

COMPLAINT - SUMMONS

COMPLAINT NUMBER			
1337	S	2020	000572
COURT CODE	PREFIX	YEAR	SEQUENCE NO.
OCEAN TOWNSHIP MUNICIPAL COURT 399 MONMOUTH RD OAKHURST NJ 07755-0000 732-531-5005 COUNTY OF: MONMOUTH			
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 200T21883	
COMPLAINANT NAME: STEVEN WALKER 399 MONMOUTH ROAD ATTN WARRANTS OAKHURST NJ 07755		DEFENDANT INFORMATION SEX: M EYE COLOR: BROWN DOB: [REDACTED] DRIVER'S LIC. #: [REDACTED] DL STATE: NJ SOCIAL SECURITY #: [REDACTED] SBI #: 266030G TELEPHONE #: [REDACTED] LIVSCAN PCN #: 133702009443	

THE STATE OF NEW JERSEY

VS.

KEVIN B VARGAS

ADDRESS: 1419 RUSTIC DR APT 3

OCEAN TWP

NJ 07712-0000

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 10/07/2020 in OCEAN TWP, MONMOUTH County, NJ did: WITHIN THE JURISDICTION OF THIS COURT THE DEFENDANT COMMITTED STALKING, SPECIFICLY THE DEFENDANT WENT TO THE VICTIMS (AH) [REDACTED] (TARGET GREATLAND) TWICE ON 10/09/2020 AND 10/11/2020 AFTER THE VICTIM CLEARLY ATTEMPTED TO STOP COMMUNICATIONS WITH THE DENFANT NUMEROUS TIMES, BUT THE DEFANDANT MADE SEVERAL FAKE SNAPCHAT ACCOUNTS ATTEMPTING TO COMMUNICATE WITH THE VICTIM FURTHER WHICH MADE THE VICTIM FEAR FOR HER SAFETY IN VIOLATION OF 2C:12-10B

WITHIN THE JURISIDCTION OF THIS COURT THE DEFENDANT COMMITTED CYBER HARASSMENT, SPECIFICLY ON 10/08/2020, THE DEFENDANT HARASSED THE VICTIM (AH) BY SENDING HER ALARMING MESSAGES ON SNAPCHAT TO INCLUDE A SEXUALLY EXPLICIT PICTURE OF A PENIS AND WHEN THE VICTIM ATTEMPTED TO STOP COMMUNACATING WITH THE DEFENDANT HE MADE NUMEROUS FAKE ACCOUNTS ON SNAPCHAT TO TRY TO COMMUNICATE WITH HER FURTHER IN VIOLATION OF 2C:33-4.1(A)2

in violation of:

Original Charge	1) 2C:12-10B	2) 2C:33-4.1A(2)	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: STEVEN WALKER Date: 10/12/2020

The complaining witness is a law enforcement officer and a judicial probable cause determination is not required prior to the issuance of this Complaint-Summons.

SUMMONS

YOU ARE HEREBY SUMMONED to appear before 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

If you fail to appear on the date and at the time stated below, a warrant may be issued for your arrest.

Date of Arrest: 10/12/2020 Appearance Date: 11/24/2020 Time: 09:00AM Phone: 732-358-8700

Signature of Person Issuing Summons: STEVEN WALKER Date: 10/12/2020

☐ 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 – SUMMONS (Court Action)

COMPLAINT NUMBER

1337**S****2020****000572****STATE V.****KEVIN B VARGAS**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

FTA Bail Information

Date Bail Set:

Amount Bail Set: \$ _____

by: _____

☐ Bail Recog. AttachedReleased
on Bail

R.O.R.

Committed
DefaultCommitted
w/o Bail

Place Committed:

Date Referred to

County Prosecutor: _____

Date of First
Appearance: **11/24/2020**☐ Advised of Rights by _____

Defendant Desires Counsel:

☐ Yes ☐ No**Prosecuting Attorney Information****Defense Counsel Information****Name:****Name:**

State

County

Municipal

Other

None

Retained

Public Def

Assigned

Waived

Other

Original Charge

1) **2C:12-10B**2) **2C:33-4.1A(2)**

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:

DEDRLab Fee

DEDRLab:

LAB:

DEDRLab:

LAB:

DEDRLab:

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:**Related Traffic Tickets and Complaints:***** 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
- D – Dismissed- Prosecutor Discretion
- M – Dismissed- Mediation
- P – Dismissed-Plea Agreement
- S – Disposed at Superior
- W – Dismissed-False ID

ORIGINAL - Court Action

JUDGE'S SIGNATURE _____

DATE _____

Page 2 of 7

NJ/CDR1 1/1/2017

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

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1337	S	2020	000572
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# of CHARGES 2	CO-DEFTS	POLICE CASE #: 200T21883	
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DEFENDANT INFORMATION SEX: M EYE COLOR: BROWN DOB: [REDACTED] DRIVER'S LIC. #: [REDACTED] DL STATE: NJ SOCIAL SECURITY #: [REDACTED] SBI #: 266030G TELEPHONE #: [REDACTED] (C) LIVSCAN PCN #: 133702009443			

THE STATE OF NEW JERSEY

VS.

