

BRADLEY D. BILLHIMER
Ocean County Prosecutor

JOSEPH F. MITCHELL
Chief of Detectives



MICHAEL T. NOLAN, JR.
First Assistant Prosecutor

ROBERT J. ARMSTRONG
Deputy First Assistant Prosecutor

OFFICE OF THE PROSECUTOR

Courthouse Annex Building
119 Hooper Avenue
P.O. Box 2191
Toms River, New Jersey 08754-2191
732-929-2027

May 25, 2021

Via OPRA Machine: opra+request-23293-3f8cc9f4@requests.opramachine.com

Re: Open Public Records Act (OPRA) Request
OCPO Case# 20001094 – Candace Haynes

Dear Sir/Madam:

Enclosed please find the Global Subject Activity Report, Complaint Summons, Affidavit and Preliminary Law Enforcement Incident Report pursuant to your request made under the New Jersey Open Public Records Act (OPRA). Personal identifying information has been redacted pursuant to N.J.S.A. 47:1A-1.1, et seq.

Please be advised that there are no responsive documents pursuant to your request for Arrest Reports, Indictments, Criminal Information Forms, Plea Forms and Sentencing Information.

If I can be of further assistance, please do not hesitate to contact me directly at 732-929-2027, x3135.

Yours very truly,

Dina R. Khajezadeh

Dina R. Khajezadeh
Assistant Prosecutor

DRK/dp

Enclosures

Prestia , Donna

From: Khajezadeh, Dina
Sent: Friday, May 21, 2021 9:33 AM
To: Prestia , Donna
Subject: FW: OPRA request - Case reports

-----Original Message-----

From: Resident <opra+request-23293-3f8cc9f4@requests.opramachine.com>
Sent: Thursday, May 20, 2021 4:03 PM
To: Khajezadeh, Dina <DKhajezadeh@co.ocean.nj.us>
Subject: OPRA request - Case reports

Dear Ocean County Prosecutor's Office,

This is a request for public records made under OPRA and the common law right of access. I am not required to fill out an official form. Please acknowledge receipt of this message.

Records requested:

Any relevant arrest reports, global subject activity reports, preliminary law enforcement incident reports, complaint warrants, complaint summonses, affidavits, indictments, criminal information forms, plea forms, and sentencing information, where applicable, for the following defendants:

Judith Santamarina (Case # 20000911)
Christop Kraus (Case # 20000986)
Candace Haynes (Case # 20001094) ✓
Brittany Rodriguez (Case # 20001107)
Kraig Sorensen (Case # 20001161)
Mordecha Grubin (Case # 20001209)

Yours sincerely,

Resident

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-23293-3f8cc9f4@requests.opramachine.com

Is DKhajezadeh@co.ocean.nj.us the wrong address for OPRA requests to Ocean County Prosecutor's Office? If so, please contact us using this form:

https://linkprotect.cudasvc.com/url?a=https%3a%2f%2fopramachine.com%2fchange_request%2fnew%3fbody%3docean_county_prosecutors_office&c=E,1,bN9mRa04vJNN5jXFL1LrLZAEfabLz-P9q6-uo5EcSi-Nks3GUDzfsr9ZEv03-O4N3BO5g9o8LxWISaNcfns-APRqz1S_d56q-GV_FloFWQ,,&typo=1

Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:



Global Subject Activity Report



Detail

Print Date/Time: 04/15/2020 12:43

Login ID: jsisco

Brick Township Police Department

ORI Number: NJ0150600

Haynes, Candace Marie

Jacket: 153129 A

SSN:

Address: 299 SAWMILL RD

Sex: Female

BRICK
TOWNSHIP
NJ 08724

Height: 5ft 3in

Phone #: [REDACTED]

Weight: 170.0 lbs.

