

NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES
**REPORT OF SUSPECTED
CHILD ABUSE OR MALTREATMENT**

Report Date	Case ID	Call ID
Time : <input type="checkbox"/> AM <input type="checkbox"/> PM	Local Case #	Local Dist/Agency

SUBJECTS OF REPORT

Line #	Last Name	First Name	Aliases	Sex (M, F, Unk)	Birthdate or Age Mo/Day/ Yr	Race Code	Ethnicity (Ck Only If Hispanic/Latino)	Relation Code	Role Code	Lang. Code
1.	Weiner	Jordan		M	4	WH	<input type="checkbox"/>			
2.							<input type="checkbox"/>			
3.	Weiner	Anthony		M	51	WH	<input type="checkbox"/>			
4.	Abedin	Huma		F	40	WH	<input type="checkbox"/>			
5.							<input type="checkbox"/>			
6.							<input type="checkbox"/>			
7.							<input type="checkbox"/>			

MORE

List Addresses and Telephone Numbers (Using Line Numbers From Above) New York, New York	(Area Code) Telephone No.

BASIS OF SUSPICIONS

Alleged suspicions of abuse or maltreatment. Give child(ren)'s line number(s). If all children, write "ALL".

<input type="checkbox"/> DOA/Fatality	<input type="checkbox"/> Child's Drug/Alcohol Use	<input type="checkbox"/> Swelling/Dislocation/Sprains
<input type="checkbox"/> Fractures	<input type="checkbox"/> Poisoning/Noxious Substances	<input type="checkbox"/> Educational Neglect
<input type="checkbox"/> Internal Injuries (e.g., Subdural Hematoma)	<input type="checkbox"/> Choking/Twisting/Shaking	<input type="checkbox"/> Emotional Neglect
<input type="checkbox"/> Lacerations/Bruises/Welts	<input type="checkbox"/> Lack of Medical Care	<input type="checkbox"/> Inadequate Food/Clothing/Shelter
<input type="checkbox"/> Burns/Scalding	<input type="checkbox"/> Malnutrition/Failure to Thrive	<input type="checkbox"/> Lack of Supervision
<input type="checkbox"/> Excessive Corporal Punishment	<input checked="" type="checkbox"/> Sexual Abuse	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Inappropriate Isolation/Restraint (Institutional Abuse Only)	<input type="checkbox"/> Inadequate Guardianship	<input type="checkbox"/> Parent's Drug/Alcohol Misuse
<input type="checkbox"/> Inappropriate Custodial Conduct (Institutional Abuse Only)	<input type="checkbox"/> Other (specify) _____	

State reasons for suspicion, including the nature and extent of each child's injuries, abuse or maltreatment, past and present, and any evidence or suspicions of "Parental" behavior contributing to the problem. (If known, give time/date of alleged incident)

MO
DAY
YR

Time : AM PM

Additional sheet attached with more explanation. The Mandated Reporter Requests Finding of Investigation YES NO

CONFIDENTIAL

SOURCE(S) OF REPORT

CONFIDENTIAL

NAME	(Area Code) TELEPHONE	NAME	(Area Code) TELEPHONE
ADDRESS		ADDRESS	
AGENCY/INSTITUTION		AGENCY/INSTITUTION	

RELATIONSHIP

Med. Exam/Coroner Physician Hosp. Staff Law Enforcement Neighbor Relative Instit. Staff
 Social Services Public Health Mental Health School Staff Other (Specify) Concerned Citizen

For Use By Physicians Only	Medical Diagnosis on Child	Signature of Physician who examined/treated child	(Area Code) Telephone No.
	Hospitalization Required: <input type="checkbox"/> None <input type="checkbox"/> Under 1 week <input type="checkbox"/> 1-2 weeks <input type="checkbox"/> Over 2 weeks		
Actions Taken Or About To Be Taken	<input type="checkbox"/> Medical Exam <input type="checkbox"/> X-Ray	<input type="checkbox"/> Removal/Keeping <input type="checkbox"/> Not. Med Exam/Coroner	<input type="checkbox"/> Photographs <input type="checkbox"/> Hospitalization <input type="checkbox"/> Returning Home <input type="checkbox"/> Notified DA
Signature of Person Making This Report: <i>William Wong</i>	Title President, Catholic League	Date Submitted Mo. Day Yr. 8- 31-16	



CATHOLIC LEAGUE

*For Religious
and
Civil Rights*

August 31, 2016

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Dear Sir or Madam:

As president of the nation's largest Catholic civil rights organization, I am well aware of the plague of child sexual abuse that marks virtually every sector of society, including, regrettably, the Catholic Church. I am writing to express my concerns about the emotional and physical well being of Jordan Weiner, son of Anthony Weiner and Huma Abedin.

The New York City Administration for Children's Services defines child sexual abuse to include "incest, rape, obscene sexual performance, fondling a child's genitals, intercourse, sodomy, and any other contact such as exposing a child to sexual activity, or commercial sexual exploitation such as prostitution of a minor or production of pornographic materials involving a minor."

Enclosed find a front-page story in the August 31 edition of the *New York Post* on the sexual exploitation of four-year-old Jordan Weiner by his father, Anthony Weiner. On August 29, we learned that Mr. Weiner took crotch shots of himself sporting an erection with his son lying next to him in bed. That was disturbing enough, but now we know that he used his child as a "chick magnet" to allure sexual relationships.

It would appear that Mr. Weiner's sexual exploitation of his child meets the definition of child sexual abuse as defined by the Administration for Children's Services. Please investigate this matter.

Sincerely,

William A. Donohue, Ph.D.
President