

BRADLEY D. BILLHIMER
Ocean County Prosecutor



MICHAEL T. NOLAN, JR.
First Assistant Prosecutor

ANTHONY U. CARRINGTON
Chief of Detectives

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 17, 2022

Via OPRA Machine: opra+request-31868-d5be8c63@requests.opramachine.com

Re: Open Public Records Act (OPRA) Request
OCPO Case# 22001104 – Halaina Corwin

Dear Sir/Madam:

Enclosed please find the Global Subject Activity Report, Complaint Warrant, 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, Criminal Information 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: Saturday, May 14, 2022 12:33 PM
To: Prestia , Donna; Carey, Erin
Subject: FW: [EXTERNAL] OPRA request - Case reports

Sent from my Verizon, Samsung Galaxy smartphone

----- Original message -----

From: Resident <opra+request-31868-d5be8c63@requests.opramachine.com>
Date: 5/14/22 11:28 AM (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:

James Noonan (Case # 22001085)
Halaina Corwin (Case # 22001104)
Gerald Snyder (Case # 22001109)
Sharlene Ramey (Case # 22001209)
Marquis Pettise (Case # 22001294)
Jermaine Mayer (Case # 22001294)

Yours sincerely,

Resident

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-31868-d5be8c63@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:



Global Subject Activity Report

Detail



Print Date/Time: 04/12/2022 15:36
Login ID: mcolantoni

Brick Township Police Department
ORI Number: NJ0150600

Corwin, Halaina Anne

Jacket: 140576 A

SSN:

Address: 949 HARRISON RD
 Toms River
 NJ 08753

Sex: Female

Phone #: [REDACTED]

Height: 5ft 6in to 5ft 6in

Weight: 120.0 lbs. to
 120.0 lbs.

DOB: 04/14/2000

Eyes: Brown

Race: White

Hair: Blonde

DL State: NJ

DL#: [REDACTED]

Physical Characteristics:

Appearance: Normal
Hair Style: Straight
Hair Length: Short
Facial Shape: Oval
Complexion: Light
Build: Thin
Glasses: Yes
Teeth: Normal
Speech: Normal
Voice: Medium Pitch

Country/State of Birth: US/NJ
City of Birth: Toms River
County of Origin: Ocean
Ethnicity: Non Hispanic
Citizenship: US
Tribe: Not Applicable
Hate Group: Not Applicable
Military Service: Not Applicable
Military Discharge:
School: High School -
 Diploma
Beard: None

Age Range:
Hand Preference: Right
Place of Birth: New Jersey
Occupation: Unemployed
of Dependents: 0
Primary Language: English
Second Language:
Gang Affiliation: Not Applicable
Marital Status: Single
Blood Type: Unknown
Religion: Atheist
Illegal Alien: No

Mustache: None
DNA Collected: No
Known Offender:
 Known to Resist Arrest
 Known Burglar
 Assaultive

DNA Collected Date:

County of Conviction:
Identifying Clothing:

State Of Conviction:

Modus Operandi

Crime Specialties
 Burglary

Aliases

Type	Alias	DOB	Race	Sex	SSN	Hair	Eyes	DL#	Height	Weight	Phone
AKA	Corwin, Halaina A	04/14/2000	White	Female		Brown	Brown	[REDACTED]	5ft 6in	121.0 lbs.	[REDACTED]
AKA	Corwin, Halaina Anne	04/14/2000	White	Female		Brown	Brown	[REDACTED]	5ft 6in	120.0 lbs.	[REDACTED]
AKA	Corwin, Halaina A	04/14/2000	White	Female		Brown	Brown	[REDACTED]	5ft 6in	120.0 lbs.	[REDACTED]
AKA	Corwin, Halaina Anne	04/14/2000	White	Female		Brown	Brown	[REDACTED]	5ft 4in	121.0 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
	*SBI	382127H			

Known Associates

Relationship	Name
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School/Employer Information