KEVIN B VARGAS

ADDRESS: 1419 RUSTIC DR APT 3

OCEAN TWP

NJ 07712-0000

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Amended Charge			

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☐ Serious Personal Injury/ Death
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- ☐ No possession firearms/weapons
- ☐ Other (specify):

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER				<i>THE STATE OF NEW JERSEY</i> VS. KEVIN B VARGAS	
1337	S	2020	000572		
COURT CODE	PREFIX	YEAR	SEQUENCE NO.		
OCEAN TOWNSHIP MUNICIPAL COURT 399 MONMOUTH RD OAKHURST NJ 07755-0000 732-531-5005 COUNTY OF: MONMOUTH				ADDRESS : 1419 RUSTIC DR APT 3 OCEAN TWP NJ 07712-0000	
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 200T21883		DEFENDANT INFORMATION	
COMPLAINANT STEVEN WALKER NAME: 399 MONMOUTH ROAD ATTN WARRANTS OAKHURST NJ 07755				SEX: M EYE COLOR: BROWN DOB: [REDACTED] DRIVER'S LIC. #. [REDACTED] DL STATE: NJ SOCIAL SECURITY # [REDACTED] SBI #: 266030G TELEPHONE #: [REDACTED] (C) LIVSCAN PCN #: 133702009443	

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 **10/07/2020** in **OCEAN TWP**, **MONMOUTH County, NJ** did:

WITHIN THE JURISDICTION OF THIS COURT THE DEFENDANT COMMITTED STALKING, SPECIFICLY THE DEFENDANT WENT TO THE VICTIMS (AH) [REDACTED] (TARGET GREATLAND) TWICE ON 10/09/2020 AND 10/11/2020 AFTER THE VICTIM CLEARLY ATTEMPTED TO STOP COMMUNICATIONS WITH THE DENFANT NUMEROUS TIMES, BUT THE DEFANDANT MADE SEVERAL FAKE SNAPCHAT ACCOUNTS ATTEMPTING TO COMMUNICATE WITH THE VICTIM FURTHER WHICH MADE THE VICTIM FEAR FOR HER SAFETY IN VIOLATION OF 2C:12-10B

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in violation of:

Original Charge	1) 2C:12-10B	2) 2C:33-4.1A(2)	3)
-----------------	---------------------	-------------------------	----

Check	Certification by Police Regarding Complaint-Summons
☒	I certify that I served the complaint-summons by delivering a copy to the defendant personally.
☐	I certify that I personally served the complaint-summons by leaving a copy at the defendant's usual place of abode with a competent member of the household of the age 14 or over _____ Name of family member over 14 years of age
☐	I certify that I mailed a copy of the complaint-summons by ordinary mail to the defendant at his or her last known address. _____ Defendant's last known address
☐	I certify that I served the complaint-summons by delivering a copy to a person authorized to receive service of process on the defendant's behalf. _____ Name and title of authorized person
☐	Other manner of service: I certify that I served the complaint-summons in the following manner: _____
☐	I certify that I was unable to serve the complaint-summons.

Signed: **STEVEN WALKER OCEAN TWP POLICE DEPT** Date of Action: **10/12/2020**
Name, Title and Department of Officer

Affidavit of Probable Cause

COMPLAINT NUMBER			
1337	S	2020	000572
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OCEAN TOWNSHIP MUNICIPAL COURT 399 MONMOUTH RD OAKHURST NJ 07755-0000 732-531-5005 COUNTY OF: MONMOUTH			
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 200T21883	
COMPLAINANT NAME: STEVEN WALKER 399 MONMOUTH ROAD ATTN WARRANTS OAKHURST NJ 07755		DEFENDANT INFORMATION SEX: M EYE COLOR: BROWN DOB: [REDACTED] DRIVER'S LIC. #: [REDACTED] DL STATE: NJ SOCIAL SECURITY #: [REDACTED] SBI #: 266030G TELEPHONE #: [REDACTED] (C) LIVESCAN PCN #: 133702009443	

THE STATE OF NEW JERSEY

VS.

KEVIN B VARGAS

ADDRESS:

1419 RUSTIC DR APT 3

OCEAN TWP

NJ 07712-0000

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:
Victim statement, conversations from SnapChat which were captured by the victim, Surveillance footage from Target Greatland, statement from victim and interview by defendant.

Affidavit of Probable Cause

Affidavit of Probable Cause

COMPLAINT NUMBER

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S

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SEQUENCE NO.

THE STATE OF NEW JERSEY

VS.

KEVIN B VARGAS

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

Detective investigation

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

N/A

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: STEVEN WALKER LAW ENFORCEMENT OFFICER

Date: 10/12/2020

Affidavit of Probable Cause

Preliminary Law Enforcement Incident Report

COMPLAINT NUMBER

1337**S****2020****000572**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

OCEAN TOWNSHIP MUNICIPAL COURT
399 MONMOUTH RD
OAKHURST NJ 07755-0000
732-531-5005 COUNTY OF: MONMOUTH

of CHARGES
2

CO-DEFTS

POLICE CASE #:
200T21883

COMPLAINANT STEVEN WALKER
NAME: 399 MONMOUTH ROAD
ATTN WARRANTS
OAKHURST NJ 07755

*THE STATE OF NEW JERSEY**VS.***KEVIN B VARGAS**

ADDRESS: 1419 RUSTIC DR APT 3

OCEAN TWP

NJ 07712-0000

DEFENDANT INFORMATION

SEX: M EYE COLOR: BROWN DOB: [REDACTED]
DRIVER'S LIC. #: [REDACTED] DL STATE: NJ
SOCIAL SECURITY #: [REDACTED] SBI #: 266030G
TELEPHONE #: [REDACTED] (C)
LIVESCAN PCN #: 133702009443

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.

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: _____

Date: _____

Preliminary Law Enforcement Incident Report

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7/20/2018