



Court's Address and Phone Number:
 OCEAN Special Civil Part
 118 WASHINGTON ST., ROOM 121, P.O.
 BOX 2191
 TOMS RIVER, NJ 08754-2191
 732-929-2016

**Superior Court of New Jersey
 Law Division, Special Civil Part**

OCEAN County
 Docket No: **OCN-DC-011619-19**

Civil Action
CONTRACT DISPUTE

YOU ARE BEING SUED!

Person or Business Suing You (Plaintiff)

Michael C Kern

Plaintiff's Attorney Information

Person or Business Being Sued (Defendant)

Township of Berkeley

The Person or Business Suing You Claims You Owe the Following:

Demand Amount	\$8622.00
Filing Fee	\$75.00
Service Fee	\$7.00
Attorney's Fees	\$0.00
TOTAL	\$8704.00

FOR JUDICIARY USE ONLY

In the attached complaint, the person or business suing you briefly tells the court his or her version of the facts of the case and how much money he or she claims you owe. **If you do not answer the complaint, you may lose the case automatically and the court may give the plaintiff what the plaintiff is asking for, plus interest and court costs. You have 35 days from the date of service to file your answer or a signed agreement.** If a judgment is entered against you, a Special Civil Part Officer may seize your money, wages or personal property to pay all or part of the judgment. The judgment is valid for 20 years.

IF YOU DISAGREE WITH THE PLAINTIFF'S CLAIMS, A WRITTEN ANSWER OR SIGNED AGREEMENT MUST BE RECEIVED BY THE COURT ABOVE, ON OR BEFORE 12/20/2019, OR THE COURT MAY RULE AGAINST YOU. IF YOU DISAGREE WITH THE PLAINTIFF, YOU MUST DO ONE OR BOTH OF THE FOLLOWING:

1. ***Answer the complaint.*** An answer form that will explain how to respond to the complaint is available at any of the New Jersey Special Civil Part Offices or on the Judiciary's Internet site njcourts.gov under the section for Forms. If you decide to file an answer to the complaint made against you:
 - Fill out the Answer form AND pay the applicable filing fee by check or money order payable to: **Treasurer, State of New Jersey.** Include **OCN-DC-011619-19** (your Docket Number) on the check.
 - Mail or hand deliver the completed Answer form and the check or money order to the court's address listed above.
 - Hand deliver or send by regular mail a copy of the completed Answer form to the plaintiff's attorney. If the plaintiff does not have an attorney, send your completed answer form to the plaintiff by regular and certified mail. This MUST be done at the same time you file your Answer with the court on or before **12/20/2019**.
2. ***Resolve the dispute.*** Contact the plaintiff's attorney, or contact the plaintiff if the plaintiff does not have an attorney, to resolve this dispute. The plaintiff may agree to accept payment arrangements. If you reach an agreement, mail or hand deliver the **SIGNED** agreement to the court's address listed above on or before **12/20/2019**.

Please Note - You may wish to get an attorney to represent you. If you cannot afford to pay for an attorney, free legal advice may be available by contacting Legal Services at 732-608-7794. If you can afford to pay an attorney but do not know one, you may call the Lawyer Referral Services of your local County Bar Association at 732-240-3666. Notify the court now if you need an interpreter or an accommodation for a disability for any future court appearance.

/s/ Michelle M. Smith

Clerk of the Superior Court





Dirección y teléfono del tribunal
 Parte Civil Especial de OCEAN
 118 WASHINGTON ST., ROOM 121, P.O.
 BOX 2191
 TOMS RIVER, NJ 08754-2191
 732-929-2016

**El Tribunal Superior de Nueva Jersey
 División de Derecho, Parte Civil Especial**

Condado de OCEAN
 Número del expediente OCN-DC-011619-19
Demanda de Acción Civil
NOTIFICACIÓN DE DEMANDA
CONTRACT DISPUTE

¡LE ESTÁN DEMANDANDO!

