COMPLAINT - WARRANT

COMPLAINT NUMBER			
1331	W	2020	000344
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

MIDDLETOWN TWP MUNICIPAL COURT
1 KINGS HWY TWP HALL
MIDDLETOWN NJ 07748-0000
732-615-2036 COUNTY OF: MONMOUTH

# of CHARGES	CO-DEFTS	POLICE CASE #:
1		20MT34477

COMPLAINANT NAME: DET D SULLIVAN
1 KINGS HWY
ATTN: WARRANT DEPT
MIDDLETOWN NJ 07748

THE STATE OF NEW JERSEY
VS.
JOHNATHON J STERN

ADDRESS: 95 BAYSIDE PARKWAY
MIDDLETOWN NJ 07748-0000

DEFENDANT INFORMATION
SEX: M EYE COLOR: BROWN DOB: 01/24/1991
DRIVER'S LIC. #. [redacted] DL STATE: [redacted]
SOCIAL SECURITY #: xxx-xx-x[redacted] SBI #: 308348H
TELEPHONE #: [redacted] (C)
LIVESCAN PCN #: 133103003764

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 08/02/2020 in MIDDLETOWN TWP , MONMOUTH County,NJ did:
WITHIN THE JURISDICTION OF THIS COURT, THE DEFENDANT DID KNOWINGLY CHOKE THE VICTIM DURING THE COURSE DOMESTIC DISPUTE CAUSING VISIBLE MARKINGS AROUND THE NECK AND A COMPLAINT OF PAIN IN THE NECK AREA.

in violation of:

Original Charge	1) 2C:12-1B(13)	2)	3)
AmendedCharge			

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: DET D SULLIVAN **Date:** 08/02/2020

You will be notified of your Central First Appearance/CJP date to be held at the Superior Court in the county of MONMOUTH
at the following address: MONMOUTH COUNTY COURTS
71 MONUMENT PARK PO BOX 1271 FREEHOLD NJ 07728-0000
Date of Arrest: 08/02/2020 **Appearance Date:** **Time:** **Phone:** 732-358-8700

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. VICKI WHELAN JUDICIAL OFFICER 08/02/2020
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

Affidavit of Probable Cause

COMPLAINT NUMBER			
1331	W	2020	000344
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

MIDDLETOWN TWP MUNICIPAL COURT
1 KINGS HWY TWP HALL
MIDDLETOWN NJ 07748-0000
732-615-2036 COUNTY OF: MONMOUTH

# of CHARGES	CO-DEFTS	POLICE CASE #:
1		20MT34477

COMPLAINANT NAME: DET D SULLIVAN
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VS.
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ADDRESS: 95 BAYSIDE PARKWAY
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DEFENDANT INFORMATION
SEX: M EYE COLOR: BROWN DOB: 01/24/1991
DRIVER'S LIC. #: [redacted] DL STATE: [redacted]
SOCIAL SECURITY #: xxx-xx-x[redacted] SBI #: 308348H
TELEPHONE #: [redacted] (C)
LIVESCAN PCN #: 133103003764

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:

DEFENDANT ADMITTED TO A VERBAL ARGUMENT WITH THE VICTIM AS WELL AS PUSHING THE VICTIM. THE VICTIM STATED SHE WAS ASSAULTED AND CHOKED BY THE DEFENDANT AND VISIBLE MARKINGS AND A COMPLAINT OF PAIN WERE PRESENT.