DOB: 10/22/1981

Eyes: Black

Race: Black

Hair: Brown

DL State: NJ

DL#: [REDACTED]

Physical Characteristics:

Appearance: Normal
Hair Style: Wavy / Curly
Hair Length: Longer
Facial Shape: Oval
Complexion: Medium
Build: Medium
Glasses: No
Teeth: Normal
Speech: Normal
Voice: Medium Pitch

Country/State of Birth: US/New Jersey
City of Birth: Long Branch
County of Origin: Monmouth
Ethnicity: Non Hispanic
Citizenship: US
Tribe: Not Applicable
Hate Group: Not Applicable
Military Service: Not Applicable
Military Discharge:
School: High School - Completed 10

Age Range: 38
Hand Preference: Right
Place of Birth:
Occupation: Employed
of Dependents: 3
Primary Language: English
Second Language: English
Gang Affiliation: Not Applicable
Marital Status: Single
Blood Type: Unknown

Mustache: None

Beard: None

Religion: Christian

DNA Collected: No

DNA Collected Date:

Illegal Alien: No

Known Offender:

County of Conviction:

State Of Conviction:

Wants and Warrants

Identifying Clothing:

Assaultive

Modus Operandi

Crime Specialities

Aliases

Type	Alias	DOB	Race	Sex	SSN	Hair	Eyes	DL#	Height	Weight	Phone
AKA	HAYNES, CANDACE M	10/22/1981	Black	Female		Brown	Black	[REDACTED]	5ft 3in	170.0 lbs.	[REDACTED]
AKA	Haynes, Candace Marie	10/22/1981	Black	Female		Black	Brown	[REDACTED]	5ft 3in	170.0 lbs.	[REDACTED]

Nicknames

Entered Date/Time	Nickname Type	Nickname
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Associated IDs

Issue Date	ID Type	Number	Issuing State	Start Date	Expire Date
	Drivers License	[REDACTED]	NJ		

Known Associates

Relationship	Name
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School/Employer Information

Relationship	School/Employer Name	Phone Type	Phone
Employer Business	Better At Home Care	Business	[REDACTED]

Scars, Marks, Tattoos

Type	Location	Scar, Mark or Tattoo Detail	Description
Tattoo	TAT CHEST	Word	Naya, Zyqier, Kyhein
Tattoo	TAT CHIN	Word	Nick



Global Subject Activity Report



Detail

Print Date/Time: 04/15/2020 12:43

Login ID: jsisco

Brick Township Police Department

ORI Number: NJ0150600

Handicap Information

Handicap

Current Address Information

Address Type	Address	City	State	Zip
Home	299 SAWMILL RD	BRICK TOWNSHIP	NJ	08724

Prior Address Information

Address Type	Address	City	State	Zip	From Date	To Date
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Contact Information

Date	Type	Phone	Extension
04/14/2020 20:58	Cell	[REDACTED]	
02/24/2020 07:28	Cell	[REDACTED]	

Vehicle Information

Vehicle #	Role	Contact Date	Vehicle Type	Make	Model	Vehicle Year	Registration Number	State
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Global Subject Activity Report



Detail

Print Date/Time: 04/15/2020 12:43

Login ID: jsisco

Activity

Brick Township Police Department

ORI Number: NJ0150600

Type : Arrest

Date	Activity Reference	Description	ORI
04/14/2020 21:50	52566	Arrest Type: Probable Cause Charge(s): 2C:12-1b(2),Aggravated Assault - Purposely or knowingly causes bodily injury to another with a deadly weapon 2C:39-4d,Possession of a Weapon for Unlawful Purpose 2C:39-5D,Possession of Other Weapons	NJ0150600

Type : Booking

Date	Activity Reference	Description	ORI
04/14/2020 20:47	2020-00000340	Booking Charge(s): 2C:12-1b(2),Aggravated Assault - Purposely or knowingly causes bodily injury to another with a deadly weapon 2C:39-4d,Possession of a Weapon for Unlawful Purpose 2C:39-5D,Possession of Other Weapons	NJ0150600

Type : Case

Date	Activity Reference	Description	ORI
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
04/12/2020 02:33	2020-00021974	Subject Type: Suspect, Incident Type: Assault - Aggravated Charge(s): 2C:12-1b(2),Aggravated Assault - Purposely or knowingly causes bodily injury to another with a deadly weapon 2C:39-4d,Possession of a Weapon for Unlawful Purpose 2C:39-5D,Possession of Other Weapons	NJ0150600

Total Activity : [REDACTED]

