

June 1, 2008

Hon. Jan Plumadore

Hon. Justice Pfau

State Commission on Judicial Conduct

Re: *Despicable corrupt acts of Judge Kevin Ryan*

Hon. Justice Plumadore, Hon. Justice Pfau, State Commission on Judicial Conduct:

I'm begging each of you to take immediate action against Judge Ryan. You have previously been informed of his Kangaroo Court. This newer action is even more repugnant.

Ryan writes "***He was seen leaving the parking lot in an ambulance,***" and then Ryan **lies** by saying, "***The court received no further communication on the defendant's behalf that day.***"

Each of you has a duty under the law to act against Judge Ryan. Ethically you have no choice, but to act against Ryan.

Sincerely yours,

Terence Finnan  
P0 Box 354  
Keene NY 12942  
518-576-9734

June 1, 2008

Hon. Jan Plumadore, Albany NY     Hon. Justice Pfau  
State Commission on Judicial Conduct  
Judge Ryan, Plattsburgh NY 12901

Re: *Finnan v Finnan* Ryan's decision dated 5/28/8    BY FAX and mail

Hon. Justice Plumadore, Hon. Justice Pfau, State Commission on Judicial Conduct and Judge Ryan:

This letter requests the above justices to take the action required of them. This is also complaint to the Commission on Judicial Conduct. Judge Ryan can correct his decisions.

Page 2 of Ryan's attached decision says, "*He was seen leaving the parking lot in an ambulance,*" Then **Ryan falsely says**, "*The court received no further communication on the defendant's behalf that day.*" On that day between 10:30 and 11:30, the emergency room nurse called the Plattsburgh Supreme Court Clerk. When the clerk answered, the emergency nurse told the clerk that I was just admitted to the hospital and gave me the phone to confirm my name/case.

Terence Finnan also made recorded phone calls to the Judge's Chambers to ask about the case after his release on April 11, 2008 from the hospital, but was hung up on the first time and finally told to call the Essex Court Clerk for information. The court clerk said the case was rescheduled for 4/25/8.

Judge Ryan falsely states in his 5/12/8 letter delaying the cross motion that "*assuming you served Mr. Asadourian by mail*", when Judge Ryan was told by Mr. Asadourian that he had personally received it on 5/9/8. There was no opposition to the cross motion(attached).

Page 3 of Ryan's decision says, "*fundamental question of whether the defendant was capable of being at the trial and simply choose not to attend.*" Nothing in the attached letter of 5/4/8 was denied or opposed by the Plaintiff, so there is no fundamental question. Note that the implantation of a defibrillator has been delayed by Marsha Finnan.

On 5/29/2008, the attached records certified by the Hospital were sent to Judge Ryan by the Hospital and show emergency admission on 4/10/8 and release on 4/11/8 (certification was unavailable earlier because records were still in their departments). Judge Ryan knows from Exhibit A of one of the frauds involving separate property at the hearing on 4/10/8. Judge Ryan knows from testimony and the admissions by Marsha Finnan of my severe heart/stroke problems.

The next step is up to Judge Ryan.

Sincerely yours,

Terence Finnan  
P0 Box 354 Keene NY 12942 518-576-9734

CC: Ara Asadourian

At a term of the Supreme Court of the State of New York, held in and for the County of Essex, at the Essex County Courthouse in the Town of Elizabethtown, on the 22<sup>nd</sup> day of May, 2008.

P R E S E N T: HONORABLE KEVIN K. RYAN  
Acting Justice, Supreme Court

STATE OF NEW YORK  
SUPREME COURT                      COUNTY OF ESSEX

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MARSHA FINNAN,

Plaintiff,

-against-

TERENCE FINNAN,

Defendant.

DECISION AND ORDER  
Index No. 403-03  
RJI #15-1-2003-0167

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APPEARANCES: ARA ASADOURIAN, Esq., Attorney for the  
Plaintiff  
TERENCE FINNAN, Defendant, *pro se*

RYAN, A.J.:

Pending before the Court is the defendant's motion for a new trial date for the issue of equitable distribution. The Court has already issued a decision and order on the trial in which it addressed the issue of the defendant's requests prior to the trial for an adjournment of the trial date. With regards to this motion, the Court has reviewed and considered the following: the defendant's notice of motion, filed May 9, 2008, and affidavit in support of motion, and the letter response of plaintiff's counsel, dated May 12, 2008.

