

#1

Kathy Schmelz

From: ASK NJ Media Co. <opra+request-3878-cd36f7d9@requests.opramachine.com>
Sent: Sunday, February 03, 2019 8:52 AM
To: Kathy Schmelz
Subject: OPRA request - Different Police Department Annual Summary Reports

Dear Long Branch City,

This is an OPRA request. Please send your response in PDF form.

1. I seek your police department's Internal Affairs Annual Summary Reports for the year of 2018.
2. I seek a copy of the police department's Public Synopsis of Disciplinary Actions for the year 2018. This report is required pursuant to Requirement 10 of the Attorney General's Internal Affairs Police.
3. I seek a copy of the police department's Vehicular Pursuit Summary Reports for the year 2018.
4. I would like all of your police department's Use of Force Reports from January 1, 2019 to January 31, 2019.
5. I would like all of your police department's Police Use of Deadly Force Attorney General Deadly Notification Reports for the year 2018.

Yours faithfully,

ASK NJ Media Co.

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-3878-cd36f7d9@requests.opramachine.com

Is kschmelz@longbranch.org the wrong address for OPRA requests to Long Branch City? If so, please contact us using this form:
https://opramachine.com/change_request/new?body=long_branch_city

Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:
<https://opramachine.com/help/officers>

View this OPRA request & responses online:
https://opramachine.com/request/different_police_department_annu_165

Please note that in some cases publication of requests and responses will be delayed.

If you find this service useful as an OPRA custodian, please ask your web manager to link to us from your organisation's website.

Completed 2/12/19

*To: Chief Rodruck
Capt. Bred
Lt. Shirley
Records*

Due: 2/13/19

INTERNAL AFFAIRS SUMMARY REPORT

Agency: Long Branch Police Department

County: Monmouth

Reporting Period: ☐ 1st Quarter (Jan.-Mar.)

☐ 3rd Quarter (July-Sept.)

☒ Annual

☐ 2nd Quarter (Apr.-June)

☐ 4th Quarter (Oct.-Dec.)

(End-of-Year)

Type of Complaint	Anonymous Complaints	Citizen Complaints	Agency Complaints	Total Complaints	Sustained	Exonerated	Not Sustained	Unfounded	Administratively Closed	Total Dispositions	Pending Investigations
Excessive Force	0	3	1	4	0	1	0	0	2	3	1
Improper Arrest	0	0	0	0	0	0	0	0	0	0	0
Improper Entry	0	0	0	0	0	0	0	0	0	0	0
Improper Search	0	0	0	0	0	0	0	0	0	0	0
Other Criminal Violation	0	5	1	6	0	2	1	1	1	5	2
Differential Treatment	0	0	0	0	0	1	0	0	0	1	0
Demeanor	0	11	0	11	1	8	4	1	0	14	0
Domestic Violence	0	0	0	0	0	0	0	0	0	0	0
Other Rule Violation *	0	1	10	11	5	2	1	0	1	9	3
Total	0	20	12	32	6	14	6	2	4	32	6

* As defined in the Types of Complaints Section of the AG Guidelines pertaining to Internal Affairs.

Court	Cases Dismissed	Cases Diverted	Acquittals	Convictions
Municipal Court	0	0	0	0
Superior Court	0	0	0	0
Total	0	0	0	0



Monmouth County Police Pursuit Report

Agency: Long Branch Police Department

Reporting Period : January 1, 2018 - December 31, 20

Person Completing Report: Captain Joshua Bard

Telephone Number: 732-222-1000 x1300

Date Completed: January 10, 2019

1. Number of pursuits initiated	5
2. Number of pursuits resulting in accidents	1
3. Number of pursuits resulting in injury (NO DEATHS)	0
4. Number of pursuits resulting in death	0
5. Number of pursuits resulting in arrest	1
6. Number of vehicles in accidents	
a. Pursued vehicles	1
b. Police vehicles	1
c. Third party vehicles	0
7. Number of people injured	
a. Pursued vehicles	0
b. Police vehicles	0
c. Third party vehicles	0
d. Pedestrians	0
8. Number of people killed	
a. Pursued vehicles	0
b. Police vehicles	0
c. Third party vehicles	0
d. Pedestrians	0
9. Number of people arrested	1
10. Number of pursuits in which a tire deflation device was used	0
11. I certify that every police officer employed by this agency received in-service vehicular pursuit training twice this year in compliance with The Attorney General's & the Monmouth County Prosecutor's Office Vehicular Pursuit policies.	☒

Do not type into dark shaded areas of the form.