Persona o entidad comercial que le está demandando (*el demandante*)

Michael C Kern

Información sobre el abogado del demandante

Persona o comercial ser demandada (*el demandado*)

Township of Berkeley

La persona o comercial que le está demandando afirma que usted le debe lo siguiente:

Cantidad a la vista	\$8622.00
Tasa judicial	\$75.00
Cargo del emplazamiento	\$7.00
Honorarios del abogado	\$0.00
TOTAL	\$8704.00

PARA USO EXCLUSIVO DEL PODER JUDICIAL

En la demanda adjunta la persona o entidad comercial que le está demandando le informa brevemente al juez su versión de los hechos de la causa y la suma de dinero que afirma que usted le debe. **Si usted no responde a la demanda puede perder la causa automáticamente y el juez puede dar al demandante lo que está pidiendo más intereses y los costos legales. Usted tiene 35 días a partir de la fecha del emplazamiento para presentar su respuesta o un acuerdo firmado.** Si se dicta un fallo en su contra, un Oficial de la Parte Civil Especial puede embargar su dinero, sueldo o sus bienes muebles (personales) para pagar todo el fallo o una parte del mismo. El fallo es válido por 20 años.

SI USTED NO ESTÁ DE ACUERDO CON LAS ALEGACIONES DEL DEMANDANTE, EL TRIBUNAL TIENE QUE RECIBIR UNA RESPUESTA POR ESCRITO O UN ACUERDO FIRMADO PARA EL 12/20/2019 O ANTES DE ESA FECHA, O EL JUEZ PUEDE EMITIR UN FALLO EN SU CONTRA. SI USTED NO ESTÁ DE ACUERDO CON EL DEMANDANTE, DEBE HACER UNA DE LAS SIGUIENTES COSAS O LAS DOS:

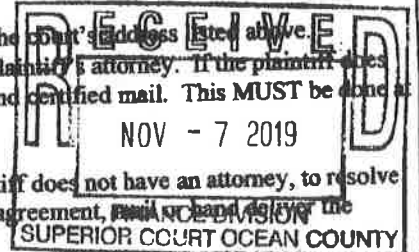
- 1. Responder a la demanda.** Un formulario de respuesta que le explicará cómo responder a la demanda está disponible en cualquiera de las Oficinas de la Parte Civil Especial de Nueva Jersey o en el sitio Internet del Poder Judicial njcourts.gov bajo la sección de formularios (Forms). Si usted decide presentar una respuesta a la demanda que se hizo en su contra:
 - Llene el formulario de Respuesta Y pague la tasa judicial de presentación que corresponda mediante un cheque o giro bancario o postal acreditable al: "**Treasurer, State of New Jersey**" (Tesorero del Estado de Nueva Jersey). Incluya **OCN-DC-011619-19** (el número de su expediente) en el cheque.
 - Envíe por correo el formulario de Respuesta llenado y el cheque o giro bancario o postal a la dirección del tribunal que figura más arriba, o entréguelos personalmente en dicha dirección.
 - Entregue personalmente o envíe por correo común una copia del formulario de Respuesta llenado al abogado del demandante. Si el demandante no tiene abogado, envíe su formulario de respuesta llenado al demandante por correo común y por correo certificado. Esto SE TIENE que hacer al mismo tiempo que presente su Respuesta al tribunal a más tardar el **12/20/2019**.
- 2. Resolver la disputa.** Comuníquese con el abogado del demandante, o con el demandante si éste no tiene abogado, para resolver esta disputa. El demandante puede estar de acuerdo con aceptar arreglos de pago. **Si llegara a un acuerdo, envíe por correo o entregar personalmente el acuerdo FIRMADO** a la dirección del tribunal que figura más arriba, o entréguelo personalmente en dicha dirección a más tardar el **12/20/2019**.

