

COMPLAINT - SUMMONS

COMPLAINT NUMBER			
0804	S	2022	000012
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

ELK JOINT MUNICIPAL COURT
680 WHIG LANE
MONROEVILLE NJ 08343-0000
856-881-6631 COUNTY OF: GLOUCESTER

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

COMPLAINANT NAME: ALICIA FRAGOSO
HERMA S. SIMMONS ELEMENTARY SCHOOL
300 W CHESTNUT ST
CLAYTON NJ 08312

THE STATE OF NEW JERSEY
VS.

THOMAS NAPHY

ADDRESS: 1311 WILLOW STREET

GLASSBORO

NJ 08028-0000

DEFENDANT INFORMATION

SEX: EYE COLOR: DOB:
DRIVER'S LIC. #:
SOCIAL SECURITY #:
TELEPHONE #: (C)
LIVESCAN PCN #:

DL STATE:

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 09/07/2021 in CLAYTON BORO, GLOUCESTER County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, " THE DEFENDANT'S CHILD, T.N. HAS BEEN ABSENT A TOTAL OF 20 UNEXCUSED DAYS (INCLUDING 4 TARDY DAYS) SINCE THE BEGINNING OF THE SCHOOL YEAR IN SEPTEMBER 2021. PLEASE NOTE EVERY 4 TARDIES ARE EQUAL TO 1 UNEXCUSED ABSENCE."

in violation of:

Original Charge	1) 18A:38-26	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: Alicia Fragoso

Date: 1/12/22

PROBABLE CAUSE DETERMINATION AND ISSUANCE OF SUMMONS

☐ 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-summons:

Signature of Judge

Date

SUMMONS

YOU ARE HEREBY SUMMONED to appear before the Municipal Court in the county of: GLOUCESTER

at the following address: ELK JOINT MUNICIPAL COURT

680 WHIG LANE

MONROEVILLE

NJ 08343-0000

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:

Appearance Date: 03/21/2022

Time: 01:30PM

Phone: 856-881-6631

Signature of Person Issuing Summons:

Date:

☐ 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

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
0804	S	2022	000012	VS.	
COURT CODE PREFIX YEAR SEQUENCE NO.				THOMAS NAPHY	
ELK JOINT MUNICIPAL COURT				ADDRESS: 1311 WILLOW STREET	
680 WHIG LANE				GLASSBORO NJ 08028-0000	
MONROEVILLE NJ 08343-0000					
856-881-6631 COUNTY OF: GLOUCESTER					
# of CHARGES	CO-DEFTS	POLICE CASE #:		DEFENDANT INFORMATION	
1				SEX: EYE COLOR: DOB:	
COMPLAINANT NAME: ALICIA FRAGOSO				DRIVER'S LIC. #:	
HERMA S. SIMMONS ELEMENTARY SCHOOL				SOCIAL SECURITY #: (c)	
300 W CHESTNUT ST				TELEPHONE #: (c)	
CLAYTON NJ 08312				LIVSCAN 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 09/07/2021 in CLAYTON BORO, GLOUCESTER County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, " THE DEFENDANT'S CHILD, T.N. HAS BEEN ABSENT A TOTAL OF 20 UNEXCUSED DAYS (INCLUDING 4 TARDY DAYS) SINCE THE BEGINNING OF THE SCHOOL YEAR IN SEPTEMBER 2021. PLEASE NOTE EVERY 4 TARDIES ARE EQUAL TO 1 UNEXCUSED ABSENCE."					
in violation of:					
Original Charge		1) 18A:38-26		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: _____ Date: _____					
PROBABLE CAUSE DETERMINATION AND ISSUANCE OF SUMMONS					
☐ 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-summons:					
Signature of Judge		Date		Signature of Judge Date	
SUMMONS					
YOU ARE HEREBY SUMMONED to appear before the Municipal Court in the county of: GLOUCESTER					
at the following address: ELK JOINT MUNICIPAL COURT					
680 WHIG LANE		MONROEVILLE		NJ 08343-0000	
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:		Appearance Date: 03/21/2022		Time: 01:30PM Phone: 856-881-6631	
Signature of Person Issuing Summons: PAULINE JORDAN JUDICIAL OFFICER Date: 01/12/2022					
☐ Domestic Violence -- Confidential		☐ Related Traffic Tickets or Other Complaints		☐ Serious Personal Injury/ Death Involved	
Special conditions of release:				ORIGINAL	
☐ No phone, mail or other personal contact w/victim					
☐ No possession firearms/weapons					
☐ Other (specify):					
				Page 1 of 7 NJ/CDR1 1/1/2017	

