

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

December 28, 2021

Resident

Via OPRA Machine: opra+request-28366-f231a16a@requests.opramachine.com

Re: Open Public Records Act (OPRA) Request
OCPO Case# 21003571 – David O'Brien

Dear Sir/Madam:

Enclosed please find the 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 the Global Subject Activity Report, 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: Wednesday, December 22, 2021 10:39 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-28366-f231a16a@requests.opramachine.com>
Date: 12/22/21 10:10 PM (GMT-05:00)
To: "Khajezadeh, Dina" <DKhajezadeh@co.ocean.nj.us>
Subject: [EXTERNAL] OPRA request - Case reports

This message has originated from an External Source. Please use proper judgment and caution when opening attachments, clicking links, or responding to this email.

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:

Robert Smalls (Case # 21003447)
Jacquelyn Best (Case # 21003472)
Andrew Williams (Case # 21003006)
David O'Brien (Case #21003571)

Yours sincerely,

Resident

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-28366-f231a16a@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:

COMPLAINT - SUMMONS

COMPLAINT NUMBER				<i>THE STATE OF NEW JERSEY</i> <i>VS.</i> DAVID O'BRIEN ADDRESS: 1642 BURRSVILLE RD. BRICK NJ 08724-0000	
1506	S	2021	000894		
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 #:		DEFENDANT INFORMATION	
COMPLAINANT NAME: JOHN LARAIA 119 HOOPER AVE TOMS RIVER NJ 08754				SEX: EYE COLOR: DOB: 07/27/1966 DRIVER'S LIC. #: DL STATE: SOCIAL SECURITY #: SBI #: TELEPHONE #: (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 **07/31/2020** in **BRICK TWP**, **OCEAN** County, **NJ** did: WITHIN THE JURISDICTION OF THIS COURT, DAVID O'BRIEN DID COMMIT THE OFFENSE OF INSURANCE FRAUD, BY KNOWINGLY MAKING A FALSE, FICTITIOUS, FRAUDULENT OR MISLEADING STATEMENTS OF MATERIAL FACT, SPECIFICALLY BY SUBMITTING FORGED LETTERS FROM TWO DOCTORS TO METLIFE INSURANCE TO SUPPORT LONG TERM DISABILITY PAYMENTS OR OTHER BENEFIT PURSUANT TO AN INSURANCE POLICY.

WITHIN THE JURISDICTION OF THIS COURT, DAVID O'BRIEN DID PURPOSELY OBTAIN THE PROPERTY OF ANOTHER, NAMELY METLIFE INSURANCE, BY DECEPTION, BY CREATING OR REINFORCING A FALSE IMPRESSION THAT HE WAS UNABLE TO WORK AND WAS ENTITLED TO RECEIVE LONG TERM DISABILITY BENEFITS BY SUBMITTING FORGED DOCUMENTS FROM TWO DOCTORS TO THE INSURANCE COMPANY RESULTING IN A PAYMENT OF \$14,669.14

WITHIN THE JURISDICTION OF THIS COURT, DAVID O'BRIEN DID, WITH PURPOSE TO DEFRAUD OR INJURE ANYONE, OR WITH KNOWLEDGE THAT HE IS FACILITATING A FRAUD OR in violation of:

Original Charge	1) 2C:21-4.6A	2) 2C:20-4	3) 2C:21-1A(2)
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 LARAIA Date: 12/09/2021

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: Appearance Date: **12/10/2021** Time: **10:00AM** Phone: **732-504-0700**

Signature of Person Issuing Summons: JOHN LARAIA Date: 12/09/2021

☐ 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

COMPLAINT - SUMMONS

COMPLAINT NUMBER

1506

S

2021

000894

STATE V.

DAVID O'BRIEN

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

INJURY TO BE PERPETRATED BY ANYONE, HE MADE A WRITING SO THAT IS PURPORTED TO BE THE ACT OF ANOTHER, NAMELY LETTERS WRITTEN BY DR. KHALID AHMAD AND PA ELIYAHU FINKEL WHO DID NOT AUTHORIZE THAT ACT.

Original Charge

Amended Charge

COMPLAINT - SUMMONS

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NJ/CDR1 1/1/2017

COMPLAINT – SUMMONS (Court Action)

COMPLAINT NUMBER				STATE V.					
1506	S	2021	000894	DAVID O'BRIEN					
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	Date Referred to County Prosecutor:					
Date of First Appearance: 12/10/2021		☐ 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
Original Charge	1) 2C:21-4.6A		2) 2C:20-4		3) 2C:21-1A(2)				
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:									
JUDGE'S SIGNATURE _____ DATE _____						ORIGINAL - Court Action Page 3 of 11 NJ/CDR1 1/1/2017			

COMPLAINT – SUMMONS (Court Action)

COMPLAINT NUMBER

1506 **S** **2021** **000894**

COURT CODE PREFIX YEAR SEQUENCE NO.

STATE V.