COMPLAINT - SUMMONS

COMPLAINT NUMBER			
1506	S	2020	000263
COURT CODE	PREFIX	YEAR	SEQUENCE NO.
BRICK TOWNSHIP MUNICIPAL COURT 401 CHAMBERS BRIDGE BRICK NJ 08723-0000 732-262-1226 COUNTY OF: OCEAN			
# of CHARGES 3	CO-DEFTS 0	POLICE CASE #: 21974-20	DEFENDANT INFORMATION SEX: F EYE COLOR: BROWN DOB: 10/22/1981 DRIVER'S LIC. #. [REDACTED] DL STATE: NJ SOCIAL SECURITY #: [REDACTED] SBI #: 727498C TELEPHONE #: [REDACTED] (c) LIVSCAN PCN #: 150603006181
COMPLAINANT NAME: BRIAN FARNKOPF DET. 401 CHAMBERS BRIDGE RD ATTN WARRANTS BRICK TOWN NJ 08723			ADDRESS: 299 SAWMILL RD BRICK TWP NJ 08724-0000

By certification or on oath, the complainant says that to the best of his/her knowledge, information and belief the named defendant on or about 04/12/2020 in BRICK TWP, OCEAN County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, COMMIT AGGRAVATED ASSAULT BY PURPOSELY OR KNOWINGLY CAUSE BODILY INJURY TO L.B BY USE OF A DEADLY WEAPON, SPECIFICALLY BY STABBING VICTIM IN THE NECK WITH A SHARP OBJECT BELIEVED TO BE A KNIFE.

WITHIN THE JURISDICTION OF THIS COURT, KNOWINGLY POSSESS A SHARP OBJECT BELIEVED TO BE A KNIFE WITH THE PURPOSE TO USE IT UNLAWFULLY AGAINST THE PERSON OR PROPERTY OF ANOTHER, SPECIFICALLY BY, STABBING L.B IN THE NECK CAUSING A MUSCLE LACERATION.

WITHIN THE JURISDICTION OF THIS COURT, KNOWINGLY POSSESS A SHARP OBJECT BELIEVED TO BE A KNIFE, UNDER CIRCUMSTANCES NOT MANIFESTLY APPROPRIATE FOR LAWFUL USE, SPECIFICALLY BY USING THE SHARP OBJECT BELIEVED TO BE A KNIFE AND STABBING L.B IN THE NECK.

in violation of:

Original Charge	1) 2C:12-1B(2)	2) 2C:39-4D	3) 2C:39-5D
Amended Charge			

CERTIFICATION:

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Signed: BRIAN FARNKOPF DET. Date: 04/14/2020

The complaining witness is a law enforcement officer and a judicial probable cause determination is not required prior to the issuance of this Complaint-Summons.

SUMMONS

YOU ARE HEREBY SUMMONED to appear before the Superior Court in the county of: OCEAN

at the following address: OCEAN SUPERIOR COURT

120 HOOPER AVE

TOMS RIVER

NJ 08753-0000

If you fail to appear on the date and at the time stated below, a warrant may be issued for your arrest.

Date of Arrest: 04/14/2020 Appearance Date: 04/14/2020 Time: 04:00PM Phone: 732-504-0700

Signature of Person Issuing Summons: BRIAN FARNKOPF DET. Date: 04/14/2020

☐ Domestic Violence – Confidential ☐ Related Traffic Tickets or Other Complaints ☒ Serious Personal Injury/ Death Involved

Special conditions of release:

- ☐ No phone, mail or other personal contact w/victim
- ☐ No possession firearms/weapons
- ☐ Other (specify):

ORIGINAL

COMPLAINT – SUMMONS (Court Action)

COMPLAINT NUMBER

1506**S****2020****000263**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

STATE V.**CANDACE M HAYNES****FTA Bail Information**

Date Bail Set: _____

Amount Bail Set: \$ _____

by: _____

☐ Bail Recog. AttachedReleased
on Bail

R.O.R.