Since the Court has extensively reviewed the factual history of this case and the defendant's pre-trial request for an adjournment in its Decision and Order, it will not restate them here. Suffice it to say that the defendant, in the week prior to the date set for the equitable distribution trial, requested an adjournment for unspecified medical reasons and, when the Court required additional verification of the medical reason for the request, the defendant refused to provide any further information. The request was denied.

On the date of the equitable distribution trial, the defendant came to the Clinton County Government Center, the place of the trial, in timely manner, but left shortly afterwards, before the trial began. He was seen leaving the parking lot in an ambulance. The Court received no further communication on the defendant's behalf that day and, for reasons set forth in its decision and order on the equitable distribution part of this case, the Court found the defendant in default and proceeded with the trial.

Now, approximately one month after the equitable distribution trial, the defendant moves for a new trial on the grounds that he was at the hospital on April 10 and 11, 2008. As the Court has already issued its decision on the issue of equitable distribution, the Court has *de facto* denied this request.

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trial and simply choose not to attend.

In cases where a party claims a medical reason in support of a request for an adjournment, it is incumbent upon that party to provide the Court with facts sufficient to support the request (*Levine v. Levine*, 19 AD3d 374 (2<sup>nd</sup> Dept. 2005), on subsequent appeal 37 AD3d 550 (2<sup>nd</sup> Dept. 2007), leave to appeal dismissed 8 NY3d 1003 (2007)). The defendant has failed to provide the Court with sufficient facts to support his request.

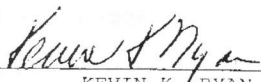
In *Gramma v. Gramma* (161 AD2d 899 (3<sup>rd</sup> Dept. 1990)), a matrimonial case, a request for an adjournment was made on the eve of trial by the plaintiff on the ground she was ill. The motion was denied. On appeal, the general rule was noted that the "decision to grant an adjournment rests solely within the trial's court's discretion" (*Supra* at 899). In *Gramma*, the plaintiff had at least provided the Court with an unsworn statement from her doctor *prior* to the trial claiming she was unable to go through with the trial. Here, the defendant has provided unsworn, general statements one month *after* the trial stating the same thing. However, there is no clear statement in the materials provided by the defendant that he was unable to attend Court on April 10 and 11 due to some medical condition.

Since the defendant has failed to provide sufficient

information in support of his request for a new trial, the motion is DENIED in its entirety.

IT IS ALL SO ORDERED.

ENTER:

  
\_\_\_\_\_  
KEVIN K. RYAN  
Acting Justice, Supreme Court

Dated: Plattsburgh, New York  
May 28, 2008

STATE OF NEW YORK COUNTY OF ESSEX SUPREME COURT

MARSHA FINNAN, PLAINTIFF

-AGAINST-

TERENCE FINNAN, DEFENDANT Index No. 403-03

RJI No. 15-1-2003-0167

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NOTICE OF Cross MOTION

Please Take Notice:

The defendant, Terence Finnan, upon his annexed Affidavit, sworn to on May 9, 2008 and the prior letter to Judge Ryan dated May 4, 2008 and all the papers and proceedings heretofore, will make a cross motion before Hon. Justice Ryan in the Supreme Court in Essex County, returnable on May 12, 2008 at 9:30 A.M. o'clock in the forenoon of that day or as soon thereafter as counsel can be heard for an order rescheduling the court matter heard on April 10, 2008, for another date.

DATED: May 9, 2008

Sincerely yours,

/s/

Terence Finnan, Pro Se

114 Hurricane Rd. PO Box 354 Keene, NY12942 518-576-9734

TO: Ara Asadourian, ESQ.

Attorney for Plaintiff

Plattsburgh, NY 12901

\*\*\*\*\*

State of New York, County of Essex ss:

Terence Finnan, being duly sworn, deposes and says:

1. It was impossible for me to be in court on April 10, 2008 at any time while the court was in session and until the hearing ended at 12:35. The court calendar set the date for trial as April 25, 2008.