Relationship	School/Employer Name	Phone Type	Phone
Employer Business	Willow Springs Rehabilitation	Business	(732)840-3700

Scars, Marks, Tattoos



Global Subject Activity Report

Detail



Print Date/Time: 04/12/2022 15:36

Login ID: mcolantoni

Brick Township Police Department

ORI Number: NJ0150600

Type Location Scar, Mark or Tattoo Detail Description

Handicap Information

Handicap

Current Address Information

Address Type	Address	City	State	Zip
Home	949 HARRISON RD	Toms River	NJ	08753

Prior Address Information

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

Date	Type	Phone	Extension
12/06/2020 05:24	Cell		
02/25/2019 10:16	Cell		

Vehicle Information

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

Type : Accident

Date	Activity Reference	Description	ORI
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Type : Arrest

Date	Activity Reference	Description	ORI
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04/12/2022 03:05

54684

Arrest Type: On-View

NJ0150600

Charge(s):

2C:12-1b(2),Aggravated Assault -
Purposely or knowingly causes bodily
injury to another with a deadly weapon
2C:18-2b1,Burglary with injury or threat
2C:39-4d,Possession of a Weapon for
Unlawful Purpose
2C:39-5D,Possession of Other Weapons



Global Subject Activity Report

Detail



Print Date/Time: 04/12/2022 15:36
Login ID: mcolantoni
Type : Booking

Brick Township Police Department
ORI Number: NJ0150600

Date	Activity Reference	Description	ORI
04/12/2022 03:30	2022-00000257	Booking Charge(s): 2C:12-1b(2),Aggravated Assault - Purposely or knowingly causes bodily injury to another with a deadly weapon 2C:18-2b1,Burglary with injury or threat 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
04/12/2022 02:35	2022-00025256	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:18-2b1,Burglary with injury or threat 2C:39-4d,Possession of a Weapon for Unlawful Purpose 2C:39-5D,Possession of Other Weapons	NJ0150600



Global Subject Activity Report

Detail



Print Date/Time: 04/12/2022 15:36
Login ID: mcolantoni
Type : Incident

Brick Township Police Department
ORI Number: NJ0150600

Date	Activity Reference	Description	ORI
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[REDACTED]			
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Type : Tickets & Citations

Date	Activity Reference	Description	ORI
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[REDACTED]			
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Total Activity : [REDACTED]

COMPLAINT - WARRANT

COMPLAINT NUMBER

1506**W****2022****000255**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

*THE STATE OF NEW JERSEY**VS.***HALAINA A CORWIN**ADDRESS: **949 HARRISON****TOMS RIVER****NJ 08753-0000****BRICK TOWNSHIP MUNICIPAL COURT**
401 CHAMBERS BRIDGE
BRICK NJ 08723-0000
732-262-1226 COUNTY OF: **OCEAN**# of CHARGES **4** CO-DEFTS **0** POLICE CASE #: **25256-22**COMPLAINANT **MICHAEL M DINNEBEIL PTL.**
NAME: **401 CHAMBERS BRIDGE RD**
ATTN WARRANTS
BRICK TOWN NJ 08723DEFENDANT INFORMATION
SEX: **F** EYE COLOR: **BROWN** DOB: **04/14/2000**
DRIVER'S LIC. #: [REDACTED] DL STATE: **NJ**
SOCIAL SECURITY #: [REDACTED] SBI #: **382127H**
TELEPHONE #: [REDACTED] (C)
LIVSCAN PCN #: **150603007908**

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 **04/12/2022** in **BRICK TWP**, **OCEAN** County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, THE DEFENDANT DID COMMIT BURGLARY BY ENTERING AN APARTMENT THROUGH A SLIDING WINDOW AND CAUSING BODILY INJURY, SPECIFICALLY BY HITTING THE VICTIM ON THE SIDE OF THE HEAD WITH A GLASS WINE BOTTLE, RESULTING IN A LACERATION TO THE VICTIM'S HEAD.