MONMOUTH COUNTY USE OF FORCE END OF YEAR REPORT

Agency: Long Branch Police Department
Reporting Period: January 1, 2018 - December 31, 2018
Person Completing Report: Captain Joshua Bard
Date Completed: 1/10/2019

1. Total number of incidents which necessitated the use of force: 70
Notes:
If 3 officers used force in one event, that equals 1 incident.
If all of the Use of Force Reports filed contain the same incident or case number, that equals 1 incident.
2. Total number of Use of Force Reports filed during the reporting period: 147
Notes:
Regardless of incident or case numbers, how many Use of Force Reports were filed for the reporting period?
3. Total number of persons against whom force was used: 78
Notes:
Regardless of incident or case numbers, how many people had force used against them during the reporting period?
4. Total number of times non-deadly force was used by law enforcement officers during the reporting period: 70
Notes:
Physical force – wrestling; wrist or arm locks; striking with hands or feet; or other methods of hand-to-hand confrontation.
Mechanical force – baton; PR24 or other object; canine physical contact with a subject; or chemical or natural agent spraying.
5. Total number of incidents in which a Conducted Energy Device was used by a law enforcement officer against a subject during the reporting period: 0
6. Total number of incidents involving the discharge of a firearm by a law enforcement officer as a means of deadly force: 0

Submit

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 19LB00195

UF 2019-00

A. Incident Information

Date: 01/03/2019	Time: 1025	Day of Week: Thursday	Location: 135 Rockwell Avenue
Type of Incident:	☐ Crime in Progress	☐ Domestic	Type of Person: ☐ Under the Influence
	☐ Suspicious Person	☒ Traffic Violation	☐ Other Type of Call (Specify)
	☒ Other Type of Call (Specify) Foot Pursuit	☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Bruce Wilson	☒ Yes ☐ No	2C: 29-2a(2) 2C: 35-10a(4)	M	BLK	45	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used:	☒ Compliance Hold	☒ Hands / Fists	Firearms Discharge: ☐ Intentional
	☐ Chemical/Natural Agent	☐ Kicks/Feet	☐ Accidental
	☐ Strike/Use Baton or Other Object	☐ Canine	No. of shots fired ____
	☐ Other Force. Specify:		No. of hits ____
			Use 'UNK' if unknown

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Yutko, Mark, Joseph	361	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature	Police Officer Assignment Patrol				
Supervisor Name	Supervisor Signature				

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 19LB00195

A. Incident Information

Date: 01/03/2019	Time: 1025	Day of Week: Thursday	Location: 135 Rockwell Avenue
Type of Incident:		Type of Person:	
☐ Crime in Progress ☐ Suspicious Person ☒ Other Type of Call (Specify) <i>Foot Pursuit</i>		☐ Domestic ☒ Traffic Violation ☐ Other Dispute	
☐ Under the Influence ☐ Other Type of Call (Specify)			

(Check only if unusual condition in person exists)

B. Suspect(s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge(s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Bruce Wilson	☒ Yes ☐ No	2C: 29 - 2a (3) 2C: 35 - 10a (4)	M	BLK	45	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Davies IV, William, John	365	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature <i>[Signature]</i>			Police Officer Assignment Patrol		
Supervisor Name <i>Sgt Robert Shamrock</i>			Supervisor Signature <i>[Signature]</i>		