2. The court has received the attached letter and the court has responded by asking for a motion.

3. The attached letter is herewith sworn to be true in its entirety.

4. The plaintiff presented extensive perjury and fraud as partially described in papers before the court at this time.

5. The plaintiff has admitted in this action that I was a candidate for a heart transplant.

**Wherefore**, the Defendant asks that the court reschedule the matter heard on April 10, 2008, for another date.

/s/

Terence Finnan

Sworn to before me this 9<sup>th</sup> day of May 2008 by Terence Finnan who acknowledges that he is the Defendant in the above-mentioned action and that he swore the contents of this affidavit are true under the penalty of perjury under the Laws of the State of New York

/s/

Notary



May 4, 2008

Hon. Jan Plumadore, Adm. Judge, Albany NY  
Judge Ryan Plattsburgh NY 12901

Re: *Finnan v Finnan* on 4/10/2008 and my hospitalization on April 10, 2008 BY FAX and mail

Hon. Justices Plumadore and Ryan:

I obtained on April 30, 2008, the attached Court Minutes from the Essex County Clerk. These minutes concern a court action on April 10, 2008 in *Finnan v Finnan*. On that date, I was unable to be present, because I was taken from the courthouse by ambulance at 0953 AM (Ambulance Report attached) and admitted to CVPH hospital emergency room at 1003 AM (Ambulance Report) and was receiving Nitrol and oxygen at 1010 AM under the order of Dr. Runge (Hospital Report attached). At 1125AM, I was hospitalized in the Chest Pain/Cardiac Unit at CVPH. A Myocardial SPECT Test (attached) was scheduled while I was hospitalized for the next morning AM on 4/11/2008. Dr. Runge did not release me from the hospital until April 11, 2008.

**It was impossible for me to be in court on April 10, 2008 at any time while the court was in session and until the hearing ended at 12:35. The court calendar set the date for trial as April 25, 2008**

My cardiac and stroke problems have been aggravated by the interference of Marsha Finnan with my health insurance. This has prevented me from receiving the implantation of an automated defibrillator by Dr. Siouffi which was scheduled for February of this year (see attached medical history), but delayed into May because of said interference by Marsha.

I make the court aware that:

1. Marsha Finnan has admitted in this action that I was a candidate for a heart transplant.
2. I met the criteria (attached Medical History) for a defibrillator with a Left Ventricle Injection Fraction of 45%, but the Myocardial SPECT test (attached; done at CVPH on 4/11/8)) showed a substantial drop in LVEF to 30%. An LVEF falling to 30% is a sign of greatly reduced cardiac function and a high risk of death.
3. Terence Finnan has also continuing vision problems preventing reading this month which were diagnosed on 5/1/2008 by Dr. Shaw at Eye Care for the Adirondacks as caused by clots in the brain, i.e., TIAs and stroke. These clots are generated by the reduced LVEF.

**I authorize the court to confirm with Dr. Runge and Dr. Shaw the above information.**

I went to court on April 25, 2008 for the scheduled Trial appearance shown in the attached court schedule from the Unified Courts' Web site, but the clerk said there was no trial that day. As described separately, Marsha Finnan never inherited any amount near \$800,000 and almost all her other claims are frauds and I have the records (checks, statements, affidavits, applications and tax filings) to prove it.

**Please reschedule the court matter heard on April 10, 2008, for another date.**

Sincerely yours,

Terence Finnan

P0 Box 354 Keene NY 12942 518-576-9734

CC: Ara Asadourian; Chief Judge, Hon. Kaye; Chief Administrative Judge, Hon. Ann Pfau

DATE	TIME	COURT MINUTES
	12:28	<p>Court marks Court's Exh 1 - letter 4/4 addressed to Caruso re Mr Finnan seeking rescheduling of this proceeding b/c of alleged hosp stay. Court's Exh 2 - KKR ltr of 4/7 respnd'g to req and asked for confirmation of any medical appnts or hosp stays etc. Court's Exh 3 - response by Mr Finnan 4/8 Court's Exh 4 - KKR response and direction that w/o any confirmation of any hosp stay, Court expected him to be present on 4/10 at 9:30 Court's Exh 5 - faxed ltr f/ Mr Finnan to Caruso and KKR</p> <p>Ct repeats that Mr Finn was present yesterday prior to start of trial, left floor, he did not seek assistance f/ court staff, was taken via ambulance to hosp, ct has heard nothing further on this matter and absent any submission on this matter court considers Mr Finnan in default.</p> <p>One week for Asadourian to submit amended proposed disposition.</p>
	12:34	
	12:35	End

## Court minutes

44008 RUN 760 5-0634503 AGR 90Y EMS 93

ADDRESS OF CALL: 51 Court Ballant

LOCATION CODE: 0901 TOTTARO

MILEAGE: CALL REC'D 0947, ENROUTE 0949, AT SCENE 0953, FROM SCENE 1000, AT DESTINATION 1003, IN SERVICE 1023, IN QUARTERS

APPT/UNIT NUMBER: (PHO)NE -

PHYSICIAN: DR. H. B. B. 359 Aurdick Rd.