WITHIN THE JURISDICTION OF THIS COURT, THE DEFENDANT DID COMMIT AGGRAVATED ASSAULT BY PURPOSELY CAUSING BODILY INJURY TO [REDACTED] BY USE OF A DEADLY WEAPON, SPECIFICALLY BY HITTING HIM OVER THE HEAD WITH A GLASS WINE BOTTLE.

WITHIN THE JURISDICTION OF THIS COURT, THE DEFENDANT KNOWINGLY POSSESSED A WEAPON WITH THE PURPOSE TO USE IT UNLAWFULLY AGAINST [REDACTED] SPECIFICALLY BY POSSESSING A WINE BOTTLE AND HITTING THE VICTIM ON THE HEAD, CAUSING INJURY.

WITHIN THE JURISDICTION OF THIS COURT, KNOWINGLY POSSESS A WEAPON, A 1.5 LITER
in violation of:

Original Charge	1) 2C:18-2B(1)	2) 2C:12-1B(2)	3) 2C:39-4D
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: **MICHAEL M DINNEBEIL PTL.**Date: **04/12/2022**

You will be notified of your Central First Appearance/CJP date to be held at the Superior Court in the county of **OCEAN**
at the following address: **OCEAN SUPERIOR COURT**

120 HOOPER AVE

Date of Arrest: **04/12/2022** Appearance Date:

Time:

TOMS RIVER**NJ 08753-0000**Phone: **732-504-0700**

PROBABLE CAUSE DETERMINATION AND ISSUANCE OF WARRANT

☐ Probable cause **IS NOT** found for the issuance of this complaint.

Signature of Court Administrator or Deputy Court Administrator

Date

Signature of Judge

Date

☒ Probable cause **IS** found for the issuance of this complaint. **JOSEPH GRISANTI JUDICIAL OFFICER** **04/12/2022**

Signature and Title of Judicial Officer Issuing Warrant

Date

TO ANY PEACE OFFICER OR OTHER AUTHORIZED PERSON: PURSUANT TO THIS WARRANT YOU ARE HEREBY COMMANDED TO ARREST THE NAMED DEFENDANT AND BRING THAT PERSON FORTHWITH BEFORE THE COURT TO ANSWER THE COMPLAINT.

Bail Amount Set: _____ by: _____

(if different from judicial officer that issued warrant)

☒ 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 - WARRANT

COMPLAINT NUMBER

1506

W

2022

000255

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

STATE V.

HALAINA A CORWIN

GLASS WINE BOTTLE, UNDER CIRCUMSTANCES NOT MANIFESTLY APPROPRIATE FOR LAWFUL USE, USING IT TO HIT [REDACTED] ON THE HEAD, CAUSING BODILY INJURY.

Original Charge

4) 2C:39-5D

Amended Charge

COMPLAINT - WARRANT

Page 2 of 10

NJ/CDR2 1/1/2017

COMPLAINT – WARRANT (Court Action)

COMPLAINT NUMBER

1506**W****2022****000255**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

STATE V.**HALAINA A CORWIN****FTA Bail Information**

Date Bail Set: _____

Amount Bail Set: \$ _____

by: _____

☐ Bail Recog. AttachedReleased
on Bail
(v)

R.O.R.