Affidavit of Probable Cause

COMPLAINT NUMBER			
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THE STATE OF NEW JERSEY
VS.
JOHNATHON J STERN

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

OBSERVATION AND VICTIM STATEMENT

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

RED MARKS AROUND THE NECK AREA AND A COMPLAINT OF PAIN TO THE NECK AREA

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: DET D SULLIVAN LAW ENFORCEMENT OFFICER Date: 08/02/2020

Preliminary Law Enforcement Incident Report

COMPLAINT NUMBER			
1331	W	2020	000344
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

THE STATE OF NEW JERSEY
VS.
JOHNATHON J STERN

MIDDLETOWN TWP MUNICIPAL COURT
1 KINGS HWY TWP HALL
MIDDLETOWN NJ 07748-0000
732-615-2036 COUNTY OF: MONMOUTH

ADDRESS: 95 BAYSIDE PARKWAY
MIDDLETOWN NJ 07748-0000

# of CHARGES	CO-DEFTS	POLICE CASE #:
1		20MT34477

COMPLAINANT NAME: DET D SULLIVAN
1 KINGS HWY
ATTN: WARRANT DEPT
MIDDLETOWN NJ 07748

DEFENDANT INFORMATION
SEX: M EYE COLOR: BROWN DOB: 01/24/1991
DRIVER'S LIC. #: [redacted] DL STATE: [redacted]
SOCIAL SECURITY #: xxx-xx-x[redacted] SBI #: 308348H
TELEPHONE #: [redacted] (C)
LIVESCAN PCN #: 133103003764

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.
- •DVCR was checked.

-ODARA was completed and:
- •Threat to harm or kill anyone at the Index Assault
- •Victim concern about future assaults
- •Victim and/or Defendant have more than 1 child altogether
- •Prior domestic incident of assault in a police report or criminal record (against current or former Partner or Partners child)

-The defendant attempted to or did strangle the victim during this incident or at any time prior thereto.

-Defendant characteristics include:
- •The defendant has a history of stalking, harassment, or terroristic threats (toward any victim)
- •The defendant is unemployed or has a history of chronic unemployment

-The charge was based on the observations/statements made by an eyewitness(es).
- •The witness statement(s) were recorded via:
  - *Written statement

-The defendant made statements/admissions.

-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 CHILDREN WERE PRESENT

-The police received relevant information via radio from a 911 dispatcher (or similar).

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: DET D SULLIVAN LAW ENFORCEMENT OFFICER **Date:** 08/02/2020

COMPLAINT - WARRANT

COMPLAINT NUMBER			
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ADDRESS: 95 BAYSIDE PARKWAY
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# of CHARGES	CO-DEFTS	POLICE CASE #:
1		20MT34477

COMPLAINANT NAME: DET SULLIVAN
1 KINGS HIGHWAY
MIDDLETOWN NJ 07748

DEFENDANT INFORMATION
SEX: M EYE COLOR: BROWN DOB: 01/24/1991
DRIVER'S LIC. #: [redacted] DL STATE: [redacted]
SOCIAL SECURITY #: xxx-xx-[redacted] SBI #:
TELEPHONE #: [redacted] (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 08/02/2020 in MIDDLETOWN TWP , MONMOUTH County,NJ did:
WITHIN THE JURISDICTION OF THIS COURT, THE DEFENDANT PURPOSELY AND KNOWINGLY DID COMMIT THE OFFENSE OF ENDANGERING THE WELFARE OF A CHILD, SPECIFICALLY BY CHOKING THE VICTIM DURING A DOMESTIC DISPUTE, CAUSING VISIBLE MARKINGS AROUND THE NECK, ALONG WITH COMPLAINT OF PAIN IN FRONT OF JUVENILE " PS ", WHOM THE DEFENDANT HAD A LEGAL DUTY TO CARE FOR THE JUVENILE. THIS IS IN VIOLATION OF NJSA 2C:24-4A(2). THIS CONSTITUTES A CRIME IN THE 2ND DEGREE.

in violation of:

Original Charge	1) 2C:24-4A(2)	2)	3)
AmendedCharge			

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: DET D SULLIVAN **Date:** 08/05/2020

You will be notified of your Central First Appearance/CJP date to be held at the Superior Court in the county of MONMOUTH
at the following address: MONMOUTH COUNTY COURTS
71 MONUMENT PARK PO BOX 1271 FREEHOLD NJ 07728-0000
Date of Arrest: **Appearance Date:** **Time:** **Phone:** 732-358-8700