MECHANISM OF INJURY: None

CHIEF COMPLAINT: Chest pain

SUBJECTIVE ASSESSMENT: on own arrival pt. sitting on park bench - complaining of chest started while driving a car - rates 3/10 (C.P. for 45 minutes) JVD, Ridel & down, lungs

PAST MEDICAL HISTORY: Stroke, Diabetes, COPD, Asthma, Meds ??

VITALS	TIME	RESP	PULSE	B.P.	LEVEL OF CONSCIOUSNESS	GCS	R	PUPILS	L	SKIN	STATUS
	1000	Rate: 22	Rate: 72	160	Alert	15		Normal Dilated		Unremarkable	C
		Rate: 22	Rate: 72	80	Alert			Normal Dilated		Unremarkable	C
		Rate: 22	Rate: 72		Alert			Normal Dilated		Unremarkable	C

OBJECTIVE PHYSICAL ASSESSMENT: clear, (A) cardiac (P) O2, Monitor, TV, meds, not observed

COMMENTS: pt given 4 baby aspirin, and nitro with relief pain now 2/10 Had irregular heart, that kept hiccup all night - pulse regular now

TREATMENT GIVEN: Medication Administered (Use Continuation Form) IV Established Fluid 5L Cath Gauge 18

DISPOSITION: ED

IN CHARGE: R. Williams DRIVERS NAME: K. Frus NAME: M. Stolars

EMT # 049625 CFR # 317543 EMT # 300294

Ambulance Report -times are in upper right corner

96 Physician Order Sheet

ATP for \_\_\_\_\_  
completed at: \_\_\_\_\_ Initials \_\_\_\_\_

LABS "circle"	TIME	STANDARD PANELS "tabs only"
• ABC		• Cardiac Panel <i>4/7 TIME</i>
• CBC		• Trauma Panel
• CMP		• CSF protocol
• BMP		• Hepatic function Panel
• HCG		• X-RAYS / IMPLICATIONS TIME
• PT		• CXR Full PA/LAT <i>4/7</i>
• PTT		• Ultrasound
• D-dimer		pelvic abdominal
• ESR		RUQ renal
• Strep Screen		• Venous doppler
• Throat Culture		of _____
• Mono spot		• KUB flat upright
• Lipase		
• UA clean cath		• CT
• Urine culture		head C-spine abdomen
• Urine Drug Screen		pelvis chest angiogram
• Ethanol level		with or w/o contrast
• Wound culture:		• Trauma portables:
site _____		Lateral C-spine / AP CXR /
• Blood culture x _____		AP pelvis
• Sputum culture		• Full C-Spine
• Stool culture		3 view 5 view
• C. diff toxin		• Acute Abd Series
• Stool WBCs		
• Stool Ova and Para		• V/Q Scan
• GC/Chlamydia antigen		
• Drug levels: <i>Asx</i>		CARDIORESPIRATORY
• Carboxyhemoglobin		• EKG <i>4/7</i>
• Type and Screen		• ABG RA L O2 <i>4/7</i>
• Type & Cross		
for _____ units		