Committed
DefaultCommitted
w/o Bail

Place Committed: _____

Date Referred to

County Prosecutor: _____

Date of First
Appearance:**04/14/2020**☐ Advised of Rights by _____

Defendant Desires Counsel:

☐ Yes ☐ No**Prosecuting Attorney Information****Defense Counsel Information****Name:****Name:**

State

County

Municipal

Other

None

Retained

Public Def

Assigned

Waived

Other

Original Charge

1) **2C:12-1B (2)**2) **2C:39-4D**3) **2C:39-5D**

Amended Charge

Waiver Indt/Jury

Plea/Date of Plea

Plea:

Date:

Plea:

Date:

Plea:

Date:

Adjudication (* see code)

Finding
Code:

Date:

Finding
Code:

Date:

Finding
Code:

Date:

Jail Term

Jail time credit

Susp. Imp

Jail time credit

Susp. Imp

Jail time credit

Susp. Imp

Probation Term

Susp. Imp

Susp. Imp

Susp. Imp

Cond. Discharge Term

Community Service

D/L Suspension Term

Fines/Costs

Fines:

Costs:

Fines:

Costs:

Fines:

Costs:

VCCB/SNSF

VCCB:

SNSF:

VCCB:

SNSF:

VCCB:

SNSF:

DEDR/Lab Fee

DEDR:

LAB:

DEDR:

LAB:

DEDR:

LAB:

CD Fee/Drug Ed Fnd

CD:

DAEF:

CD:

DAEF:

CD:

DAEF:

DV Surch/Other Fees

DV:

Other:

DV:

Other:

DV:

Other:

Restitution

Beneficiary: _____

Miscellaneous Information, Adjournments, Companion Complaints, Co-Defendants, Case Notes:*** Finding Codes**

- 1 – Guilty
- 2 – Not Guilty
- 3 – Dismissed – Other
- 4 – Guilty but Merged
- 5 – Dismissed-Rule
- 6 – Dismissed Lack of Prosecution
- 7 – Dismissed – Pros Motion/Vic Req
- 8 – Conditional Discharge
- D – Dismissed- Prosecutor Discretion
- M – Dismissed- Mediation
- P – Dismissed-Plea Agreement
- S – Disposed at Superior
- W – Dismissed-False ID

Related Traffic Tickets and Complaints:**ORIGINAL - Court Action**

JUDGE'S SIGNATURE _____

DATE _____

Page 2 of 7

NJ/CDR1 1/1/2017

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

COMPLAINT NUMBER			
1506	S	2020	000263
COURT CODE	PREFIX	YEAR	SEQUENCE NO.
BRICK TOWNSHIP MUNICIPAL COURT 401 CHAMBERS BRIDGE BRICK NJ 08723-0000 732-262-1226 COUNTY OF: OCEAN			
# of CHARGES 3	CO-DEFTS 0	POLICE CASE #: 21974-20	
COMPLAINANT NAME: BRIAN FARNKOPF DET.		DEFENDANT INFORMATION SEX: F EYE COLOR: BROWN DOB: 10/22/1981 DRIVER'S LIC. #. [REDACTED] DL STATE: NJ SOCIAL SECURITY #: [REDACTED] SBI #: 727498C TELEPHONE #: [REDACTED] (C) LIVSCAN PCN #: 150603006181	

THE STATE OF NEW JERSEY

VS.

CANDACE M HAYNES

ADDRESS: 299 SAWMILL RD

BRICK TWP

NJ 08724-0000

By certification or on oath, the complainant says that to the best of his/her knowledge, information and belief the named defendant on or about 04/12/2020 in BRICK TWP, OCEAN County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, COMMIT AGGRAVATED ASSAULT BY PURPOSELY OR KNOWINGLY CAUSE BODILY INJURY TO L.B BY USE OF A DEADLY WEAPON, SPECIFICALLY BY STABBING VICTIM IN THE NECK WITH A SHARP OBJECT BELIEVED TO BE A KNIFE.

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in violation of:

Original Charge	1) 2C:12-1B(2)	2) 2C:39-4D	3) 2C:39-5D
Amended Charge			

CERTIFICATION:

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment

Signed: BRIAN FARNKOPF DET.

Date: 04/14/2020

The complaining witness is a law enforcement officer and a judicial probable cause determination is not required prior to the issuance of this Complaint-Summons.

SUMMONS

YOU ARE HEREBY SUMMONED to appear before the Superior Court in the county of: OCEAN

at the following address: OCEAN SUPERIOR COURT

120 HOOPER AVE

TOMS RIVER

NJ 08753-0000

If you fail to appear on the date and at the time stated below, a warrant may be issued for your arrest.

Date of Arrest: 04/14/2020 Appearance Date: 04/14/2020 Time: 04:00PM Phone: 732-504-0700

Signature of Person Issuing Summons: BRIAN FARNKOPF DET.

