# UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF NEW YORK

MICHAEL L. DUNAWAY	
Write the full name of each plaintiff.	CV(Include case number if one has been assigned)
-against- The VILLAGE OF MAMARONECK; THE VILLAGE OF MAMARONECK POLICE DEPARTMENT; THE	COMPLAINT
COUNTY OF WESTCHESTER; THE COUNTY OF	Do you want a jury trial?  ☑ Yes □ No
WESTCHESTER DEPARTMENT OF CORRECTIONS;  JOHN DOES 1-5	
Write the full name of each defendant. If you need more	

attach an additional sheet of paper with the full list of names. The names listed above must be identical to those

contained in Section II.

#### NOTICE

The public can access electronic court files. For privacy and security reasons, papers filed with the court should therefore *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number. See Federal Rule of Civil Procedure 5.2.

# I. BASIS FOR JURISDICTION

Federal courts are courts of limited jurisdiction (limited power). Generally, only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case arising under the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one State sues a citizen of another State or nation, and the amount in controversy is more than \$75,000, is a diversity case. In a diversity case, no defendant may be a citizen of the same State as any plaintiff.

ise?				
Which of your federal constitutional or federal statutory rights have been violated? 42 USC Sec. 1983				
, is a citizen of the State of				
.)				
in the United States, a citizen or				

If the defendant is an indi-	vidual:				
The defendant,			, is a ci	tizen of the State o	of
(Defend	lant's name)				
or, if not lawfully admitt subject of the foreign stat	•	nt residence i	n the United S	States, a citizen or	
			•		
If the defendant is a corpo	oration:				
The defendant,			, is incorpora	ted under the law	s of
the State of					
and has its principal place					
or is incorporated under	the laws of (fore	eign state)			
and has its principal place	e of business in				·
If more than one defendan information for each additi		complaint, att	ach additional	pages providing	
II. PARTIES					
A. Plaintiff Informatio	n				
Provide the following infor pages if needed.	mation for each	plaintiff name	d in the comp	olaint. Attach additi	ional
Michael	L.	D	unawa	ау	
First Name	Middle Initial	Last	Name		
4 Staub Cou	urt				
Street Address				40540	
Westchester County,	Mamaronexk	New	York	10543	
County, City	4 F	State		Zip Code	
914-678-92	15	cddun	away@	outlook.c	com
Telephone Number		Email Addre	ss (if available	)	

# B. Defendant Information

To the best of your ability, provide addresses where each defendant may be served. If the correct information is not provided, it could delay or prevent service of the complaint on the defendant. Make sure that the defendants listed below are the same as those listed in the caption. Attach additional pages if needed.

Defendant 1:	Village of Mamaroneckl			
	First Name	Last Name		
	Current Job Title (or other identifying information)			
	Current Work Address "Village of Mamaroneck in the C	s (or other address where defe	ndant may be served)	
	County, City	State	Zip Code	
Defendant 2:	Village of Mamaron	eck Jail		
	First Name	Last Name		
	Current Work Address	ther identifying information)		
		naroneck NY	10543	
	County, City	State	Zip Code	
Defendant 3:	Westchester County Dept. of Corrections			
	First Name	Last Name		
	Current Job Title (or c	other identifying information)		
	Current Work Address (or other address where defendant may be served)  Westchester, Valhalla New York			
	County, City	State	Zip Code	