Committed
DefaultCommitted
w/o Bail

Place Committed: _____

Date Referred to

County Prosecutor: _____

Date of First
Appearance:☐ 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:18-2B(1)**2) **2C:12-1B(2)**3) **2C:39-4D**

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:**COMPLAINT - WARRANT (Court Action)**

JUDGE'S SIGNATURE _____

DATE _____

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NJ/CDR2 1/1/2017

COMPLAINT – WARRANT (Court Action)

COMPLAINT NUMBER				STATE V.
1506	W	2022	000255	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	HALAINA A CORWIN

FTA Bail Information		Date Bail Set: _____	Amount Bail Set: \$ _____ by: _____	☐ Bail Recog. Attached
Released on Bail (v)	R.O.R.	Committed Default	Committed w/o Bail	Date Referred to County Prosecutor: _____
Place Committed: _____				

Date of First Appearance: _____	☐ Advised of Rights by _____	Defendant Desires Counsel: ☐ Yes ☐ No
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Prosecuting Attorney Information				Defense Counsel Information					
Name: _____				Name: _____					
State	County	Municipal	Other	None	Retained	Public Def	Assigned	Waived	Other

Original Charge	4) 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:	

COMPLAINT - WARRANT

COMPLAINT NUMBER

1506**W****2022****000255**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

THE STATE OF NEW JERSEY**VS.****HALAINA A CORWIN**ADDRESS: **949 HARRISON****TOMS RIVER****NJ 08753-0000****BRICK TOWNSHIP MUNICIPAL COURT**
401 CHAMBERS BRIDGE
BRICK NJ 08723-0000
732-262-1226 COUNTY OF: **OCEAN**# of CHARGES
4CO-DEFTS
0POLICE CASE #:
25256-22

DEFENDANT INFORMATION

SEX: **F** EYE COLOR: **BROWN**DOB: **04/14/2000**

DRIVER'S LIC. #:

DL STATE: **NJ**

SOCIAL SECURITY #:

SBI #: **382127H**

TELEPHONE #:

(c)

LIVSCAN PCN #: **150603007908**COMPLAINANT
NAME: **MICHAEL M DINNEBEIL PTL.**

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 **04/12/2022** in **BRICK TWP**, **OCEAN** County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, THE DEFENDANT DID COMMIT BURGLARY BY ENTERING AN APARTMENT THROUGH A SLIDING WINDOW AND CAUSING BODILY INJURY, SPECIFICALLY BY HITTING THE VICTIM ON THE SIDE OF THE HEAD WITH A GLASS WINE BOTTLE, RESULTING IN A LACERATION TO THE VICTIM'S HEAD.

WITHIN THE JURISDICTION OF THIS COURT, THE DEFENDANT DID COMMIT AGGRAVATED ASSAULT BY PURPOSELY CAUSING BODILY INJURY TO [REDACTED] BY USE OF A DEADLY WEAPON, SPECIFICALLY BY HITTING HIM OVER THE HEAD WITH A GLASS WINE BOTTLE.

WITHIN THE JURISDICTION OF THIS COURT, THE DEFENDANT KNOWINGLY POSSESSED A WEAPON WITH THE PURPOSE TO USE IT UNLAWFULLY AGAINST [REDACTED] SPECIFICALLY BY POSSESSING A WINE BOTTLE AND HITTING THE VICTIM ON THE HEAD, CAUSING INJURY.

WITHIN THE JURISDICTION OF THIS COURT, KNOWINGLY POSSESS A WEAPON, A 1.5 LITER
in violation of:

Original Charge 1) **2C:18-2B(1)** 2) **2C:12-1B(2)** 3) **2C:39-4D**

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: **MICHAEL M DINNEBEIL PTL.**Date: **04/12/2022**You will be notified of your Central First Appearance/CJP date to be held at the Superior Court in the county of **OCEAN**at the following address: **OCEAN SUPERIOR COURT**
120 HOOPER AVE**TOMS RIVER****NJ 08753-0000**Date of Arrest: **04/12/2022**

Appearance Date:

Time:

Phone: **732-504-0700**

PROBABLE CAUSE DETERMINATION AND ISSUANCE OF WARRANT

☐ Probable cause **IS NOT** found for the issuance of this complaint.