Nota - Puede que usted quiera conseguir que un abogado para que lo represente. Si usted no puede pagar a un abogado, podría obtener consejos legales gratuitos si se comunica con Legal Services (Servicios Legales) llamando al 732-608-7794. Si usted puede pagar a un abogado, pero no conoce a ninguno, puede llamar al Lawyer Referral Services (Servicios de Recomendación de Abogados) del Colegio de Abogados (Bar Association) de su condado local al 732-240-3666. Notifique al tribunal ahora si usted necesita un intérprete o un arreglo por una discapacidad para cualquier comparecencia futura en el tribunal.

/s/ Michelle M. Smith

Subsecretario(a) del Tribunal Superior

 Court's Address and Phone Number: <u>OCEAN</u> Special Civil Part <u>126 Hooper Ave</u> <u>Toms River NJ 08754</u> Telephone No. <u>732-929-2042</u> <u>732-504-0700</u>	Superior Court of New Jersey Law Division, Special Civil Part <u>OCEAN</u> County Docket No: DC _____ Civil Action SUMMONS Check one ☒ Contract ☐ Tort										
YOU ARE BEING SUED!											
Person or Business Suing You (Plaintiff) <u>Michael C. KERN</u> <u>717 NARRAGANSETT AVE</u> <u>OCEAN BATE NJ 08740</u> (See the following page(s) for additional plaintiffs) <u>BATCH 126</u> <u>CK</u> MO CA Plaintiff's Attorney Information CK/Rec# <u>755</u> Amount \$ <u>82.7</u> DATE <u>11-7-19</u> OVP _____ Initials <u>DS</u>	Person or Business Being Sued (Defendant) <u>Township of Berkehof</u> <u>627 Pinewood Keswick Rd.</u> <u>PO Box B Bayville NJ 08721-0287</u> (See the following page(s) for additional defendants) The Person or Business Suing You Claims You Owe the Following: <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Demand Amount</td> <td style="width: 40%; text-align: right;">\$ <u>8622</u></td> </tr> <tr> <td>Filing Fee</td> <td style="text-align: right;">\$ <u>7.5</u></td> </tr> <tr> <td>Service Fee</td> <td style="text-align: right;">\$ <u>7</u></td> </tr> <tr> <td>Attorney's Fees</td> <td style="text-align: right;">\$ _____</td> </tr> <tr> <td>TOTAL</td> <td style="text-align: right;">\$ <u>8704.00</u></td> </tr> </table>	Demand Amount	\$ <u>8622</u>	Filing Fee	\$ <u>7.5</u>	Service Fee	\$ <u>7</u>	Attorney's Fees	\$ _____	TOTAL	\$ <u>8704.00</u>
Demand Amount	\$ <u>8622</u>										
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Service Fee	\$ <u>7</u>										
Attorney's Fees	\$ _____										
TOTAL	\$ <u>8704.00</u>										
In the attached complaint, the person or business suing you briefly tells the court his or her version of the facts of the case and how much money he or she claims you owe. If you do not answer the complaint, you may lose the case automatically and the court may give the plaintiff what the plaintiff is asking for, plus interest and court costs. You have 35 days from the date of service to file your answer or a signed agreement. If a judgment is entered against you, a Special Civil Part Officer may seize your money, wages or personal property to pay all or part of the judgment. The judgment is valid for 20 years. IF YOU DISAGREE WITH THE PLAINTIFF'S CLAIMS, A WRITTEN ANSWER OR SIGNED AGREEMENT MUST BE RECEIVED BY THE COURT ABOVE, ON OR BEFORE _____, OR THE COURT MAY RULE AGAINST YOU. IF YOU DISAGREE WITH THE PLAINTIFF, YOU MUST DO ONE OR BOTH OF THE FOLLOWING: Answer the complaint. An answer form that will explain how to respond to the complaint is available at any of the New Jersey Special Civil Part Offices or on the Judiciary's Internet site njcourts.gov. If you decide to file an answer to the complaint made against you: - Fill out the Answer form AND pay the applicable filing fee by check or money order payable to: <u>Treasurer, State of New Jersey</u>. Include DC _____ (your Docket Number) on the check. - Mail or hand deliver the completed Answer form and the check or money order to the court's address listed above. - Hand deliver or send by regular mail a copy of the completed Answer form to the plaintiff's attorney. If the plaintiff does not have an attorney, send your completed answer form to the plaintiff by regular and certified mail. This MUST be done at the same time you file your Answer with the court on or before _____. Resolve the dispute. Contact the plaintiff's attorney, or contact the plaintiff if the plaintiff does not have an attorney, to resolve this dispute. The plaintiff may agree to accept payment arrangements. If you reach an agreement, hand deliver the SIGNED agreement to the court's address listed above on or before _____. Please Note - You may wish to get an attorney to represent you. If you cannot afford to pay for an attorney, free legal advice may be available by contacting Legal Services at _____. If you can afford to pay an attorney but do not know one, you may call the Lawyer Referral Services of your local County Bar Association at _____. Notify the court now if you need an interpreter or an accommodation for a disability for any future court appearance. /s/ Name _____ Clerk of the Superior Court											