DAVID O'BRIEN

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: **12/10/2021**

☐ Advised of Rights by _____

Defendant Desires Counsel:

☐ Yes ☐ No

Prosecuting Attorney Information

Name:

State

County

Municipal

Other

Defense Counsel Information

Name:

None

Retained

Public Def

Assigned

Waived

Other

Original Charge

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:

JUDGE'S SIGNATURE _____

DATE _____

COMPLAINT - SUMMONS (Court Action)

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NJ/CDR1 1/1/2017

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

COMPLAINT NUMBER			
1506	S	2021	000894
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 #:	
COMPLAINANT NAME: JOHN LARAIA		DEFENDANT INFORMATION SEX: EYE COLOR: DOB: 07/27/1966 DRIVER'S LIC. #. DL STATE: SOCIAL SECURITY #: SBI #: TELEPHONE #: (C) LIVSCAN PCN #:	

THE STATE OF NEW JERSEY

VS.

DAVID O'BRIEN

ADDRESS: 1642 BURRSVILLE RD.

BRICK

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 **07/31/2020** in **BRICK TWP**, **OCEAN** County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, DAVID O'BRIEN DID COMMIT THE OFFENSE OF INSURANCE FRAUD, BY KNOWINGLY MAKING A FALSE, FICTITIOUS, FRAUDULENT OR MISLEADING STATEMENTS OF MATERIAL FACT, SPECIFICALLY BY SUBMITTING FORGED LETTERS FROM TWO DOCTORS TO METLIFE INSURANCE TO SUPPORT LONG TERM DISABILITY PAYMENTS OR OTHER BENEFIT PURSUANT TO AN INSURANCE POLICY.

WITHIN THE JURISDICTION OF THIS COURT, DAVID O'BRIEN DID PURPOSELY OBTAIN THE PROPERTY OF ANOTHER, NAMELY METLIFE INSURANCE, BY DECEPTION, BY CREATING OR REINFORCING A FALSE IMPRESSION THAT HE WAS UNABLE TO WORK AND WAS ENTITLED TO RECEIVE LONG TERM DISABILITY BENEFITS BY SUBMITTING FORGED DOCUMENTS FROM TWO DOCTORS TO THE INSURANCE COMPANY RESULTING IN A PAYMENT OF \$14,669.14

WITHIN THE JURISDICTION OF THIS COURT, DAVID O'BRIEN DID, WITH PURPOSE TO DEFRAUD OR INJURE ANYONE, OR WITH KNOWLEDGE THAT HE IS FACILITATING A FRAUD OR in violation of:

Original Charge	1) 2C:21-4.6A	2) 2C:20-4	3) 2C:21-1A(2)
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 LARAIA** Date: **12/09/2021**

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: Appearance Date: 12/10/2021 Time: 10:00AM Phone: 732-504-0700
Signature of Person Issuing Summons: **JOHN LARAIA** Date: 12/09/2021

☐ 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):

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

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NJ/CDR1 1/1/2017

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

COMPLAINT NUMBER

1506**S****2021****000894**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

STATE V.**DAVID O'BRIEN**

INJURY TO BE PERPETRATED BY ANYONE, HE MADE A WRITING SO THAT IS PURPORTED TO BE THE ACT OF ANOTHER, NAMELY LETTERS WRITTEN BY DR. KHALID AHMAD AND PA ELIYAHU FINKEL WHO DID NOT AUTHORIZE THAT ACT.

Original Charge

Amended Charge

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

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NJ/CDR1 1/1/2017

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER				THE STATE OF NEW JERSEY VS. DAVID O'BRIEN ADDRESS : 1642 BURRSVILLE RD. BRICK NJ 08724-0000	
1506	S	2021	000894		
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 #:		DEFENDANT INFORMATION	
COMPLAINANT JOHN LARAIA				SEX:	EYE COLOR:
NAME: 119 HOOPER AVE				DRIVER'S LIC. #:	DOB: 07/27/1966
TOMS RIVER NJ 08754				SOCIAL SECURITY #:	DL STATE:
				TELEPHONE #: (C)	SBI #:
				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 **07/31/2020** in **BRICK TWP**, **OCEAN** County, NJ did: **WITHIN THE JURISDICTION OF THIS COURT, DAVID O'BRIEN DID COMMIT THE OFFENSE OF INSURANCE FRAUD, BY KNOWINGLY MAKING A FALSE, FICTITIOUS, FRAUDULENT OR MISLEADING STATEMENTS OF MATERIAL FACT, SPECIFICALLY BY SUBMITTING FORGED LETTERS FROM TWO DOCTORS TO METLIFE INSURANCE TO SUPPORT LONG TERM DISABILITY PAYMENTS OR OTHER BENEFIT PURSUANT TO AN INSURANCE POLICY.**

WITHIN THE JURISDICTION OF THIS COURT, DAVID O'BRIEN DID PURPOSELY OBTAIN THE PROPERTY OF ANOTHER, NAMELY METLIFE INSURANCE, BY DECEPTION, BY CREATING OR REINFORCING A FALSE IMPRESSION THAT HE WAS UNABLE TO WORK AND WAS ENTITLED TO RECEIVE LONG TERM DISABILITY BENEFITS BY SUBMITTING FORGED DOCUMENTS FROM TWO DOCTORS TO THE INSURANCE COMPANY RESULTING IN A PAYMENT OF \$14,669.14

