

BRADLEY D. BILLHIMER
Ocean County Prosecutor

ANTHONY U. CARRINGTON
Chief of Detectives



MICHAEL T. NOLAN, JR.
First Assistant Prosecutor

MICHAEL WEATHERSTONE
Deputy First Assistant Prosecutor

OFFICE OF THE PROSECUTOR
119 Hooper Avenue
P.O. Box 2191
Toms River, New Jersey 08754-2191
732-929-2027
www.OCPONJ.gov

October 22, 2025

Mr. Sean Boero

Via OPRA machine: opra+request-82105-2a2df7e4@requests.opramachine.com

Re: Open Public Records Act (OPRA) request
OCPO Case #25000822

Dear Mr. Boero:

This office is in receipt of your request for records under the New Jersey Open Public Records Act (OPRA). Enclosed please find the Complaint Warrant pursuant to your request. Personal identifying information has been redacted pursuant to N.J.S.A. 47:1A-1.1, et seq. and Rule 1:38-3(d)(10). Additionally, criminal history record information has been redacted pursuant to N.J.A.C. 13:59-2.4.

Please be advised that domestic violence records and reports are confidential pursuant to N.J.S.A. 2C:25-33 and Rule 1:38-3(d)(9). Therefore, your request for any domestic violence reports including any TRO/FRO information is denied.

If I can be of further assistance, please do not hesitate to contact me.

Yours very truly,

/s/Dina R. Khajezadeh
Dina R. Khajezadeh
Assistant Prosecutor

DRK/dk
Enclosures

COMPLAINT - WARRANT

COMPLAINT NUMBER

1516**W****2025****000082**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

LITTLE EGG HARBOR MUNICIPAL CO
665 RADIO ROAD
LITTLE EGG HARB NJ 08087-0000
609-296-7241 COUNTY OF: **OCEAN**

of CHARGES **2** CO-DEFTS. POLICE CASE #: **25LE02685**

COMPLAINANT PTL. **M HAMILTON #114**
NAME: **665 RADIO ROAD**
ATTN WARRANTS
LITTLE EGG HARB NJ 08087

THE STATE OF NEW JERSEY**VS.****CHRISTOPHER J WOOD**

ADDRESS: **820 RADIO RD**

LITTLE EGG HARBOR NJ 08087-0000

DEFENDANT INFORMATION

SEX: **M** EYE COLOR: **BROWN** DOB: [REDACTED] **1981**
DRIVER'S LIC. #: [REDACTED] DL STATE: **NJ**
SOCIAL SECURITY #: [REDACTED] SBI #: [REDACTED]
TELEPHONE #: [REDACTED]
LIVESCAN PCN #: [REDACTED]

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 **03/10/2025** in **LITTLE EGG HARBOR TWP**, **OCEAN** County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, COMMIT ASSAULT BY PURPOSELY, KNOWINGLY OR RECKLESSLY CAUSING BODILY INJURY TO [REDACTED] SPECIFICALLY BY PHYSICALLY GRABBING [REDACTED] FROM BEHIND WITH BOTH ARMS, HOLDING HER ON THE GROUND AND PUSHING HER ON TOP OF A COFFEE TABLE, CAUSING [REDACTED] TO HIT THE BACK OF HER HEAD ON THE COFFEE TABLE WHICH RESULTED IN INJURY (SWELLING) TO THE BACK OF [REDACTED] HEAD, IN DIRECT VIOLATION OF N.J.S.A. 2C:12-1A(1).

WITHIN THE JURISDICTION OF THIS COURT, COMMIT CRIMINAL MISCHIEF BY RECKLESSLY OR NEGLIGENTLY DAMAGING PROPERTY BELONGING TO [REDACTED], CAUSING PECUNIARY LOSS IN THE AMOUNT OF \$100.00, SPECIFICALLY BY BREAKING THE DOORKNOB OF THE STORM DOOR AT THE FRONT OF [REDACTED] RESIDENCE, MAKING IT UNOPERABLE, WHILE ATTEMPTING TO BREAK INTO THE RESIDENCE WHICH IS IN DIRECT VIOLATION OF N.J.S.A. 2C:17-3A(1).

in violation of:

Original Charge	1) 2C:12-1A(1)	2) 2C:17-3A(1)	3)
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: **PTL. M HAMILTON #114**

Date: **03/10/2025**

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:

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. **JODIE TERMI JUDICIAL OFFICER** **03/10/2025**

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 (Court Action)

COMPLAINT NUMBER

1516**W****2025****000082**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

STATE V.**CHRISTOPHER J WOOD****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****Name:**