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. VICKI WHELAN JUDICIAL OFFICER 08/05/2020
Signature and Title of Judicial Officer Issuing Warrant — Date

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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**
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- ☐ **Other** (specify):

ORIGINAL

Affidavit of Probable Cause

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1 KINGS HWY TWP HALL
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THE STATE OF NEW JERSEY
VS.
JOHNATHON J STERN

ADDRESS: 95 BAYSIDE PARKWAY
MIDDLETOWN NJ 07748-0000

# of CHARGES	CO-DEFTS	POLICE CASE #:
1		20MT34477

COMPLAINANT NAME: DET SULLIVAN
1 KINGS HIGHWAY
MIDDLETOWN NJ 07748

DEFENDANT INFORMATION
SEX: M EYE COLOR: BROWN DOB: 01/24/1991
DRIVER'S LIC. #: [redacted] DL STATE: [redacted]
SOCIAL SECURITY #: xxx-xx-x[redacted] SBI #:
TELEPHONE #: [redacted] (C)
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:

OFFICER INVESTIGATION
JUVENILE ORAL STATEMENT ON SCENE

Affidavit of Probable Cause

COMPLAINT NUMBER			
1331	W	2020	000347
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THE STATE OF NEW JERSEY
VS.
JOHNATHON J STERN

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

OFFICER INVESTIGATION
JUVENILE ORAL STATEMENT ON SCENE

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: DET D SULLIVAN LAW ENFORCEMENT OFFICER Date: 08/05/2020

Preliminary Law Enforcement Incident Report

COMPLAINT NUMBER			
1331	W	2020	000347
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

THE STATE OF NEW JERSEY
VS.
JOHNATHON J STERN

MIDDLETOWN TWP MUNICIPAL COURT
1 KINGS HWY TWP HALL
MIDDLETOWN NJ 07748-0000
732-615-2036 COUNTY OF: MONMOUTH

ADDRESS: 95 BAYSIDE PARKWAY
MIDDLETOWN NJ 07748-0000

# of CHARGES	CO-DEFTS	POLICE CASE #:
1		20MT34477

COMPLAINANT NAME: DET SULLIVAN
1 KINGS HIGHWAY
MIDDLETOWN NJ 07748

DEFENDANT INFORMATION
SEX: M EYE COLOR: BROWN DOB: 01/24/1991
DRIVER'S LIC. #: [redacted] DL STATE: [redacted]
SOCIAL SECURITY #: xxx-xx-x[redacted] SBI #:
TELEPHONE #: [redacted] (C)
LIVESCAN PCN #:

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 and/or Defendant have more than 1 child altogether
- •Prior domestic incident of assault in a police report or criminal record (against current or former Partner or Partners child)

-The charge was based on the observations/statements made by an eyewitness(es).
- •The witness statement(s) were recorded via:
  - *Other/Explain ORAL STATEMENT

-The defendant was known to the victim as:
- •Family

-The victim was injured and:
- •Victim refused treatment

-Child(ren) were present at the time of the offense and:
- •Child(ren) were the victim
- •Child(ren) were placed at risk by the offense

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: DET D SULLIVAN LAW ENFORCEMENT OFFICER **Date:** 08/05/2020

Middletown Police Department

1 KINGS HWY; PD 31 MIDDLETOWN , NJ 07748 ( ) -

Individual Arrest Report

Name: JOHNATHON JAMES STERN (811649)
Street Address: 95 BAYSIDE PKWY
City, State Zip: MIDDLETOWN, NJ 07748
Date of Birth: 01/24/91
Social Security: [redacted]
Local ID Numbers:
State ID Number: 308348H
FBI number: 308691HD4
Attorney:
Occupation:
Place of Birth: KENT
State: WA
Sex: M
Race: W
Height: 6'01"
Weight: 190
Hair Color: BRO
Eyes Color: BRO
Drivers License: [redacted]
State: [redacted]
Marital Status: Not Married
Home Phone: [redacted]
Work Phone:
Employer: UNEMPLOYED
Alias For:

Scars, Marks, and Tattoo Information

Scars, Marks:	TAT L SHLD	TATT	L	SHLD	BAND LOGO
	TAT RF ARM	TATT	LR	ARM	"STERN"

Arrest/Offense Information

Booking Number: 20BK06054
Arrest Reference Number:
Time/Date Arrested: 10:45:00 08/02/20
Arresting Officer: Sullivan, D
Arresting Agency: P31
Age at Arrest: 29

Statute: 2C:12-1B(13), Aggravated Assault by strangulation
Class: 3D **Court:** 1331
Offense: N/A, Not Applicable
Counts: 1 **OTN:**
Warr/Cmplnt #: 1331W2020-344
Related Incident: 20MT34477

Statute: 2C:24-4a(2), Endangering Welfare/Abuse of Child Under Legal Care
Class: 2D **Court:** 1331
Offense: CHAN, Child Neglect
Counts: 1 **OTN:**
Warr/Cmplnt #: 1331W2020-344/347
Related Incident: 20MT34477

Report Includes:
All dates arrested, All booking numbers matching `20BK06054`, All arresting agencies, All arresting officers, All arrest types, All arrest area codes, All judicial age statuses, All inmate name numbers, All offense codes, All statute codes, All alcohol/drug codes, All crime class codes, All law jurisdictions, All court codes, All entry codes, All custody flags, All offenses and arrests matching `P31`,

Long-Term Call ID 20-388580
Active Call Nature DOMESTIC Type 1 Priority

Address✓ 95 BAYSIDE PKWY City 31 MIDDLETOWN
WEEHAWKEN AVE & BRAY AVE
Zones + + + Determinant Alarm
Directions

Contact K[redacted] Tel ( ) -
Address
Info (See below)
License Plate State

Calls+ 5 Dupl+ 0 Names+ 4 w/Alrts+ 0 Wants+ 0 Prem+ 0 Adr+ 0

How Rcvd T Telephone Occurred between 10:26:15 08/02/20
Rcvd by Cornett, D and 10:26:15 08/02/20
Hld Until : : / / When Rptd 10:29:08 08/02/20

= =

INVOLVEMENTS:

Type	Record #	Date	Description	Relationship
LW	20MT34477	08/02/20	DOMESTIC	*Initiating Call

Call Taker Comments:

CALLER IS CRYING / CALLER ADV THEY WERE INVOLVED IN A DOMESTIC THIS MORNING - NOW IS OVER /
10:29:16 08/02/2020 - Cornett, D
CALLER IS IN HER BEDROOM
10:29:47 08/02/2020 - Cornett, D
[redacted]
10:30:28 08/02/2020 - Cornett, D
ACCUSED: [redacted]
10:30:47 08/02/2020 - Cornett, D
CALLER ADV [redacted]
10:31:08 08/02/2020 - Cornett, D
CALLER ADV [redacted]
10:31:20 08/02/2020 - Cornett, D
CALLER ADV THAT [redacted]
10:31:38 08/02/2020 - Cornett, D
CALLER ADV [redacted]
10:32:10 08/02/2020 - Cornett, D
[redacted]
10:32:22 08/02/2020 - Cornett, D
NO FLU LIKE SYPTOMS
10:32:55 08/02/2020 - Cornett, D

CALLER ADV [redacted] - CALLER THINKS THAT [redacted]
10:34:02 08/02/2020 - Meredith, A
URGENT [redacted]
10:45:46 08/02/2020 - Johnson, J - From: Mazza, F
units 10-4 1 male 10-41
10:47:30 08/02/2020 - Johnson, J - From: Sullivan, D
[redacted]
10:57:10 08/02/2020 - Johnson, J - From: Sullivan, D
[redacted]