	First Name	Last Name	
	Current Job Title (o	or other identifying information)	
		ress (or other address where de er, White Plains	fendant may be served) 10601
	County, City	State	Zip Code
III. STATEME	NT OF CLAIM		
Place(s) of occurr	ence: Mama	roneck Jail and V	Vest. County Jail
1100(0) 01 00011			
Date(s) of occurre	ence: July 1	1, 2019 amd Au	gust 15, 2019
FACTS:			
		port your case. Describe what	
additional pages		ersonally did or failed to do th	at narmed you. Attach
On the above tw	o dates. I was ren	nanded into custody. Prior to as special needs and also t	o the remand I had advised, hat I am a Type one
that I would have	e my diucose mor	vas special needs and also to d have my glucose monitor. nitor in my possession. This this After the judge that rem	was not true. Everything I
that I would have	e my monitor and	my medicine. a reasonable of the incident) would have	officer (knowing what the
surrering from a	serious medical ne	eed that posed an excessive	e risk to my health
(objective propa	) and (2) the office	er knew that non-intervention	n would create an
ignored that risk	. This was despite	e pre-trial detainee's health the court stating that I woul nder § 1983, but they may r	d have my medicaiton.
actions of their c	officers on a theory	of respondeat superior. Ka	ather, municipal liability
attaches only wi municipality or b	nere the deprivation was municipal office	n was caused by a policy of ial "responsible for establish	r custom of the
Municipalities ar	e not entitled to au	ualified immunity for their ac e municipality's behalf would	tions, even where the
contend that the authority, the qu	constitutional dep	rivation was caused by an a unicipal officials are the final	actor with final policymaking policymakers is one of
law, and the que	estion is resolved b	by looking to relevant state la	aw.

INJURIES:	
If you were injured as a result of these actions, describe your injuries and what n	nedical
treatment, if any, you required and received.	
I suffered severe emitional distress and harmed both times I was remanded	d Markhand
monitoring system is required to keep me alove and it is attached to my bo	d. Ivly blood
monitoring system is required to keep me alove and it is attached to my bo multiple insulin injections on a daily basis which must be fore meals. I was	not given the
meals snacks and drinks that are proscribed for a Type one diabetic. Not o	nly were my
prescription drug list, insulin and medications taken away, there was nobor nurse assigned to make sure my levels were ok. As a result my diabetes be control and unmanisted foods for subcapital was fed sugar and essentially other than appropriate foods for subcapital was fed sugar and essentially	y, not even a
control and unmanageable. This is because I was fed august and acceptable.	ecame out of
other than appropriate foods for my condition. Two times this happened.	everytning
appropriate reads for my containent. Two times this happened.	202
IV. RELIEF	
- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
State briefly what money damages or other relief you want the court to order.	
My father was unable to work because he had to take care of me due to the	e negligence
of the defendants. I have suffered anxiety, sleeplessness and panic attacks ever vigilant and formed a habit of becoming paranoid over my levels becathed the tribution of the community of the c	S. I am not
that this will happen again. I have lost my dignity and been forced to now lo	ose control
over an illness that I cannot control, only monitor and even that was denied	
This is AFTER I was promised by the judge that I would have my	- d
This is AFTER I was promised by the judge that I would have my monitor a	I koopers
medications. Absolutely no effort was made by any of the local officials, jai medical staff and court staff to make sure the the judge's directives were for	lowed
2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	

# V. PLAINTIFF'S CERTIFICATION AND WARNINGS

By signing below, I certify to the best of my knowledge, information, and belief that: (1) the complaint is not being presented for an improper purpose (such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation); (2) the claims are supported by existing law or by a nonfrivolous argument to change existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Federal Rule of Civil Procedure 11.

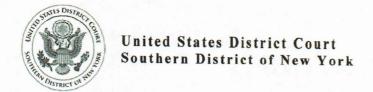
I agree to notify the Clerk's Office in writing of any changes to my mailing address. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Each Plaintiff must sign and date the complaint. Attach additional pages if necessary. If seeking to proceed without prepayment of fees, each plaintiff must also submit an IFP application.

October 12, 2022		milhad Dienewis		
Michael	L.	, ,	Plaintiff's Signatu Dunaway	ıre
First Name 4 Staub Court	Middle Initial	100	Last Name	
Street Address Westchester, Ma	maroneck	NY		10570
County, City 914-698-9215		State	cddunawa	Zip Code Ay@outlook.com
Telephone Number		•	Email Address (if	

I have read the Pro Se (Nonprisoner) Consent to Receive Documents Electronically:  $\square$  Yes  $\square$  No

If you do consent to receive documents electronically, submit the completed form with your complaint. If you do not consent, please do not attach the form.



