BRADLEY D. BILLHIMER
Ocean County Prosecutor

ANTHONY U. CARRINGTON
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

November 8, 2021

Via OPRA Machine: opra+request-26883-13294046@requests.opramachine.com

Re: Open Public Records Act (OPRA) Request
OCPO Case# 21003142 – Mark Berstein

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. Criminal history record information has been redacted pursuant to N.J.A.C. 13:59-1.2.

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

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/ec

Enclosures

Carey, Erin

From: Khajezadeh, Dina
Sent: Sunday, November 7, 2021 5:10 PM
To: Prestia , Donna; Carey, Erin
Subject: FW: [EXTERNAL] OPRA request - Case reports

Categories: IMPORTANT DOCUMENTS

Sent from my Verizon, Samsung Galaxy smartphone

-------- Original message --------
From: Resident <opra+request-26883-13294046@requests.opramachine.com>
Date: 11/7/21 3:53 PM (GMT-05:00)
To: "Khajezadeh, Dina" <DKhajezadeh@co.ocean.nj.us>
Subject: [EXTERNAL] 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:

Valerie Palumbo (Case # 21002873)
Emba Mendez (Case # 21003026)
James Noonan (Case # 21003037)
Mark Bernstein (Case # 21003142)
Mark J. Austin (new indictment announced 10/7/21) 19003231

Yours sincerely,

Resident

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-26883-13294046@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

Global Subject Activity Report

Detail

Print Date/Time: 10/28/2021 08:56
Login ID: mcolantoni

Brick Township Police Department
ORI Number: NJ0150600

Bernstein, Mark Ibes **Jacket:** 162981 A **SSN:**

Address: 47 NAUTILUS DR
BRICK
TOWNSHIP
NJ 08723

Phone #:

Sex: Male
Height: 5ft 10in to 5ft 10in
Weight: 141.0 lbs. to 141.0 lbs.
Eyes: Brown
Hair: Gray
DL#:

DOB: 09/10/1954
Race: White
DL State: NJ

Physical Characteristics:

Appearance:	Normal	**Country/State of Birth:**	USA/NEW JERSEY	**Age Range:**	66
Hair Style:	Straight	**City of Birth:**	Elizabeth	**Hand Preference:**	Right
Hair Length:	Short	**County of Origin:**	Union	**Place of Birth:**	New Jersey
Facial Shape:	Oval	**Ethnicity:**	Non Hispanic	**Occupation:**	Retired
Complexion:	Light	**Citizenship:**	US	**# of Dependents:**	0
Build:	Obese	**Tribe:**	Not Applicable	**Primary Language:**	English
Glasses:	No	**Hate Group:**	Not Applicable	**Second Language:**	English
Teeth:	Missing	**Military Service:**	Not Applicable	**Gang Affiliation:**	Not Applicable
Speech:	Normal	**Military Discharge:**		**Marital Status:**	Married
Voice:	Medium Pitch	**School:**	High School - Diploma	**Blood Type:**	Unknown
Mustache:	None	**Beard:**	None	**Religion:**	None
Known Offender:		**DNA Collected Date:**		**Illegal Alien:**	No
DNA Collected:	No				
Assaultive					

County of Conviction: **State Of Conviction:**

Modus Operandi

Identifying Clothing:

Crime Specialities

Aliases

Type	Alias	DOB	Race	Sex	SSN	Hair	Eyes	DL#	Height	Weight	Phone
AKA	BERNSTEIN, MARK I	09/10/1954	White	Male		Gray	Brown		5ft 10in	141.0 lbs.	
AKA	Bernstein, Mark Ibes	09/10/1954	White	Male		Gray	Brown		5ft 10in	190.0 lbs.	
AKA	BERNSTEIN, MARK Ives	09/10/1954	White	Male		Gray	Brown		5ft 9in	190.0 lbs.	
AKA	Bernstein, Mark I	09/10/1954	White	Male		Gray	Brown		5ft 10in	141.0 lbs.	
AKA	Bernstein, Mark Ives	09/10/1954	White	Male		Gray	Brown		5ft 10in	218.0 lbs.	