Date: 04/14/2020

☐ Domestic Violence – Confidential

☐ Related Traffic Tickets
or Other Complaints

☒ Serious Personal Injury/ Death
Involved

Special conditions of release:

☐ No phone, mail or other personal contact w/victim

☐ No possession firearms/weapons

☐ Other (specify):

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER				THE STATE OF NEW JERSEY VS. CANDACE M HAYNES ADDRESS: 299 SAWMILL RD BRICK TWP NJ 08724-0000	
1506	S	2020	000263		
COURT CODE	PREFIX	YEAR	SEQUENCE NO.		
BRICK TOWNSHIP MUNICIPAL COURT 401 CHAMBERS BRIDGE BRICK NJ 08723-0000 732-262-1226 COUNTY OF: OCEAN					
# of CHARGES 3	CO-DEFTS 0	POLICE CASE #: 21974-20		DEFENDANT INFORMATION	
COMPLAINANT BRIAN FARNKOPF DET. NAME: 401 CHAMBERS BRDG RD ATTN WARRANTS BRICK TOWN NJ 08723				SEX: F EYE COLOR: BROWN DOB: 10/22/1981	
				DRIVER'S LIC. #. [REDACTED] DL STATE: NJ	
				SOCIAL SECURITY # [REDACTED] SBI #: 727498C	
				TELEPHONE #: [REDACTED] (C) LIVESCAN PCN #: 150603006181	

By certification or on oath, the complainant says that to the best of his/her knowledge, information and belief the named defendant on or about **04/12/2020** in **BRICK TWP**, **OCEAN** County, **NJ** did:
 WITHIN THE JURISDICTION OF THIS COURT, COMMIT AGGRAVATED ASSAULT BY PURPOSELY OR KNOWINGLY CAUSE BODILY INJURY TO L.B BY USE OF A DEADLY WEAPON, SPECIFICALLY BY STABBING VICTIM IN THE NECK WITH A SHARP OBJECT BELIEVED TO BE A KNIFE.

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WITHIN THE JURISDICTION OF THIS COURT, KNOWINGLY POSSESS A SHARP OBJECT BELIEVED TO BE A KNIFE, UNDER CIRCUMSTANCES NOT MANIFESTLY APPROPRIATE FOR LAWFUL USE, SPECIFICALLY BY USING THE SHARP OBJECT BELIEVED TO BE A KNIFE AND STABBING L.B IN THE NECK.

in violation of:

Original Charge	1) 2C:12-1B(2)	2) 2C:39-4D	3) 2C:39-5D
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Check	Certification by Police Regarding Complaint-Summons
✓	I certify that I served the complaint-summons by delivering a copy to the defendant personally.
	I certify that I personally served the complaint-summons by leaving a copy at the defendant's usual place of abode with a competent member of the household of the age 14 or over _____ Name of family member over 14 years of age
	I certify that I mailed a copy of the complaint-summons by ordinary mail to the defendant at his or her last known address. _____ Defendant's last known address
	I certify that I served the complaint-summons by delivering a copy to a person authorized to receive service of process on the defendant's behalf. _____ Name and title of authorized person
	Other manner of service: I certify that I served the complaint-summons in the following manner: _____
	I certify that I was unable to serve the complaint-summons.

Signed: **BRIAN FARNKOPF DET. BRICK TWP POLICE DEPT** Date of Action: **04/14/2020**
Name, Title and Department of Officer

RETURN OF SERVICE INFORMATION

Affidavit of Probable Cause

COMPLAINT NUMBER

1506**S****2020****000263**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

BRICK TOWNSHIP MUNICIPAL COURT
401 CHAMBERS BRIDGE
BRICK NJ 08723-0000
732-262-1226 COUNTY OF: OCEAN

of CHARGES
3

CO-DEFTS

POLICE CASE #:
21974-20

COMPLAINANT BRIAN FARNKOPF DET.
NAME: 401 CHAMBERSBRDG RD
ATTN WARRANTS
BRICK TOWN NJ 08723

*THE STATE OF NEW JERSEY**VS.***CANDACE M HAYNES**

ADDRESS:

299 SAWMILL RD**BRICK TWP****NJ 08724-0000**

DEFENDANT INFORMATION

SEX: **F** EYE COLOR: **BROWN** DOB: **10/22/1981**DRIVER'S LIC. #: [REDACTED] DL STATE: **NJ**SOCIAL SECURITY #: [REDACTED] SBI #: **727498C**

TELEPHONE #: [REDACTED] (C)

LIVESCAN PCN #: **150603006181**

Purpose: This Affidavit/Certification is to more fully describe the facts of the alleged offense so that a judge or authorized judicial officer may determine probable cause.

