>	Tax #: <b>903605</b>	Command: <b>006 PCT</b>	Rep.Agency: <b>NYPD</b>
Supervisor Approving Name: <b>SGT ZULCH</b>	Tax #: <b>877156</b>	Command: <b>006 PCT</b>	Rep.Agency: <b>NYPD</b>
Complaint Report Entered By: <b>PAA MARSALA, MARGAR</b>	Tax #: <b>329587</b>	Command: <b>006 PCT</b>	Rep.Agency: <b>NYPD</b>
Signoff Supervisor Name:	Tax #: <b>000000</b>	Command:	Rep.Agency:

END OF COMPLAINT REPORT  
# 1996-006-007241

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