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
<i>Corcoran, J. L.</i>	<i>360</i>	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature		Police Officer Assignment			
<i>[Signature]</i> <i>360</i>		<i>Patrol</i>			
Supervisor Name		Supervisor Signature			
<i>Stanley M. Murney</i>		<i>[Signature]</i> <i>253</i>			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 19LB01028

19-0003

A. Incident Information

Date: 01/14/2019		Time: 0052		Day of Week: Monday		Location: Joline/Washington	
Type of Incident:		☐ Crime in Progress		☐ Domestic		Type of Person: ☐ Under the Influence	
☐ Crisis		☐ Suspicious Person		☒ Traffic Violation		☐ Other Type of Call (Specify)	
☐ Other Type of Call (Specify)		☐ Other Dispute					

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Coleman, Devante	☒ Yes ☐ No	Destruction Resisting Arrest	M	Black	23	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold		☐ Hands / Fists	Firearms Discharge: ☐ Intentional
☐ Chemical/Natural Agent		☐ Kicks/Feet	☐ Accidental
☐ Strike/Use Baton or Other Object		☐ Canine	No. of shots fired ____
☐ Other Force. Specify: _____			No. of hits ____
			Use 'UNK' if unknown

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Presley, Robert	376	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature: <i>Robert Presley</i>		Police Officer Assignment			
Supervisor Name: <i>Stanley Momen</i>		Supervisor Signature: <i>[Signature]</i>			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **19LB01**

UF2019-004
19LB0119

A. Incident Information

Date: 01/15/19	Time: 20:03	Day of Week: Tuesday	Location: 4th Avenue/Broadway
Type of Incident:	☐ Crime in Progress	☐ Domestic	Type of Person: ☒ Under the Influence
	☐ Suspicious Person	☒ Traffic Violation	☐ Other Type of Call (Specify)
	☐ Other Type of Call (Specify)	☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Voodhouse, Alen	☒ Yes ☐ No	2C:29-2	F	B	28	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used:	☒ Compliance Hold	☐ Hands / Fists	Firearms Discharge: ☐ Intentional
	☐ Chemical/Natural Agent	☐ Kicks/Feet	☐ Accidental
	☐ Strike/Use Baton or Other Object	☐ Canine	No. of shots fired _____
	☐ Other Force. Specify:		No. of hits _____
			Use 'UNK' if unknown

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Akel, Omar	351	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature	Police Officer Assignment Patrolman				
Supervisor Name	Supervisor Signature				

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

UF2019-004
INCIDENT NUMBER: **19LB01**
19LB01147

A. Incident Information

Date: 01/15/19	Time: 20:03	Day of Week: Tuesday	Location: 4th Avenue/Broadway
Type of Incident: ☐ Crime in Progress		☐ Domestic	Type of Person: ☒ Under the Influence
☐ Suspicious Person		☒ Traffic Violation	☐ Other Type of Call (Specify)
☐ Other Type of Call (Specify)		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Woodhouse, Alen	☒ Yes ☐ No	2C:29-2	F	B	28	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Gould, Daniel	359	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature: <i>[Signature]</i>		Police Officer Assignment: Patrolman			
Supervisor Name: Sgt. Michael Doherty		Supervisor Signature: <i>[Signature]</i>			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 19LB01582
042019-025

A. Incident Information

Date: 1/20/19	Time: 00:44	Day of Week: Sunday	Location: 71 Bayview Ave (The mix)
Type of Incident:		Type of Person:	
☐ Crime in Progress ☐ Suspicious Person ☒ Other Type of Call (Specify) <u>Fight</u>		☐ Domestic ☐ Traffic Violation ☐ Other Dispute ☒ Under the Influence ☐ Other Type of Call (Specify)	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Sosa Rosario Jr	☒ Yes ☐ No	20:35 - 2AC11 Disobeying 20:29 - 2AC11 Resisting	m	w	50	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☐	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☒ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Page, Dennis	355	☒ Yes ☐ No	☒ Yes ☐ No	☒ Yes ☐ No	☒ Yes ☐ No
Signature: <u>Page, Dennis</u>		Police Officer Assignment: <u>Patrol</u>			
Supervisor Name: <u>Sgt J. B...</u>		Supervisor Signature: <u>[Signature]</u>			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 19LB01582
19-0019-005