Form A

MICHAEL C. KERN
Plaintiff's Name (first, middle, last)717 NARRAGANSETTE AVE
Street AddressOCEAN Gate NJ 08740-1378
City, State, Zip732-232-4207
Telephone NumberTOWNSHIP of Berkeley
Defendant's Name (first, middle, last)
627 PINEWALK-Keswick RD PO Box B
Street AddressBayville NJ, 08721-0287
City, State, Zip732-244-7400
Telephone NumberSuperior Court of New Jersey
Law Division, Special Civil Part

OCEAN County

Docket Number

(to be provided by the court)

Civil Action
Complaint

Type or print the reasons you, the Plaintiff(s), are suing the Defendant(s): (See instruction B)
Attach additional sheets if necessary.

I AM Suing my former employer Berkeley Twp
for wages owed me per agreement - see attached
pay stubs AND agreement which show they still owe me
307 sick time hrs, 140.68 VACATION, 24 hrs personal, 8 hrs holiday
hr. rate 18.64

The amount you, the Plaintiff(s) are demanding from the Defendant(s) \$ 8622.1

At the trial Plaintiff will need:

An interpreter

☐ Yes☒ No

Indicate language: _____

An accommodation for disability

☐ Yes☒ No

Indicate accommodation: _____

I certify that the matter in controversy is not the subject of any other court action or arbitration proceeding, now pending or contemplated, and that no other parties should be joined in this action.

I certify that confidential personal identifiers have been redacted from documents now submitted to the court, and will be redacted from all documents submitted in the future in accordance with Rule 1:38-7(b).

11/1/19
Date

Michael Kern
Your Signature

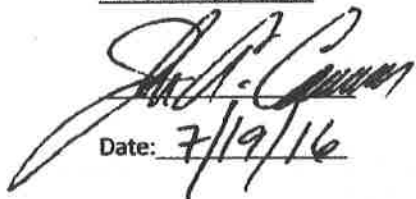
MICHAEL KERN
Name Typed, Stamped or Printed

**Township of Berkeley
-and-
International Brotherhood of Teamsters Local 97
SETTLEMENT AGREEMENT
Employee Michael Kern**

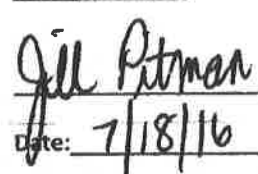
In consideration of Mr. Kern's seniority status and;
In light of outstanding issues that remain unclosed and;
In hopes of resolving any current issues, the parties agree to the following:

1. Mr. Kern shall resign his position as Animal Control Officer effective immediately.
2. Mr. Kern shall receive payment for any unused sick, vacation and personal time he has accrued during his years of service.
3. The Township agrees that this is a general resignation and will only report to perspective employers the years of service Mr. Kern had with the township, his hire date, his title, and the date he voluntarily resigned from his position with Berkeley Township.
4. Any and all current and further investigations into Mr. Kern's employment and his performance as a Township Employee shall be dropped and all investigations relative to same shall be closed.
5. Mr. Kern agrees to indemnify and hold harmless Berkeley Township and its employees in regards to his relationships with same during his tenure as a Township Employee. This provision covers employment-related matters only. Mr. Kern further agrees to only divulge the fact that he voluntarily resigned from Berkeley Township and to not speak derogatorily about Berkeley Township, its Administration and/or employees.
6. This agreement is binding between all parties, however, it is not precedent setting nor does it show past practice.