State

County

Municipal

Other

Defense Counsel Information**Name:**

None

Retained

Public Def

Assigned

Waived

Other

Original Charge

1) **2C:12-1A(1)**2) **2C:17-3A(1)**

3)

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
- 9 - No Bill
- C - Conditional Dismissal
- D - Dismissed - Prosecutor Discretion
- F - Disposed At Family Court
- M - Dismissed - Mediation
- P - Dismissed - Plea Agreement
- R - Disposed in Remand Court
- S - Disposed at Superior
- V - Veteran Diversionary Program
- W - Dismissed - False ID

Related Traffic Tickets and Complaints:**COMPLAINT - WARRANT (Court Action)**

JUDGE'S SIGNATURE _____

DATE _____

Page 2 of 7

NJ/CDR2 1/1/2017

COMPLAINT - WARRANT

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
1516	W	2025	000082	VS.	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	CHRISTOPHER J WOOD	
LITTLE EGG HARBOR MUNICIPAL CO 665 RADIO ROAD LITTLE EGG HARB NJ 08087-0000 609-296-7241 COUNTY OF: OCEAN				ADDRESS: 820 RADIO RD LITTLE EGG HARBOR NJ 08087-0000	
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 25LE02685		DEFENDANT INFORMATION	
COMPLAINANT NAME: PTL. M HAMILTON #114		SEX: M EYE COLOR: BROWN DOB: [REDACTED] 1981		DL STATE: NJ	
		DRIVER'S LIC. # [REDACTED]		SBI #: ()	
		SOCIAL SECURITY #: [REDACTED]		TELEPHONE #: [REDACTED]	
		LIVSCAN PCN #: [REDACTED]			

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 **03/10/2025** in **LITTLE EGG HARBOR TWP**, **OCEAN** County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, COMMIT ASSAULT BY PURPOSELY, KNOWINGLY OR RECKLESSLY CAUSING BODILY INJURY TO **[REDACTED]** SPECIFICALLY BY PHYSICALLY GRABBING **[REDACTED]** FROM BEHIND WITH BOTH ARMS, HOLDING HER ON THE GROUND AND PUSHING HER ON TOP OF A COFFEE TABLE, CAUSING **[REDACTED]** TO HIT THE BACK OF HER HEAD ON THE COFFEE TABLE WHICH RESULTED IN INJURY (SWELLING) TO THE BACK OF **[REDACTED]** HEAD, IN DIRECT VIOLATION OF N.J.S.A. 2C:12-1A(1).

WITHIN THE JURISDICTION OF THIS COURT, COMMIT CRIMINAL MISCHIEF BY RECKLESSLY OR NEGLIGENTLY DAMAGING PROPERTY BELONGING TO **[REDACTED]** CAUSING PECUNIARY LOSS IN THE AMOUNT OF \$100.00, SPECIFICALLY BY BREAKING THE DOORKNOB OF THE STORM DOOR AT THE FRONT OF **[REDACTED]** RESIDENCE, MAKING IT UNOPERABLE, WHILE ATTEMPTING TO BREAK INTO THE RESIDENCE WHICH IS IN DIRECT VIOLATION OF N.J.S.A. 2C:17-3A(1).

in violation of:

Original Charge	1) 2C:12-1A(1)	2) 2C:17-3A(1)	3)
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: **PTL. M HAMILTON #114** Date: **03/10/2025**

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: _____ 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. **JODIE TERMI JUDICIAL OFFICER** **03/10/2025**
 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)

COMMITMENT

COMPLAINT NUMBER

1516**W****2025****000082**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

LITTLE EGG HARBOR MUNICIPAL CO
665 RADIO ROAD
LITTLE EGG HARB NJ 08087-0000
609-296-7241 COUNTY OF: **OCEAN**

of CHARGES
2

CO-DEFTS

POLICE CASE #:

25LE02685COMPLAINANT PTL. **M HAMILTON #114**

NAME: **665 RADIO ROAD**
ATTN WARRANTS
LITTLE EGG HARB

NJ 08087**THE STATE OF NEW JERSEY****VS.****CHRISTOPHER J WOOD**

ADDRESS: **820 RADIO RD**

LITTLE EGG HARBOR NJ 08087-0000

DEFENDANT INFORMATION

SEX: **M** EYE COLOR: **BROWN**DOB: **[REDACTED] 1981**

DRIVER'S LIC. #:

DL STATE: **NJ**

SOCIAL SECURITY #:

SBI #:

TELEPHONE #:

()

LIVESCAN PCN #:

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.

2.

3.

4.