COMPLAINT – SUMMONS (Court Action)

COMPLAINT NUMBER

0804**S****2022****000012****STATE V.****THOMAS NAPHY**

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: **03/21/2022**☐ Advised of Rights byDefendant 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) **18A:38-26**

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:

DEDL/Lab Fee

DEOR:

LAB:

DEDL:

LAB:

DEDL:

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:

* 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

Related Traffic Tickets and Complaints:

ORIGINAL - Court Action

JUDGE'S SIGNATURE

DATE

Page 2 of 7

NJ/CDR1 1/1/2017

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER				THE STATE OF NEW JERSEY VS. THOMAS NAPHY ADDRESS: 1311 WILLOW STREET GLASSBORO NJ 08028-0000					
0804	S	2022	000012						
COURT CODE	PREFIX	YEAR	SEQUENCE NO.						
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				DEFENDANT INFORMATION SEX: EYE COLOR: DOB: DL STATE: DRIVER'S LIC. #: SOCIAL SECURITY # SBI #: TELEPHONE #: (C) LIVESCAN PCN #:					
# of CHARGES	CO-DEFTS	POLICE CASE #:							
1									
COMPLAINANT ALICIA FRAGOSO NAME: HERMA S. SIMMONS ELEMENTARY SCHOOL 300 W CHESTNUT ST CLAYTON NJ 08312									
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 09/07/2021 in CLAYTON BORO , GLOUCESTER County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, " THE DEFENDANT'S CHILD, T.N. HAS BEEN ABSENT A TOTAL OF 20 UNEXCUSED DAYS (INCLUDING 4 TARDY DAYS) SINCE THE BEGINNING OF THE SCHOOL YEAR IN SEPTEMBER 2021. PLEASE NOTE EVERY 4 TARDIES ARE EQUAL TO 1 UNEXCUSED ABSENCE."									
In violation of: <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 20%;">Original Charge</td> <td style="width: 30%;">1) 18A:38-26</td> <td style="width: 30%;">2)</td> <td style="width: 20%;">3)</td> </tr> </table>						Original Charge	1) 18A:38-26	2)	3)
Original Charge	1) 18A:38-26	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: _____ Date of Action: _____ Name, Title and Department of Officer									
					RETURN OF SERVICE INFORMATION Page 4 of 7 NJ/CDR1 11/1/2017				

Affidavit of Probable Cause

COMPLAINT NUMBER:

0804

S

2022

000012

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

ELK JOINT MUNICIPAL COURT

680 WHIG LANE
MONROEVILLE

NJ 08343-0000

856-881-6631

COUNTY OF: GLOUCESTER

of CHARGES

1

CO-DEFTS

POLICE CASE #:

COMPLAINANT

ALICIA FRAGOSO

NAME:

HERMA T. SIMMONS ELEMENTARY SCHOOL
300 W CHESTNUT ST
CLAYTON

NJ 08312

THE STATE OF NEW JERSEY

VS.

THOMAS NAPHY

ADDRESS:

1311 WILLOW STREET

GLASSBORO

NJ 08028-0000

DEFENDANT INFORMATION

SEX: EYE COLOR:

DOB:

DRIVER'S LIC. #:

SOCIAL SECURITY #:

SBI #:

DL STATE:

TELEPHONE #:

(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:

Affidavit of Probable Cause

Page 5 of 7

1/1/2017

Affidavit of Probable Cause

COMPLAINT NUMBER

0804

S

2022

000012

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

THE STATE OF NEW JERSEY

VS.