Initial Nursing Orders

<input checked="" type="checkbox"/> Cardiac Monitor	Noted
<input checked="" type="checkbox"/> Pulse Oximeter	
<input checked="" type="checkbox"/> Oxygen @ L NC	
titrate to keep sat greater than 95%	
<input type="checkbox"/> Fully Disrobe / Gown	
<input type="checkbox"/> Orthostatic vital signs	
<input type="checkbox"/> Neuro checks q _____	
<input type="checkbox"/> IV @ _____ mL/hr	
<input type="checkbox"/> IV Bolus _____ mL over _____	
<input type="checkbox"/> Saline lock	
<input type="checkbox"/> Albuterol 2.5 mg / Nebulizer	
Continuous for _____ min	
q _____ min x _____	
<input type="checkbox"/> Atrovent 0.5 mg / Nebulizer	
<input type="checkbox"/> Pain medications	
Acetaminophen _____ mg PO PR	
Ibuprofen _____ mg PO PR	
Morphine _____ mg IV q _____	
min pm pain greater than _____/10,	
sbp greater than _____	
Demerol _____ mg IV q _____	
min pm pain greater than _____/10,	
sbp greater than _____	
<input type="checkbox"/> Antiemetic	
Phenergan _____ mg _____	
<input type="checkbox"/> Reglan _____ mg _____	
<input type="checkbox"/> Follow Schedule A for Insulin Coverage	

Subsequent Orders

Time	Orders	Noted
	<input type="checkbox"/> Please repeat: BP HR RR O <sub>2</sub> Sat Temp _____	
	<input type="checkbox"/> May be off cardiac monitor for radiology studies or transport	
	<input type="checkbox"/> Admit to observation status for _____	
10:25	- 81 by ASA x 2 chenal v	
	- 1" NTG prate	
	- 5" IV Cefazolin 1g	
	x 3 ID SBP 75/55, HR 75	

PHYSICIAN SIGNATURES

1 \_\_\_\_\_  
2 \_\_\_\_\_

PLEASE CALL DOCTOR  
Time Ordered \_\_\_\_\_ Doctor \_\_\_\_\_ Returned Call \_\_\_\_\_

© 1996 - 2006 T-System, Inc. Circle or check affirmatives, backlash (i) negatives.  
CVPH Medical Center  
Plattsburgh, NY  
EMERGENCY PHYSICIAN RECORD

FINNAN, TERENCE L  
134873  
84/18/08  
64 Y 18/18/1943  
MR (518)576-9734 H



Doctor's Order Sheet on 4/10/2008 at 1025 AM  
note : oxygen already ordered 1010 AM

Unofficial Copy -- Page 2 of 4  
FINNAN, TERENCE L 13-48-73

3. Digoxin 0.125 mg p.o. daily.
4. Lipitor 20 mg p.o. daily.

**PAST MEDICAL HISTORY**

1. Hypertension.
2. Hyperlipidemia.
3. Coronary artery disease, see details above. The patient reported also has cardiomyopathy and was scheduled to see Dr. Siouffi May 9<sup>th</sup> of this year apparently to discuss implantation of automated defibrillator, as apparently he may meet criteria for that at this time (it was noted after the patient's eval, that he had an ECHO @ LCCA that showed LVEF = 45%).
4. History of CVA.
5. Denies diabetes mellitus.
6. History of basal cell carcinoma of the face.
7. Anxiety.
8. ? h/o atrial fibrillation? - pt anti-coagulated and on digoxin.
9. Status post appendectomy, remote.

**SOCIAL HISTORY:** The patient lives in alone in Keene, New York. He usually drinks 1 to 2 glasses of wine per day. He does not smoke currently. He is a retired economist.

**FAMILY HISTORY:** No primary relatives with premature coronary artery disease.

**OBJECTIVE:** Vitals on arrival to the ED include a BP of 158/90, respirations 18, heart rate is 76. O<sub>2</sub> sat 100% on room air. Temperature 97.2 orally. Current vital signs: BP 123/73, respirations 16, heart rate of 60, O<sub>2</sub> sat 94% on room air. Temperature is afebrile.

**General:** This is a tall, average build, early senior male that is alert and oriented to person, place, and time in no apparent distress. He exhibits pressured speech. He has a tic, very anxious demeanor. He is cooperative and otherwise pleasant.

**Skin:** Innumerable solar keratoses on the face in usual exposed areas including hands and arms. No jaundice, cyanosis or excessive pallor.

**HEENT:** Oral cavity: Secretions adequate.

**Neck:** No JVD.

**Lungs:** Resonant on percussion on posterior exam bilaterally. Auscultation with clear breath sounds. No wheezes, rhonchi, rales, or rub.

**Heart:** Rhythm is regular. No S3 or S4. I am appreciating a holosystolic crescendo/decrecendo murmur along the right sternal border. I would estimate this as a 3/6 in severity murmur.