Commitment Reason:

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:

Phone: **732-504-0700**

Signature and Title of Judicial Officer Issuing Warrant

Date

COMMITMENT

Affidavit of Probable Cause

COMPLAINT NUMBER

1516**W****2025****000082**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

LITTLE EGG HARBOR MUNICIPAL CO
665 RADIO ROAD
LITTLE EGG HARB NJ 08087-0000
609-296-7241 COUNTY OF: **OCEAN**

of CHARGES
2

CO-DEFTS

POLICE CASE #:
25LE02685COMPLAINANT PTL. **M HAMILTON #114**

NAME: **665 RADIO ROAD**
ATTN WARRANTS
LITTLE EGG HARB NJ 08087

THE STATE OF NEW JERSEY**VS.****CHRISTOPHER J WOOD**

ADDRESS: **820 RADIO RD**

LITTLE EGG HARBOR NJ 08087-0000

DEFENDANT INFORMATION

SEX: **M** EYE COLOR: **BROWN** DOB: [REDACTED] **1981**DRIVER'S LIC. #: [REDACTED] DL STATE: **NJ**

SOCIAL SECURITY #: [REDACTED] SBI#: [REDACTED]

TELEPHONE #: [REDACTED] ()

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 WERE DISPATCHED TO [REDACTED] RESIDENCE IN REFERENCE TO A POSSIBLE DOMESTIC DISTURBANCE WHICH WAS CALLED IN BY A NEIGHBOR. UPON ARRIVAL OFFICERS SPOKE WITH [REDACTED] WHO STATED CHRISTOPHER WOODS JUST LEFT THE RESIDENCE. [REDACTED] STATED CHRISTOPHER BROKE HER FRONT DOOR AND ENTERED HER HOME. [REDACTED] STATED CHRISTOPHER GRABBED HER FROM BEHIND, PUSHED HER TO THE GROUND, AND PUSHED HER INTO A COFFEE TABLE CAUSING INJURY (SWELLING) TO THE BACK OF [REDACTED] HEAD. [REDACTED] ALSO HAD HAIR THAT WAS FALLING OUT OF HER HEAD, WHICH SHE STATED RESULTED FROM THE ALTERCATION.

Affidavit of Probable Cause**Page 5 of 7****1/1/2017**

Affidavit of Probable Cause

COMPLAINT NUMBER

1516

W

2025

000082

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

THE STATE OF NEW JERSEY

VS.

CHRISTOPHER J WOOD

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

STATEMENTS. I ALSO FELT THE BACK OF HEAD WHICH WAS SWOLLEN, CONSISTENT WITH STATEMENTS. I ALSO OBSERVED THE FRONT STORM DOOR TO HAVE APPARENT DAMAGE TO THE DOOR KNOB AREA.

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

HAD AN INJURY (SWELLING) TO THE BACK OF HER HEAD FROM THE INCIDENT.

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: PTL. M HAMILTON #114 LAW ENFORCEMENT OFFICER

Date: 03/10/2025

Affidavit of Probable Cause

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1/1/2017

Preliminary Law Enforcement Incident Report

COMPLAINT NUMBER

1516**W****2025****000082**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

LITTLE EGG HARBOR MUNICIPAL CO
665 RADIO ROAD
LITTLE EGG HARB NJ 08087-0000
609-296-7241 COUNTY OF: **OCEAN**

ADDRESS:

820 RADIO RD**LITTLE EGG HARBOR****NJ 08087-0000**# of CHARGES
2

CO-DEFTS

POLICE CASE #:
25LE02685

DEFENDANT INFORMATION

SEX: **M** EYE COLOR: **BROWN**DOB: **[REDACTED]** 1981

DRIVER'S LIC. #:

DL STATE: **NJ**

SOCIAL SECURITY #:

SBI #:

TELEPHONE #:

()

LIVSCAN PCN #:

COMPLAINANT PTL. **M HAMILTON #114**

NAME:

665 RADIO ROAD**ATTN WARRANTS****LITTLE EGG HARB****NJ 08087**

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 offense Involved domestic violence.

-ODARA was completed and:

- Victim concern about future assaults

- Victim and/or Defendant have more than 1 child altogether

-The defendant was known to the victim as:

- Intimate Partner

-The victim was injured and:

- Victim refused treatment

-Child(ren) were present at the time of the offense and:

- Other/Explain [REDACTED] was present.

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: **PTL. M HAMILTON #114 LAW ENFORCEMENT OFFICER**Date: **03/10/2025****Preliminary Law Enforcement Incident Report****Page 7 of 7****7/20/2018**