

UNCLASSIFIED

FEDERAL BUREAU OF INVESTIGATION
Intake

Date: 09/09/2021

Case ID #: 50D-NY-3027571 (U) EPSTEIN, JEFFREY; CHILD SEX
TRAFFICKING

Drafted By: [REDACTED]

Date/Time Received: 09/09/2021 11:13 AM EDT

Details:

On 9/9/2021, at 10:51 AM Eastern Time, [REDACTED], date of birth [REDACTED]
[REDACTED]

submitted an online tip to the FBI National Threat Operations Center (NTOC) via tips.fbi.gov, regarding being a sex trafficking victim of Jeffrey Epstein & Ghislaine Maxwell.

Date Submitted: 09/09/2021 10:51:00 AM EST

Transaction Number: 8y6jpzxr

Violation: Other

Emergency: False

Threat To Life: False

Submitted Text:

In 1994 [REDACTED] met Ghislaine Maxwell [REDACTED]. She introduced me to Jeffrey Epstein. I became involved with them for a period of a few years. They befriended me and ultimately directly raped/assaulted me in at least three locations. They subsequently trafficked me into prostitution. I also traveled with them, or on their behalf to [REDACTED] and [REDACTED].

Violation Questions

What was the exact crime that occurred?: Rape, Trafficking

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Re: 50D-NY-3027571, 09/09/2021

When did the crime/incident occur? (Please provide an approximate date and time): Approx 1994-1997

Where did the crime/incident occur? (Please provide the specific location/address if possible): [REDACTED], [REDACTED], [REDACTED].

Subject Information

First Name: Ghislaine

Middle Name:

Last Name: Maxwell

DOB:

Age: 59

Type: Other

Address: MDC 80 29th St.

City: Brooklyn

State: NY

Zip: 11232

Additional Info: I submitted a claim to the Epstein Victims Compensation Fund earlier this year.

How is Contact Known: Former "friend"

Witness Information

First Name: [REDACTED]

Middle Name:

Last Name: [REDACTED]

DOB:

Age: [REDACTED]

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Re: 50D-NY-3027571, 09/09/2021

Phone Type: Cell

International: False

Phone Number: [REDACTED]

Phone Ext:

Type: Residential

Address: [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Additional Info: I don't think Maxwell has social media accounts at this point. Epstein is deceased.

How is Contact Known: I am the witness

Complainant Information

First Name: [REDACTED]

Middle Name:

Last Name: [REDACTED]

DOB: [REDACTED]

Phone Type: Cell

International: False

Phone Number: [REDACTED]

Phone Ext:

Email: [REDACTED]

Type: Residential

Address: [REDACTED]

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Re: 50D-NY-3027571, 09/09/2021

City: [REDACTED]

[REDACTED]

[REDACTED]

Additional Info:

IP Address: [REDACTED]

Remote Host: api.fbi.gov

Http Referrer: https://tips.fbi.gov/

User Agent: Mozilla/5.0 (Linux; Android 10; SM-A205G) AppleWebKit/537.36 (KHTML, like Gecko)

Chrome/92.0.4515.166 Mobile Safari/537.36

Latitude: [REDACTED]

[REDACTED]

Country: US

Region: [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

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