# Pro Se (Nonprisoner) Consent to Receive Documents Electronically

Parties who are not represented by an attorney and are not currently incarcerated may choose to receive documents in their cases electronically (by e-mail) instead of by regular mail. Receiving documents by regular mail is still an option, but if you would rather receive them only electronically, you must do the following:

- 1. Sign up for a PACER login and password by contacting PACER<sup>1</sup> at www.pacer.uscourts.gov or 1-800-676-6856;
- 2. Complete and sign this form.

If you consent to receive documents electronically, you will receive a Notice of Electronic Filing by e-mail each time a document is filed in your case. After receiving the notice, you are permitted one "free look" at the document by clicking on the hyperlinked document number in the e-mail.<sup>2</sup> Once you click the hyperlink and access the document, you may not be able to access the document for free again. After 15 days, the hyperlink will no longer provide free access. Any time that the hyperlink is accessed after the first "free look" or the 15 days, you will be asked for a PACER login and may be charged to view the document. For this reason, you should print or save the document during the "free look" to avoid future charges.

## IMPORTANT NOTICE

Under Rule 5 of the Federal Rules of Civil Procedure, Local Civil Rule 5.2, and the Court's Electronic Case Filing Rules & Instructions, documents may be served by electronic means. If you register for electronic service:

- 1. You will no longer receive documents in the mail;
- 2. If you do not view and download your documents during your "free look" and within 15 days of when the court sends the e-mail notice, you will be charged for looking at the documents;
- 3. This service does not allow you to electronically file your documents;
- 4. It will be your duty to regularly review the docket sheet of the case.3

<sup>&</sup>lt;sup>1</sup> Public Access to Court Electronic Records (PACER) (<u>www.pacer.uscourts.gov</u>) is an electronic public access service that allows users to obtain case and docket information from federal appellate, district, and bankruptcy courts, and the PACER Case Locator over the internet.

 $<sup>^2</sup>$  You must review the Court's actual order, decree, or judgment and not rely on the description in the email notice alone. See ECF Rule 4.3

<sup>&</sup>lt;sup>3</sup> The docket sheet is the official record of all filings in a case. You can view the docket sheet, including images of electronically filed documents, using PACER or you can use one of the public access computers available in the Clerk's Office at the Court.

#### CONSENT TO ELECTRONIC SERVICE

I hereby consent to receive electronic service of notices and documents in my case(s) listed below. I affirm that:

- 1. I have regular access to my e-mail account and to the internet and will check regularly for Notices of Electronic Filing;
- 2. I have established a PACER account;
- 3. I understand that electronic service is service under Rule 5 of the Federal Rules of Civil Procedure and Rule 5.2 of the Local Civil Rules, and that I will no longer receive paper copies of case filings, including motions, decisions, orders, and other documents;
- 4. I will promptly notify the Court if there is any change in my personal data, such as name, address, or e-mail address, or if I wish to cancel this consent to electronic service;
- 5. I understand that I must regularly review the docket sheet of my case so that I do not miss a filing; and
- 6. I understand that this consent applies only to the cases listed below and that if I file additional cases in which I would like to receive electronic service of notices of documents, I must file consent forms for those cases.

## Civil case(s) filed in the Southern District of New York:

**Note:** This consent will apply to all cases that you have filed in this court, so please list all of your pending and terminated cases. For each case, include the case name and docket number (for example, John Doe v. New City, 10-CV-01234).

Dunaway, Michael L		
Name (Last, First, MI)		
4 Staub Court	New York	10543
Address 914-678-9215	cddunaway(	Zip Code @outlook.com
October 12, 2022	E-mail Address  (Al'Ilach, LA)	uneway
Date	Signature	U

Return completed form to:

Pro Se Intake Unit (Room 200) 500 Pearl Street New York, NY 10007