**Extremities:** No peripheral edema.

**Abdomen:** Flat, soft and nontender. No mass. Bowel sounds present. I am not appreciating any bruit in the periumbilical region on auscultation.

**EKG:** Normal sinus rhythm, borderline first-degree AV block, at least one EKG obtained in cardiology shows the patient in first degree AV block. He has Q waves in leads V1 through V4 suggesting anterior or anteroseptal infarct. His EKG does not look significantly changed versus comparison EKG provided.

---

**Medical History -see Dr. Siouffi on May 9<sup>th</sup>;  
earlier LVEF was 45%.**

RADIOLOGY RESULT DOCUMENT  
CVPH MEDICAL CENTER  
PLATTSBURGH, NY 12901

PATIENT NAME: FINNAN, TERENCE L  
MEDICAL RECORD# 134873

RMS ORDER NUMBER: 90008  
ORDERED FOR DATE: Apr 11 2008

ACCOUNT #: 87404737      FINANCIAL CLASS:  
ADMISSION DATE: 04/10/2008      INPATIENT ROOM:  
INVISION ORD #:      DATE OF BIRTH: 10/10/1943      ORD NURSE STATION: OU  
PATIENT AGE: 64Y      PATIENT SEX: M      PATIENT CLASS: E  
ORDERING PHYSICIAN: RUNGE TIMOTHY      PT ADDRESS PO BOX 354      PATIENT PHONE: (518) 576-9734  
ATTENDING PHYSICIAN: RUNGE, TIMOTHY      KEENE, NY 12942  
PCP/FAM PHYSICIAN: DEMURO, ROB

\*\*\*Final Report\*\*\*

ADDITIONAL EXAMS ORDERED:  
4341 - MYOCARDIAL SPECT W/WM

AND EF

EXAM: (NUC 4341) MYOCARDIAL SPECT W/WM AND EF      CDM# 19932102  
DATE & TIME EXAM COMPLETED: Apr 11 2008 9:41AM      CPT: 78465  
REASON FOR EXAM: CHEST PAIN      Accession #: 1864007

**FINDINGS:** 12.99 mCi of Tc99m Myoview were injected IV and resting SPECT images are obtained. Subsequently, the patient exercised on the treadmill 2 minutes, 20 seconds into Stage II of the Bruce protocol. Maximum heart rate reached is 135 bpm. 87% of maximum age predicted heart rate was reached. 27.6 mCi of Tc99m Myoview were injected at peak exercise. Post-exercise SPECT images and gated images are obtained.

On gated images all visualized walls about the left ventricle appear hypokinetic. The apex is not well seen due to a lack of activity in the apex. The ejection fraction of the left ventricle appears diminished and calculated at 30% although visually it appears somewhat less. There is marked transmural diminished activity at the apex and involving a portion of adjacent anterior wall present on both rest and post stress images consistent with previous transmural MI. To a somewhat lesser degree there is diminished activity at the inferior wall and involving a small region of septum towards the base consistent with previous MI as well. No reversible defect noted to suggest ischemia.

**IMPRESSION:** No changes of ischemia. Findings consistent with a large transmural prior MI at the apex and adjacent portion of anterior wall. Findings consistent with prior nontransmural MI at the inferior wall and probably in a small portion of the septum toward the base.

Read By: DAVID HAMMACK, M.D.  
Transcribed By: BAD

Dictated Date: Apr 11 2008 10:27AM  
Transcribed Date: Apr 11 2008 10:46AM

Page 1 of 2



**Myocardial Test - note: the hospital admit date was 4/10/2008 and this test was on 4/11/2008 - this test shows LVEF falling to 30%**



New York State Unified Court System

COURTS

Court: Essex Civil Supreme  
Index Number: 000403/2003  
Case Name: FINNAN MARSHA A. vs. FINNAN TERENCE  
Case Type: Contested Matrimonial  
Track: Standard

Appearance Information:

Appearance Date	Time	On For	Appearance Outcome	Justice / Part	Comments	Motion Seq
04/25/2008	09:30 AM	Trial Set For	Trial Set For	HON. KEVIN K. RYAN, J.C.C. RYAN, J.C.C. (Trial Part)		

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**Court Calendar - showing Trial set for 4/25/2008 - Calendar obtained from Unified Courts on 4/24/2008 at 5:18 PM**