1. Description of relevant facts and circumstances which support probable cause that (1) the offense(s) was committed and (2) the defendant is the one who committed it:

During a physical altercation Candace Haynes was pushed down to the ground by L.B. As L.B. was walking away, Candace Haynes chased L.B with a sharp object and stabbed L.B in the neck causing a muscle laceration to the left side of her neck. The injury required immediate medical attention and was transported to the Trauma Unit at Jersey Shore Medical Center to undergo surgery.

Affidavit of Probable Cause**Page 5 of 7**

1/1/2017

Affidavit of Probable Cause

COMPLAINT NUMBER

THE STATE OF NEW JERSEY

1506

S

2020

000263

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

VS.

CANDACE M HAYNES

2. I am aware of the facts above because: (Included, but not limited to: your observations, statements of eyewitnesses, defendant's admission, etc.)

I interviewed the victim, L.B and interviewed witnesses and Candace Haynes after the incident. I also obtained video footage of the incident and confirmed Candace Haynes attacked L.B. with an object believed to be a knife causing such injury, consistent with statements obtained.

3. If victim was injured, provide the extent of the injury:

Victim, L.B was treated at Hackensack Meridian Health and transported to Jersey Shore Medical center to undergo surgery. The injury was a muscle laceration to the left side of the victim, L.B's neck.

Certification:

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Signed: BRIAN FARNKOPF DET. LAW ENFORCEMENT OFFICER

Date: 04/14/2020

Affidavit of Probable Cause

Preliminary Law Enforcement Incident Report

COMPLAINT NUMBER				THE STATE OF NEW JERSEY VS. CANDACE M HAYNES ADDRESS: 299 SAWMILL RD BRICK TWP NJ 08724-0000	
1506	S	2020	000263		
COURT CODE	PREFIX	YEAR	SEQUENCE NO.		
BRICK TOWNSHIP MUNICIPAL COURT 401 CHAMBERS BRIDGE BRICK NJ 08723-0000 732-262-1226 COUNTY OF: OCEAN					
# of CHARGES 3	CO-DEFTS	POLICE CASE #: 21974-20		DEFENDANT INFORMATION SEX: F EYE COLOR: BROWN DOB: 10/22/1981 DRIVER'S LIC. #. [REDACTED] DL STATE: NJ SOCIAL SECURITY #: [REDACTED] SBI #: 727498C TELEPHONE #: [REDACTED] (C) LIVESCAN PCN #: 150603006181	
COMPLAINANT BRIAN FARNKOPF DET. NAME: 401 CHAMBERSBRDG RD ATTN WARRANTS BRICK TOWN NJ 08723					

Purpose: The Preliminary Law Enforcement Incident Report (PLEIR) is intended to document basic information known to the officer at the time of its preparation. It is recognized that additional relevant information will emerge as an investigation continues. The PLEIR shall be in addition to, not in lieu of, any regular police arrest, incident, or investigation reports. Note that the PLEIR is specific to each defendant charged in an investigation.

- The charge was based on the observations/statements made by an eyewitness(es).
 - The witness statement(s) were recorded via:
 - *Body-Worn Camera
- The defendant made statements/admissions.
 - It was recorded using:
 - *Body-Worn Camera
- The offense/incident was recorded using electronic/surveillance via:
 - Surveillance Camera
- The defendant was known to the victim as:
 - Friend
- The victim was injured and:
 - Victim transported to medical facility
- A weapon was involved in the incident:
 - Knife/Cutting Instrument
- The defendant attempted to conceal, discard or destroy evidence, weapon was not recovered

Certification:

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Signed: **BRIAN FARNKOPF DET. LAW ENFORCEMENT OFFICER**

Date: **04/14/2020**

Preliminary Law Enforcement Incident Report

Page 7 of 7

7/20/2018