THOMAS NAPHY

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

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: _____

Date: _____

Affidavit of Probable Cause

Preliminary Law Enforcement Incident Report

COMPLAINT NUMBER:				THE STATE OF NEW JERSEY VS. THOMAS NAPHY	
0804	S	2022	000012		
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	ADDRESS:	
ELK JOINT MUNICIPAL COURT				1311 WILLOW STREET	
680 WHIG LANE				GLASSBORO	
MONROEVILLE				NJ 08028-0000	
856-881-6631	COUNTY OF:	GLOUCESTER			
# of CHARGES	CO-DEFTS	POLICE CASE #:		DEFENDANT INFORMATION	
1				SEX: EYE COLOR: DOB: DL STATE:	
COMPLAINANT	ALICIA FRAGOSO			DRIVER'S LIC. #:	
NAME:	HERMA S. SIMMONS ELEMENTARY SCHOOL			SOCIAL SECURITY #:	
	300 W CHESTNUT ST			TELEPHONE #: (C)	
	CLAYTON NJ 08312			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.					
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	
				Page 7 of 7	
				7/20/2018	

COMPLAINT - SUMMONS

COMPLAINT NUMBER

0804

S

2022

000013

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

ELK JOINT MUNICIPAL COURT

680 WHIG LANE

MONROEVILLE

NJ 08343-0000

856-881-6631 COUNTY OF: GLOUCESTER

of CHARGES

CO-DEFTS

POLICE CASE #:

COMPLAINANT
NAME:

ALICIA FRAGOSO

HERMA SIMMONS ELEMENTARY SCHOOL

300 W. CHESTNUT STREET

CLAYTON

NJ 08312

THE STATE OF NEW JERSEY

VS.

TARA EFFINGER

ADDRESS:

1311 WILLOW STREET

GLASSBORO

NJ 08028-0000

DEFENDANT INFORMATION

SEX: EYE COLOR:

DOB:

DRIVER'S LIC. #:

SOCIAL SECURITY #:

SBI #:

DL STATE:

TELEPHONE #:

LIVSCAN PCN #:

(c)

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 09/07/2021 in CLAYTON BORO, GLOUCESTER County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, " THE DEFENDANT'S CHILD, T.N. HAS BEEN ABSENT A TOTAL OF 20 UNEXCUSED DAYS (INCLUDING 4 TARDY DAYS) SINCE THE BEGINNING OF THE SCHOOL YEAR IN SEPTEMBER 2021. PLEASE NOTE EVERY 4 TARDIES ARE EQUAL TO 1 UNEXCUSED ABSENCE."

in violation of:

Original Charge

1) 18A:38-26

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:

Date:

PROBABLE CAUSE DETERMINATION AND ISSUANCE OF SUMMONS

☐ 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-summons:

Signature of Judge

Date

SUMMONS

YOU ARE HEREBY SUMMONED to appear before the Municipal Court

in the county of: GLOUCESTER

at the following address: ELK JOINT MUNICIPAL COURT

680 WHIG LANE

MONROEVILLE

NJ 08343-0000

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:

Appearance Date: 03/21/2022

Time: 01:30PM

Phone: 856-881-6631

Signature of Person Issuing Summons:

Date:

☐ 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

Page 1 of 7

NJ/CDR1.1/1/2017

COMPLAINT - SUMMONS

THE STATE OF NEW JERSEY

VS.

