



LAKEWOOD TOWNSHIP POLICE DEPARTMENT

Officer Report for Incident 23-099174

Nature: HARASSMENT
Location: A5

Address: 321 2ND ST
LAKEWOOD NJ 08701

Offense Codes:

Received By: DIAZ M

How Received: T

Agency: LPD

Responding Officers:

Responsible Officer: RENNA V

Disposition: ACT 11/22/23

When Reported: 14:25:08 11/22/23

Occurred Between: 14:25:00 11/22/23 and 14:26:01 11/22/23

Assigned To:

Detail:

Date Assigned: **/**/**

Status:

Status Date: **/**/**

Due Date: **/**/**

Complainant:

Last:

First:

Mid:

DOB: **/**/**

Dr Lic:

Address:

Race: **Sex:**

Phone:

City: ,

Offense Codes

Reported:

Observed:

Circumstances

LT05 Commercial or Office Building

Responding Officers:

RENNA V

Unit :

341

Responsible Officer: RENNA V

Agency: LPD

Received By: DIAZ M

Last Radio Log: 15:06:19 11/22/23 FI

How Received: T TELEPHONE

Clearance: RC REPORT COMPLETED

When Reported: 14:25:08 11/22/23

Disposition: ACT **Date:** 11/22/23

Judicial Status:

Occurred between: 14:25:00 11/22/23

Misc Entry:

and: 14:26:01 11/22/23

Modus Operandi:

Description :

Method :

Day of Week

Preferred Day of Week

Wednesday

Involvements

Date	Type	Description	
11/22/23	Name	FAKTOR, EDWARD C	Complainant
11/22/23	Name	GORTNER, ROBERT	Involved
11/22/23	Cad Call	14:25:08 11/22/23 HARASSMENT	Initiating Call

Narrative

On 11-22-2023, I Officer Vito Renna #341 was dispatched to 321 Second St (Lakewood Family Dentistry) for a harassment report. Upon arrival I spoke with the complainant identified as Edward Faktor who had the following to report.

[REDACTED]

[REDACTED] Faktor stated he wanted to document the incident and was advised of complaint procedures. End of report.

Submitted by: Ofc. Vito Renna #341

Date: 11-22-2023

Name Involvements:**Complainant :** 62832**Last:** FAKTOR**First:** EDWARD**Mid:** C**DOB:** 01/██/62**Dr Lic:** ██████████**Address:** 10 AMANDA LN**Race:** W**Sex:** M**Phone:** ██████████**City:** HOWELL, NJ 07731-8942**Involved :** 363865**Last:** GORTNER**First:** ROBERT**Mid:****DOB:** 01/██/47**Dr Lic:****Address:** 256 STONE RD**Race:** U**Sex:** M**Phone:****City:** WEST CREEK, NJ 08092