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COUNTY OF ERIE

MICHAEL A. SIRAGUSA
COUNTY ATTORNEY

MARK C. POLONCARZ
COUNTY EXECUTIVE

MICHELLE M. PARKER
FIRST ASSISTANT COUNTY ATTORNEY

JEREMY C. TOTH
SECOND ASSISTANT COUNTY ATTORNEY

DEPARTMENT OF LAW

January 25, 2012

GA

Mr. Robert M. Graber, Clerk
Erie County Legislature
92 Franklin Street, 4th Floor
Buffalo, New York 14202

Dear Mr. Graber:

In compliance with the Resolution passed by the Erie County Legislature on June 25, 1987, regarding notification of lawsuits and claims filed against the County of Erie, enclosed please find a copy of the following:

File Name:	In re Notice of Claim of Elliott Smalls
Document Received:	Notice of Claim
Name of Claimant:	Elliott Smalls
Claimant's Attorney:	Pro se

Should you have any questions, please call.

Very truly yours,

MICHAEL A. SIRAGUSA
Erie County Attorney

By: MICHELLE M. PARKER
First Assistant County Attorney

MMP/dld
Enclosure

cc: Michael A. Siragusa, Erie County Attorney

3D-5

LOSS OF PERSONAL PROPERTY AT THE ERIE COUNTY CORRECTIONAL FACILITY

NOTICE OF CLAIM

In order to file a claim for lost property, you **MUST** provide the following when you submit this form:

1. A copy of your facility issued property receipt **and** personal store receipts
2. A copy of your driver's license or other form of identification

If you do not have either the above items, please submit a written detailed explanation. Please mail or drop off this completed form and above items to:

**ERIE COUNTY DEPARTMENT OF LAW, 69 Delaware Ave., Suite 300,
Buffalo, New York 14202, Attn: Claims Department**

I. Claimant's Name Elliott Smalls

II. Address 259 Cambridge St. (Upper)
Bfla. N.Y. 14215

III. Telephone No. (716) 578-4128

IV. Date Admitted to the Correctional Facility 12/23/11

V. Date Discharged from the Correctional Facility 12/25/11

VI. Gallery Number Yankee

VII. Describe circumstances involving this claim (Attach additional sheet for explanation if needed) went for a weekend and did not receive my property until 1/03/12 and my money was missing.

VIII. Description of lost items, include date of purchase and value of each item \$200.00 Cash

IX. SUBMIT COPIES OF ALL CORRECTIONAL FACILITY PROPERTY RECEIPTS AND PERSONAL STORE RECEIPTS FOR EACH ITEM. IF RECEIPTS ARE NOT PROVIDED YOUR CLAIM CANNOT BE PROCESSED & WILL BE DENIED.

**THE ABOVE CLAIM IS TRUE TO
THE BEST OF MY KNOWLEDGE**

X Elliott Smalls
Claimant Signature

Sworn to before me this
4 day of January, 2012
Gail A. Tiedemann
Notary Public

GAIL A. TIEDEMANN
Notary Public - State of New York
No. 01TI4667366
Qualified in Erie County
My Commission Expires Jan. 31, 2015

To whom it may concern,

I serve weekends at E.C.C.F., and when I was released on 12/25/11 at 12:00 p.m. I was informed by a intake officer that the keys to the lockers provided were lost. I returned the next day to claim my property and was told the same thing. I placed several calls through out the week about the situation and received no help or information about the situation. When I went to serve the following weekend I was told the same story, but the other people who serve weekends informed me that they received their property upon release on 12/25/11. I did not receive my property until 1/03/12 after several phone calls. This situation was/is a very big inconvenience to me and the other party as well, but I would gladly and thankfully appreciate the help.

State of New York
County of Erie

Elliott Swells
Elliott Swells

Before me personally appeared
ELLIOTT S. Swells
January 4, 2012

GAILA TIEDEMANN
Notary Public - State of New York
No. 0114667366
Qualified in Erie County
My Commission Expires Jan. 31, 2015

Gaila Tiedemann

ERIE COUNTY CORRECTIONAL FACILITY PROPERTY RECEIPT

Rack Number

ROOM NUMBER: 212 Out Date: Weekends
 INMATE'S NAME: Elliott Spratts IN DATE: _____ RECEIPT NUMBER: _____

HAT	CAP	OVERCOAT	COAT	JACKET
VEST	SWEATER	PANTS	SHIRT	TIE
UNDERWEAR	SOCKS	FOOT WEAR		

EXTRAS: 1 Black NY Ball Cap, 1 lighter
1 Key, 12 loose cigarettes
100 papers
1 blister property found in locker to read

INMATE RETAINED POSSESSION OF

EYE GLASSES	CONTACT LENSES	PROSTHESIS	DENTURES	BY Sgt Green
HEARING AID	WHITE COTTON T-SHIRT	WHITE COTTON UNDER WEAR	WHITE SOCKS	GYM SHORTS
SHOES	SNEAKERS	OTHER		

I relieve the Erie County Correctional Facility of the responsibility for the safekeeping of authorized personal items which remain in my possession.

937-5571 Sgt Green X _____
Inmate's Signature

PROPERTY PLACED IN VAULT

MONEY	OTHER
\$ <u>25</u>	<u>2</u>

inmate claims there was \$800.00 in locker (none in property)

RECEIVED BY: _____
PRINT OR TYPE EMPLOYEE'S NAME

EMPLOYEE'S SIGNATURE

RETURNED BY: Kron Yelner
PRINT OR TYPE EMPLOYEE'S NAME

EMPLOYEE'S SIGNATURE

VERIFIED BY: X _____
INMATE'S SIGNATURE