Signature of Court Administrator or Deputy Court Administrator

Date

Signature of Judge

Date

☒ Probable cause **IS** found for the issuance of this complaint. **JOSEPH GRISANTI JUDICIAL OFFICER** **04/12/2022**

Signature and Title of Judicial Officer Issuing Warrant

Date

TO ANY PEACE OFFICER OR OTHER AUTHORIZED PERSON: PURSUANT TO THIS WARRANT YOU ARE HEREBY COMMANDED TO ARREST THE NAMED DEFENDANT AND BRING THAT PERSON FORTHWITH BEFORE THE COURT TO ANSWER THE COMPLAINT.

Bail Amount Set: _____ by: _____

(if different from judicial officer that issued warrant)

☒ 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 - WARRANT (DEFENDANT'S COPY)

COMPLAINT - WARRANT

COMPLAINT NUMBER

1506

W

2022

000255

STATE V.

HALAINA A CORWIN

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

GLASS WINE BOTTLE, UNDER CIRCUMSTANCES NOT MANIFESTLY APPROPRIATE FOR LAWFUL USE, USING IT TO HIT [REDACTED] ON THE HEAD, CAUSING BODILY INJURY.

Original Charge

4) 2C:39-5D

Amended Charge

COMPLAINT - WARRANT (DEFENDANT'S COPY)

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NJ/CDR2 1/1/2017

COMMITMENT

COMPLAINT NUMBER

1506**W****2022****000255**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

THE STATE OF NEW JERSEY**VS.****HALAINA A CORWIN**

ADDRESS:

949 HARRISON**TOMS RIVER****NJ 08753-0000****BRICK TOWNSHIP MUNICIPAL COURT
401 CHAMBERS BRIDGE
BRICK NJ 08723-0000
732-262-1226 COUNTY OF: OCEAN**# of CHARGES
4CO-DEFTS
0POLICE CASE #:
25256-22

DEFENDANT INFORMATION

SEX: **F** EYE COLOR: **BROWN**DOB: **04/14/2000**

DRIVER'S LIC. #:

DL STATE: **NJ**

SOCIAL SECURITY #:

SBI #: **382127H**

TELEPHONE #:

(c)LIVSCAN PCN #: **150603007908**COMPLAINANT **MICHAEL M DINNEBEIL PTL.**
NAME: **401 CHAMBERSBRDG RD**
ATTN WARRANTS
BRICK TOWN NJ 08723

To any Law Enforcement Official of New Jersey, You are commanded to transport this defendant to the Warden of this county who is required to keep the defendant in custody until a release or detention decision is made.

	Offense	Aux Offense	Drug Code	Degree	Offense Description
1.	<u>2C:18-2B(1)</u>	<u></u>	<u></u>	<u>2</u>	<u>BURGLARY-INFLIC</u>
2.	<u>2C:12-1B(2)</u>	<u></u>	<u></u>	<u>3</u>	<u>AGG ASSAULT-ATT</u>
3.	<u>2C:39-4D</u>	<u></u>	<u></u>	<u>3</u>	<u>POSS OF WEAPON</u>
4.	<u>2C:39-5D</u>	<u></u>	<u></u>	<u>4</u>	<u>UNLAWFUL POSS W</u>

Commitment Reason: **Criminal Justice Reform**You will be notified of your Central First Appearance/CJP date to be held at the Superior Court
at the following address: **OCEAN SUPERIOR COURT**
120 HOOPER AVEin the county of **OCEAN****TOMS RIVER****NJ 08753-0000**Date of Arrest: **04/12/2022**Phone: **732-504-0700****JOSEPH GRISANTI JUDICIAL OFFICER****04/12/2022**

Signature and Title of Judicial Officer Issuing Warrant

Date

COMMITMENT

Affidavit of Probable Cause

COMPLAINT NUMBER

1506**W****2022****000255**

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
4

CO-DEFTS

POLICE CASE #:
25256-22

COMPLAINANT MICHAEL M DINNEBEIL PTL.
NAME: 401 CHAMBERSBRDG RD
ATTN WARRANTS
BRICK TOWN NJ 08723

*THE STATE OF NEW JERSEY**VS.***HALAINA A CORWIN**

ADDRESS:

949 HARRISON**TOMS RIVER****NJ 08753-0000**

DEFENDANT INFORMATION

SEX: **F** EYE COLOR: **BROWN**DOB: **04/14/2000**

DRIVER'S LIC. #:

DL STATE: **NJ**

SOCIAL SECURITY #:

SBI #: **382127H**

TELEPHONE #:

(C)LIVESCAN PCN #: **150603007908**

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:

THE VICTIM STATED THE DEFENDANT BROKE INTO HIS RESIDENCE, APPROACHED HIM BY HIS BEDROOM DOORWAY AND HIT HIM ON THE HEAD WITH A GLASS WINE BOTTLE. A 1.5 LITER GLASS WINE BOTTLE WAS FOUND ON THE FLOOR BY THE DOORWAY TO THE VICTIM'S BEDROOM.

Affidavit of Probable Cause**Page 8 of 10**

1/1/2017

Affidavit of Probable Cause

COMPLAINT NUMBER

1506

W

2022

000255

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

THE STATE OF NEW JERSEY

VS.

HALAINA A CORWIN

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

THE VICTIM HAD A CUT ON HIS HEAD AND BLOOD ON HIS FACE AND HEAD. A WITNESS STATED HE HEARD A LOUD NOISE FROM DOWNSTAIRS, FOLLOWED BY THE DEFENDANT GOING UP THE STAIRS TOWARDS THE VICTIM'S BEDROOM JUST PRIOR TO THE INCIDENT.

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

THE VICTIM HAD A CUT ON THE SIDE OF HIS HEAD. THE VICTIM WAS TRANSPORTED TO THE HIOSPITAL WHERE HE RECEIVED THREE STAPLES ON HIS HEAD.

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: MICHAEL M DINNEBEIL PTL. LAW ENFORCEMENT OFFICER

Date: 04/12/2022

Affidavit of Probable Cause

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1/1/2017

Preliminary Law Enforcement

COMPLAINT NUMBER			
COURT CODE	PREFIX	YEAR	SEQUENCE NO.
1506	W	2022	000255
BRICK TOWNSHIP MUNICIPAL COURT 401 CHAMBERS BRIDGE BRICK NJ 08723-0000 732-262-1226 COUNTY OF: OCEAN			
# of CHARGES 4	CO-DEFTS	POLICE CASE #: 25256-22	DEFENDANT SEX: F DRIVER'S SOCIAL SE TELEPHON LIVESCAN
COMPLAINANT NAME: MICHAEL M DINNEBEIL PTL. 401 CHAMBERSBRDG RD ATTN WARRANTS BRICK TOWN NJ 08723			

Purpose: The Preliminary Law Enforcement Incident Report (PLEIR) is in time of its preparation. It is recognized that additional relevant information will be provided to, not in lieu of, any regular police arrest, incident, or investigation reports. Note that this is an investigation.

- The offense Involved domestic violence.
 - DVCR was checked.
- ODARA was completed and:
 - Victim has a biological child with someone other than the defendant
 - Two or more indicators of substance abuse
- A weapon was used against this victim, or was threatened to be used
- Relationship changes include:
 - Victim recently left defendant or informed defendant that
- The defendant was known to the victim as:
 - Intimate Partner
- The victim was injured and:
 - Victim transported to medical facility
- A weapon was involved in the incident:
 - Other/Explain GLASS BOTTLE
- The defendant appeared to be under the influence of drugs or alcohol
- The case involved burglary of an occupied structure. The victim:
 - Assaulted/Injured
- A member of the public provided information to a 9-1-1 call center

Certification:

I certify that the foregoing statements made by me are true. I am aware that if a false statement is made, I am subject to punishment.

Signed: MICHAEL M DINNEBEIL PTL. LAW ENFORCEMENT