A. Incident Information

Date: 01/10/19	Time: 00:45	Day of Week: Sunday	Location: 71 Brighton Ave The Annex
Type of Incident:	☐ Crime in Progress	☐ Domestic	Type of Person: ☒ Under the Influence
☐ Suspicious Person	☐ Traffic Violation	☐ Other Type of Call (Specify)	
☒ Other Type of Call (Specify) FISH	☐ Other Dispute		

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Cottelone, Michael D	☒ Yes	Resisting arrest	M	W	46	☐ Yes	☐ Yes	☐ Yes
	☐ No	Disorderly				☒ No	☒ No	☒ No
	☐ Yes					☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	☐ No
	☐ Yes					☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	☐ No

(Check yes only for injury/hospital resulting from police use of force)

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used:	☒ Compliance Hold	☐ Hands / Fists	Firearms Discharge:	☐ Intentional
☐ Chemical/Natural Agent	☐ Kicks/Feet	☐ Accidental		
☐ Strike/Use Baton or Other Object	☐ Canine	No. of shots fired		
☐ Other Force. Specify:		No. of hits		
		Use 'UNK' if unknown		

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Presley, Robert	376	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature	Police Officer Assignment				
Supervisor Name	Supervisor Signature				
Sgt. Brune #354					

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 19LB01582

A. Incident Information

Date: 1/20/2019	Time: 01:00	Day of Week: Sunday	Location: 71 BRIGHTON AVE (MIX)
Type of Incident:	Crime in Progress	☐ Domestic	Type of Person: ☒ Under the Influence
☐ Suspicious Person	☐ Traffic Violation	☐ Other Type of Call (Specify)	
☒ Other Type of Call (Specify)	☐ Other Dispute		

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
MICHAEL CATTELONA	☒ Yes	DISORDERLY CONDUCT	M	W	46	☐ Yes	☐ Yes	☐ Yes
	☐ No	RESISTING ARREST				☒ No	☒ No	☒ No
	☐ Yes					☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	☐ No
	☐ Yes					☐ Yes	☐ Yes	☐ Yes
	☐ No					☐ No	☐ No	☐ No

(Check yes only for injury/hospital resulting from police use of force)

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used:	☐ Compliance Hold	☒ Hands / Fists	Firearms Discharge:	☐ Intentional
	☒ Chemical/Natural Agent	☐ Kicks/Feet		☐ Accidental
	☐ Strike/Use Baton or Other Object	☐ Canine		No. of shots fired _____
	☐ Other Force. Specify:			No. of hits _____
				Use 'UNK' if unknown

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
JOYCE PATRICK	326	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature	Police Officer Assignment				
Supervisor Name	PATROL ZONE 5				
	Supervisor Signature				

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: 19LB01736

2019-006-118

A. Incident Information

Date: 1/22/19	Time: 0243	Day of Week: Tuesday	Location: 344 Broadway
Type of Incident:		Type of Person:	
☐ Crime in Progress ☐ Suspicious Person ☒ Other Type of Call (Specify) Uncooperative Arrestee		☒ Domestic ☐ Traffic Violation ☐ Other Dispute ☒ Under the Influence ☐ Other Type of Call (Specify)	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Brophy, Christian	☒ Yes ☐ No	Simple Assault	M	W	22	☐ Yes ☒ No	☐ Yes ☒ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify] Attempted to Spit on Officers	☒	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired <u>0</u> No. of hits <u>0</u> Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Roselli, Vincent	350	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☒ No
Signature <i>[Signature]</i>		Police Officer Assignment			
Supervisor Name		Patrol			
Lt. Mooney #263		Supervisor Signature <i>[Signature]</i>			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