FOR THE EMPLOYER


Date: 7/19/16

FOR THE UNION


Date: 7/18/16

EMPLOYEE:

"This agreement has been explained to me in detail. My signature reflects my agreement to adhere to this settlement document. I am signing under my own free will and under no duress from Berkeley Township or Teamsters Local 97."

Signature: Michael Kern Date: 7/18/16



BERKELEY TOWNSHIP
 EARNINGS RECORD - RETAIN FOR YOUR RECORDS

No. 049786

				PERIOD ENDING	DATE ISSUED	CHECK NO.
				08/18/16	08/18/16	49786
LOCATION	DEPARTMENT	EMPLOYEE NO.	SOCIAL SECURITY NO.	EMPLOYEE NAME		
	00034-00	KERN0005	*****	Kern, Michael C		
EARNINGS	HOURS	RATE	CURRENT AMOUNT	TAX WITHHOLDINGS	CURRENT AMOUNT	YTD AMOUNT
Sick	144.00	17.8440	2,569.54	FEDERAL	786.91	3,385.52
Sick	60.00	18.1500	1,089.00	STATE	188.72	714.57
Vacation	19.32	18.1500	350.66	FICA	248.57	1,773.17
				MEDICARE	58.13	414.68
				OTHER STATE	20.25	147.11
				ACCRUED HOURS	HOURS USED	HOURS REMAINING
				SICK		
				VACATION	204.00	307.00
				PERSONAL	19.32	140.68
				COMP	0.00	24.00
				OTHER	0.00	0.00
				HOLIDAY	0.00	0.00
					0.00	8.00

DEDUCTIONS/ADDT'L EARNINGS	CURRENT AMOUNT	YTD AMOUNT	DEDUCTIONS/ADDT'L EARNINGS	CURRENT AMOUNT	YTD AMOUNT
H Dental	0.00	55.16-			
HLT Health	0.00	476.14-			
I Contrib In	0.00	108.84-			
J Pers Loans	0.00	1,516.86-			
Q P.E.R.S	0.00	1,541.46-			
ROT RETRO OT	0.00	35.80			
RTR RETRO REG	0.00	1.92			
V Teamsters	0.00	273.00-			
Direct Deposit:					
*****	100.00				
*****	2,581.62				
*****	25.00				
CURRENT EARNINGS	YTD EARNINGS	NET PAY	YTD NET		
4,009.20	29,130.61	2,706.62	18,724.10	132 ✓	

DETACH BEFORE DEPOSITING

MGL PRINTING SOLUTIONS, 906-619 50

THIS DOCUMENT HAS A COLORED BACKGROUND AND FLUORESCENT FIBERS • SEE ADDITIONAL SECURITY FEATURES ON REVERSE SIDE • MISSING A FEATURE INDICATES A COPY


BERKELEY TOWNSHIP
PAYROLL ACCOUNT

 627 PINEWALD-KESWICK ROAD - P.O. BOX B
 BAYVILLE, N.J. 08721-0287

 975 HOOPER AVENUE
 TOMS RIVER NJ 08753

No. 049786

55-7035
2312

DATE

08/18/16

CHECK NO.

49786

AMOUNT

\$*****0.00

VOID*VOID*VOID*VOID*VOID*VOID*VOID*VOID*VOID*VOID*VOID*VOID*VOID*VOID*

AUTHORIZED SIGNATURE

AUTHORIZED SIGNATURE

AUTHORIZED SIGNATURE

TO THE
ORDER
OF
 Michael C Kern
 P.O. Box 1083
 Ocean Gate, NJ 08740-1083

#049786# 12312703531

23006000839#