WITHIN THE JURISDICTION OF THIS COURT, DAVID O'BRIEN DID, WITH PURPOSE TO DEFRAUD OR INJURE ANYONE, OR WITH KNOWLEDGE THAT HE IS FACILITATING A FRAUD OR **in violation of:**

Original Charge	1) 2C:21-4.6A	2) 2C:20-4	3) 2C:21-1A(2)
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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: TO BE SERVED AT PROCESSING
	I certify that I was unable to serve the complaint-summons.

Signed: **JOHN LARAIA OCEAN COUNTY PROSECUTOR'S OFF** Date of Action: **12/09/2021**
 Name, Title and Department of Officer

RETURN OF SERVICE INFORMATION

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER

1506**S****2021****000894****STATE V.****DAVID O'BRIEN**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

INJURY TO BE PERPETRATED BY ANYONE, HE MADE A WRITING SO THAT IS PURPORTED TO BE THE ACT OF ANOTHER, NAMELY LETTERS WRITTEN BY DR. KHALID AHMAD AND PA ELIYAHU FINKEL WHO DID NOT AUTHORIZE THAT ACT.

Original Charge

Amended Charge

RETURN OF SERVICE INFORMATION**Page 8 of 11**

NJ/CDR1 1/1/2017

Affidavit of Probable Cause

COMPLAINT NUMBER			
1506	S	2021	000894
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 #:	
COMPLAINANT JOHN LARAIA NAME: 119 HOOPER AVE TOMS RIVER NJ 08754			
DEFENDANT INFORMATION SEX: EYE COLOR: DOB: 07/27/1966 DRIVER'S LIC. #: DL STATE: SOCIAL SECURITY #: SBI #: TELEPHONE #: XXXXXXXXXX (C) LIVESCAN PCN #:			

THE STATE OF NEW JERSEY

VS.

DAVID O'BRIEN

ADDRESS: **1642 BURRSVILLE RD.**

BRICK NJ 08724-0000

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:

On February 15, 2020, David O'Brien began receiving Long Term Disability (LTD) benefits from MetLife Insurance that were contingent upon him meeting the insurance company's terms and conditions. On July 1, 2020, the insurance company requested that O'Brien submit medical information from his health care providers to support his LTD benefits. O'Brien submitted two forged letters from Dr. Khalid Ahmad, dated July 31, 2020 and November 23, 2020 to MetLife. In addition, O'Brien submitted four other forged documents to MetLife from PA. Eliyahu Finkel. Two letters recommended that O'Brien remain out of work due to an illness. Based on these forged documents, O'Brien was paid \$14,669.14 for disability benefits he was not entitled to from July 29, 2020 through January 7, 2021. But for the forged letters and documents submitted by O'Brien, MetLife would not have continued to pay O'Brien for his disability benefits as he was no longer eligible.

Based on statements taken from Dr. Ahmad & PA. Finkel, and a review and analysis of insurance company documents & forged letters, O'Brien was charged with insurance fraud in violation of NJSA 2C:21-4.6, a third degree offense, theft by deception in violation of NJSA 2C:20-4a, a third degree offense, and forgery in violation of NJSA 2C: 21-1(2), a fourth degree offense.

Affidavit of Probable Cause

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1/1/2017

Affidavit of Probable Cause

COMPLAINT NUMBER

1506**S****2021****000894**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

THE STATE OF NEW JERSEY**VS.****DAVID O'BRIEN**

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

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

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 LARAIA LAW ENFORCEMENT OFFICER

Date: 12/09/2021

Affidavit of Probable Cause**Page 10 of 11****1/1/2017**

Preliminary Law Enforcement Incident Report

COMPLAINT NUMBER				<i>THE STATE OF NEW JERSEY</i> <i>VS.</i> DAVID O'BRIEN ADDRESS: 1642 BURRSVILLE RD. BRICK NJ 08724-0000	
1506	S	2021	000894		
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 #:		DEFENDANT INFORMATION SEX: EYE COLOR: DOB: 07/27/1966 DRIVER'S LIC. #: SOCIAL SECURITY #: SBI #: TELEPHONE #: XXXXXXXXXX (C) LIVSCAN PCN #:	
COMPLAINANT JOHN LARAIA					
NAME: 119 HOOPER AVE					
TOMS RIVER NJ 08754					

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 known to the victim as:
 - Other/Explain Insurance carrier
- The complaining officer/agency have reason to believe that the defendant is drug-dependent. Basis were:
 - Other/Explain Medical records
- The case involved theft and/or stolen property. The property which was stolen and/or possessed is Disability payments

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 LARAIA LAW ENFORCEMENT OFFICER Date: 12/09/2021

Preliminary Law Enforcement Incident Report

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7/20/2018