Nicknames

Entered Date/Time	Nickname Type	Nickname

Associated IDs

Issue Date	ID Type	Number	Issuing State	Start Date	Expire Date
	Social Security Number(FALSE)				
	Drivers License		NJ		
03/15/2013	*FBI	846917WC3	NJ	03/15/2013	
03/15/2013	*SBI	152200E	NJ	03/15/2013	

Known Associates

Relationship	Name

School/Employer Information

Global Subject Activity Report

Detail

Print Date/Time: 10/28/2021 08:56
Login ID: mcolantoni

Brick Township Police Department
ORI Number: NJ0150600

Relationship	School/Employer Name	Phone Type	Phone

Scars, Marks, Tattoos

Type	Location	Scar, Mark or Tattoo Detail	Description
Tattoo	TAT L SHLD	Flag	American Flag

Handicap Information

Handicap

Current Address Information

Address Type	Address	City	State	Zip
Home	47 NAUTILUS DR	BRICK TOWNSHIP	NJ	08723

Prior Address Information

Address Type	Address	City	State	Zip	From Date	To Date
Home	[redacted]	[redacted]	[redacted]	[redacted]		
Home	[redacted]	[redacted]	[redacted]	[redacted]		

Contact Information

Date	Type	Phone	Extension
12/14/2020 20:37	Home	[redacted]	
10/28/2021 07:23	Cell		
12/15/2020 08:24	Cell		

Vehicle Information

Vehicle #	Role	Contact Date	Vehicle Type	Make	Model	Vehicle Year	Registration Number	State

Activity

[redacted]

Date	Activity Reference	Description	ORI
[redacted]	[redacted]	[redacted]	[redacted]

Global Subject Activity Report

Detail

Print Date/Time: 10/28/2021 08:56
Login ID: mcolantoni

Brick Township Police Department
ORI Number: NJ0150600

Type : Arrest

Date	Activity Reference	Description	ORI
[redacted]	[redacted]	[redacted]	[redacted]
10/28/2021 01:04	54247	Arrest Type: Taken into Custody - Warrant Charge(s): 2C:12-1b(5)(c),Aggravated Assault - Commits a simple assault upon EMS personnel	NJ0150600

Type : Booking

Date	Activity Reference	Description	ORI
[redacted]	[redacted]	[redacted]	[redacted]
10/28/2021 01:10	2021-00000887	Booking Charge(s): 2C:12-1b(5)(c),Aggravated Assault - Commits a simple assault upon EMS personnel	NJ0150600

Global Subject Activity Report

Detail

Print Date/Time: 10/28/2021 08:56
Login ID: mcolantoni
Type : Case

Brick Township Police Department
ORI Number: NJ0150600

Date	Activity Reference	Description	ORI
[redacted]	[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	[redacted]
[redacted]	[redacted]	[redacted]	[redacted]
10/28/2021 01:19	2021-00072726	Subject Type: Suspect, Incident Type: Assault - Aggravated Charge(s): 2C:12-1b(5)(c),Aggravated Assault - Commits a simple assault upon EMS personnel	NJ0150600

Global Subject Activity Report

Detail

Print Date/Time: 10/28/2021 08:56
Login ID: mcolantoni

Brick Township Police Department
ORI Number: NJ0150600

[redacted]

Date	Activity Reference	Description	ORI
[redacted]	[redacted]	[redacted]	[redacted]

[redacted]

Date	Activity Reference	Description	ORI
[redacted]	[redacted]	[redacted]	[redacted]

[redacted]

Date	Activity Reference	Description	ORI
[redacted]	[redacted]	[redacted]	[redacted]

[redacted]

Date	Activity Reference	Description	ORI
[redacted]	[redacted]	[redacted]	[redacted]

[redacted]

COMPLAINT - SUMMONS

COMPLAINT NUMBER			
1506	S	2021	000783
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

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

THE STATE OF NEW JERSEY
VS.
MARK I BERNSTEIN

ADDRESS: 47 NAUTILUS DR.
BRICK NJ 08723-0000

# of CHARGES	CO-DEFTS	POLICE CASE #:
1		72726-21

COMPLAINANT NAME: JOHN SULLIVAN JR PTL.
401 CHAMBERSBRDG RD
ATTN WARRANTS
BRICK TOWN NJ 08723

DEFENDANT INFORMATION
SEX: M EYE COLOR: BROWN DOB: 09/10/1954
DRIVER'S LIC. #: [redacted] DL STATE: NJ
SOCIAL SECURITY #: [redacted] SBI #:
TELEPHONE #: [redacted] (C)
LIVESCAN PCN #:

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 10/28/2021 in BRICK TWP , OCEAN County, NJ did:

WITHIN THE JURISDICTION OF THIS COURT, DID PURPOSELY OR KNOWINGLY COMMIT AGGRAVATED ASSAULT BY PURPOSELY OR KNWOINGLY CAUSING BODILY INJURY TO A PERSON ENGAGED IN EMERGENCY FIRST AID OR MEDICAL SERVICES ACTING IN THE PERFORMANCE OF THEIR DUTIES WHILE IN UNIFORM (DAVID RICE), SPECIFICALLY BY STRIKING THE VICTIM WITH A CLOSED FIST IN THE FACE IN VIOLATION OF 2C:12-1B(5)(C).

in violation of:

	1)	2)	3)
Original Charge	2C:12-1B(5)(C)		
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: JOHN SULLIVAN JR PTL. Date: 10/28/2021

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: 10/28/2021 **Appearance Date:** 10/28/2021 **Time:** 02:16AM **Phone:** 732-504-0700

Signature of Person Issuing Summons: JOHN SULLIVAN JR PTL. Date: 10/28/2021

☐ **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

NJ/CDR1 1/1/2017

COMPLAINT – SUMMONS (Court Action)

COMPLAINT NUMBER				STATE V.
1506	S	2021	000783	MARK I BERNSTEIN
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	

FTA Bail Information	Date Bail Set:	Amount Bail Set: $_____ by:_____	❑ Bail Recog. Attached

Released on Bail	R.O.R.	Committed Default	Committed w/o Bail	Place Committed:	Date Referred to County Prosecutor: _____

Date of First Appearance: 10/28/2021	❑ 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

	1)	2)	3)
Original Charge	2C:12-1B(5)(C)		
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:

Related Traffic Tickets and Complaints:

* 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

JUDGE'S SIGNATURE _____ DATE _____

ORIGINAL - Court Action

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

COMPLAINT NUMBER			
1506	S	2021	000783
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

THE STATE OF NEW JERSEY
VS.
MARK I BERNSTEIN

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

ADDRESS: 47 NAUTILUS DR.
BRICK NJ 08723-0000

# of CHARGES	CO-DEFTS	POLICE CASE #:
1		72726-21

COMPLAINANT
NAME: JOHN SULLIVAN JR PTL.

DEFENDANT INFORMATION
SEX: M EYE COLOR: BROWN DOB: 09/10/1954
DRIVER'S LIC. #: [redacted] DL STATE: NJ
SOCIAL SECURITY #: [redacted] SBI #:
TELEPHONE #: [redacted] (C)
LIVESCAN PCN #:

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 10/28/2021 in BRICK TWP, OCEAN County, NJ did:
WITHIN THE JURISDICTION OF THIS COURT, DID PURPOSELY OR KNOWINGLY COMMIT AGGRAVATED ASSAULT BY PURPOSELY OR KNWOINGLY CAUSING BODILY INJURY TO A PERSON ENGAGED IN EMERGENCY FIRST AID OR MEDICAL SERVICES ACTING IN THE PERFORMANCE OF THEIR DUTIES WHILE IN UNIFORM (DAVID RICE), SPECIFICALLY BY STRIKING THE VICTIM WITH A CLOSED FIST IN THE FACE IN VIOLATION OF 2C:12-1B(5)(C).

in violation of:

	1)	2)	3)
Original Charge	2C:12-1B(5)(C)		
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 willfuly false, Iam subject to punishment

Signed: JOHN SULLIVAN JR PTL. **Date:** 10/28/2021

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: 10/28/2021 **Appearance Date:** 10/28/2021 **Time:** 02:16AM **Phone:** 732-504-0700

Signature of Person Issuing Summons: JOHN SULLIVAN JR PTL. Date: 10/28/2021

☐ **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): _____

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER			
1506	S	2021	000783
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	CO-DEFTS	POLICE CASE #:
1		72726-21

COMPLAINANT NAME: JOHN SULLIVAN JR PTL.
401 CHAMBERSBRDG RD
ATTN WARRANTS
BRICK TOWN NJ 08723

THE STATE OF NEW JERSEY
VS.
MARK I BERNSTEIN

ADDRESS :
47 NAUTILUS DR.
BRICK NJ 08723-0000

DEFENDANT INFORMATION
SEX: M EYE COLOR: BROWN DOB: 09/10/1954
DRIVER'S LIC. #: [redacted] DL STATE: NJ
SOCIAL SECURITY # [redacted] SBI #:
TELEPHONE #: [redacted] (C)
LIVESCAN PCN #:

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 10/28/2021 in BRICK TWP , OCEAN County, NJ did:
WITHIN THE JURISDICTION OF THIS COURT, DID PURPOSELY OR KNOWINGLY COMMIT AGGRAVATED ASSAULT BY PURPOSELY OR KNWOINGLY CAUSING BODILY INJURY TO A PERSON ENGAGED IN EMERGENCY FIRST AID OR MEDICAL SERVICES ACTING IN THE PERFORMANCE OF THEIR DUTIES WHILE IN UNIFORM (DAVID RICE), SPECIFICALLY BY STRIKING THE VICTIM WITH A CLOSED FIST IN THE FACE IN VIOLATION OF 2C:12-1B(5)(C).

in violation of:

Original Charge	1) 2C:12-1B(5)(C)	2)	3)

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: JOHN SULLIVAN JR PTL. BRICK TWP POLICE DEPT
Name, Title and Department of Officer

Date of Action: 10/28/2021

RETURN OF SERVICE INFORMATION

Affidavit of Probable Cause

COMPLAINT NUMBER			
1506	S	2021	000783
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

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

THE STATE OF NEW JERSEY
VS.
MARK I BERNSTEIN

ADDRESS :
47 NAUTILUS DR.
BRICK NJ 08723-0000

# of CHARGES	CO-DEFTS	POLICE CASE #:
1		72726-21

COMPLAINANT NAME: JOHN SULLIVAN JR PTL.
401 CHAMBERSBRDG RD
ATTN WARRANTS
BRICK TOWN NJ 08723

DEFENDANT INFORMATION
SEX: M EYE COLOR: BROWN DOB: 09/10/1954
DRIVER'S LIC. #: [redacted] DL STATE: NJ
SOCIAL SECURITY #: [redacted] SBI #:
TELEPHONE #: [redacted] (C)
LIVESCAN PCN #:

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:

OFFICERS RESPONDED TO THE AREA OF ROUTE 70 AND OLDEN AVE TO ASSIST BRICK EMS UNIT 536. UPON ARRIVAL, THE DEFENDANT (MB), WAS LAYING IN THE STRETCHER IN THE REAR OF THE AMBULANCE. THE DEFENDANT (MB) WAS ACTING IRRATICALLY AND WAS REFUSING OFFICER'S COMMANDS. HE WAS PLACED INTO PROTECTIVE CUSTODY FOR OUR SAFETY AND THE SAFETY OF EMS PERSONNEL. THE VICTIM, BRICK EMS OFFICER DAVID RICE, ADVISED OFFICERS ON SCENE THE DEFENDANT WAS ANGRY ABOUT BEING TRANSPORTED TO BRICK HOSPITAL AND STRUCK HIM IN THE FACE WITH A CLOSED FIST. THE VICTIM HAD A COMPLAINT OF PAIN AND HAD REDNESS TO HIS FACE.

Affidavit of Probable Cause

COMPLAINT NUMBER			
1506	S	2021	000783
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

THE STATE OF NEW JERSEY
VS.
MARK I BERNSTEIN

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

STATEMENTS MADE BY THE VICTIM AND EYEWITNESS.

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

VICTIM HAD A COMPLAINT OF PAIN AND HAD REDNESS TO THE LEFT SIDE OF HIS FACE.

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: JOHN SULLIVAN JR PTL. LAW ENFORCEMENT OFFICER Date: 10/28/2021

Preliminary Law Enforcement Incident Report

COMPLAINT NUMBER			
1506	S	2021	000783
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

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

THE STATE OF NEW JERSEY
VS.
MARK I BERNSTEIN

ADDRESS: 47 NAUTILUS DR.
BRICK NJ 08723-0000

# of CHARGES	CO-DEFTS	POLICE CASE #:
1		72726-21

COMPLAINANT NAME: JOHN SULLIVAN JR PTL.
401 CHAMBERSBRDG RD
ATTN WARRANTS
BRICK TOWN NJ 08723

DEFENDANT INFORMATION
SEX: M EYE COLOR: BROWN DOB: 09/10/1954
DRIVER'S LIC. #: [redacted] DL STATE: NJ
SOCIAL SECURITY #: [redacted] SBI #:
TELEPHONE #: [redacted] (C)
LIVESCAN PCN #:

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 defendant was a stranger to the victim.

-The victim was injured. Select all items that <u>apply</u>:
•Victim refused treatment

-The defendant appeared to be under the influence of drugs or alcohol at the time of the offense.

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: JOHN SULLIVAN JR PTL. LAW ENFORCEMENT OFFICER Date: 10/28/2021