INCIDENT NUMBER: **19LB01736**

291-006-006

A. Incident Information

Date: 1/22/19	Time: 0243	Day of Week: Tuesday	Location: 344 Broadway
Type of Incident:		Type of Person:	
☐ Crime in Progress ☐ Suspicious Person ☒ Other Type of Call (Specify) Uncooperative Arrestee		☒ Domestic ☐ Traffic Violation ☐ Other Dispute ☒ Under the Influence ☐ Other Type of Call (Specify)	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Brophy, Christian	☒ Yes ☐ No	Simple Assault	M	W	22	☐ Yes ☒ No	☐ Yes ☒ No	☒ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No		M	W		☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify] Attempted to Spit on Officers	☒	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☐ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired <u>0</u> No. of hits <u>0</u> Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Venichore, Jerry	343	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☒ No
Signature		Police Officer Assignment			
<i>[Signature]</i>		Patrol			
Supervisor Name		Supervisor Signature			
Lt. Mooney #263		<i>[Signature]</i>			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

2019-007-VOF
INCIDENT NUMBER: 19LB01983

A. Incident Information

Date: 01/24/19	Time: 1:46	Day of Week: Thursday	Location: 654 Cross Street
Type of Incident: ☐ Crime in Progress ☒ Domestic		Type of Person: ☐ Under the Influence	
☐ Crisis	☐ Suspicious Person	☐ Traffic Violation	☐ Other Type of Call (Specify)
☐ Other Type of Call (Specify)		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Colon, Charles	☒ Yes ☐ No	2C:29-1 2C:12-1B(5)(a) 2C:29-2A	M	W	22	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☒	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☒ Hands / Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify:	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired _____ No. of hits _____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Colon, Charles	366	☒ Yes ☐ No	☒ Yes ☐ No	☐ Yes ☒ No	☐ Yes ☒ No
Signature		Police Officer Assignment			
Supervisor Name		Supervisor Signature			

LONG BRANCH POLICE DEPARTMENT

USE OF FORCE REPORT

2019-007-UF
INCIDENT NUMBER: 19LB01983

A. Incident Information

Date: 01/24/19	Time: 11:46	Day of Week: Thursday	Location: 654 Cypress St
Type of Incident: ☐ Crime in Progress ☒ Domestic		Type of Person: ☐ Under the Influence	
☐ Crisis	☐ Suspicious Person	☐ Traffic Violation	☐ Other Type of Call (Specify)
☐ Other Type of Call (Specify)		☐ Other Dispute	

(Check only if unusual condition in person exists)

B. Suspect (s) Information (only those persons who were subject to police use of force)

Name (Last, First, Middle)	Arrest?	Charge (s)	Sex	Race	Age	Weapon?	Suspect Injured?	Hospital?
Colon, Charles	☒ Yes ☐ No	2C: 24- 2C: 12-1B(5)(A)	M	W	22	☐ Yes ☒ No	☐ Yes ☒ No	☐ Yes ☒ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
	☐ Yes ☐ No					☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Resistance

Suspect...	Suspect #1	Suspect #2	Suspect #3
...Resisted Police Officer control	☒	☐	☐
...Physical threat/attack on Police Officer	☐	☐	☐
...Threatened/attacked Police Officer with blunt object	☐	☐	☐
...Threatened/attacked Police Officer with knife/cutting object	☐	☐	☐
...Threatened/attacked Police Officer with motor vehicle	☐	☐	☐
...Threatened Police Officer with firearm	☐	☐	☐
...Fired at Police Officer	☐	☐	☐
...Other [Specify]	☐	☐	☐

D. Type of Force Used (check all that apply)

Type of Force Used: ☒ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☐ Other Force. Specify:	☒ Hands / Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☐ Accidental No. of shots fired ____ No. of hits ____ Use 'UNK' if unknown
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured	Taken to Hospital?
Julio Piacam	278	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No
Signature 			Police Officer Assignment		
Supervisor Name: Antonio Gomez			Supervisor Signature: 		