TARA EFFINGER

ADDRESS: 1311 WILLOW STREET

GLASSBORO

NJ 08028-0000

0804

S

2022

000013

ELK JOINT MUNICIPAL COURT

680 WHIG LANE
MONROEVILLE

NJ 08343-0000

856-881-6631 COUNTY OF: GLOUCESTER

of CHARGES

CO-DEFTS

POLICE CASE #:

COMPLAINANT
NAME:

ALICIA FRAGOSO

HERMA LIMMONS ELEMENTARY SCHOOL
300 W. CHESTNUT STREET
CLAYTON NJ 08312

DEFENDANT INFORMATION

SEX: EYE COLOR:

DOB:

DRIVER'S LIC. #:

SOCIAL SECURITY #:

SBI #:

DL STATE:

TELEPHONE #:

LIVSCAN 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 09/07/2021 in CLAYTON BORO, GLOUCESTER County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, " THE DEFENDANT'S CHILD, T.N. HAS BEEN ABSENT A TOTAL OF 20 UNEXCUSED DAYS (INCLUDING 4 TARDY DAYS) SINCE THE BEGINNING OF THE SCHOOL YEAR IN SEPTEMBER 2021. PLEASE NOTE EVERY 4 TARDIES ARE EQUAL TO 1 UNEXCUSED ABSENCE."

in violation of:

Original Charge

1) 18A:38-26

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:

Date:

PROBABLE CAUSE DETERMINATION AND ISSUANCE OF SUMMONS

☐ 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-summons:

Signature of Judge

Date

SUMMONS

YOU ARE HEREBY SUMMONED to appear before the Municipal Court

in the county of: GLOUCESTER

at the following address: ELK JOINT MUNICIPAL COURT

680 WHIG LANE

MONROEVILLE

NJ 08343-0000

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:

Appearance Date:

03/21/2022

Time: 01:30PM

Phone: 856-881-6631

Signature of Person Issuing Summons:

PAULINE

JORDAN JUDICIAL OFFICER

Date: 01/12/2022

☐ 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
0804 **S** **2022** **000013**
COURT CODE PREFIX YEAR SEQUENCE NO

STATE V.

TARA EFFINGER

FTA Bail Information				Date Bail Set: _____	Amount Bail Set: \$ _____ by: _____	☐ Bail Recog. Attached
Released on Bail	R.O.R.	Committed Default	Committed w/o Bail	Place Committed: _____		Date Referred to County Prosecutor: _____
Date of First Appearance: 03/21/2022				☐ 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) 18A:38-26		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: _____			
DEDR/Lab Fee	DEDR: _____ LAB: _____	DEDR: _____ LAB: _____	DEDR: _____ 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

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER				THE STATE OF NEW JERSEY VS. TARA EFFINGER	
0804	S	2022	000013		
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	ADDRESS: 1311 WILLOW STREET GLASSBORO NJ 08028-0000	
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER					
# of CHARGES	CO-DEFTS	POLICE CASE #:		DEFENDANT INFORMATION SEX: EYE COLOR: DOB: DL STATE: DRIVER'S LIC. #: SOCIAL SECURITY # SBI #: TELEPHONE #: (C) LIVESCAN PCN #:	
1					
COMPLAINANT ALICIA FRAGOSO NAME: HERMA SIMMONS ELEMENTARY SCHOOL 300 W. CHESTNUT STREET CLAYTON, NJ 08312					
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 09/07/2021 in CLAYTON BORO , GLOUCESTER County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, " THE DEFENDANT'S CHILD, T.N. HAS BEEN ABSENT A TOTAL OF 20 UNEXCUSED DAYS (INCLUDING 4 TARDY DAYS) SINCE THE BEGINNING OF THE SCHOOL YEAR IN SEPTEMBER 2021. PLEASE NOTE EVERY 4 TARDIES ARE EQUAL TO 1 UNEXCUSED ABSENCE."					
in violation of:					
Original Charge		1) 18A:38-26		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: _____ Date of Action: _____ Name, Title and Department of Officer					
				RETURN OF SERVICE INFORMATION	
				Page 4 of 7 NJ/CDR1 1/1/2017	

Affidavit of Probable Cause

COMPLAINT NUMBER

0804

S

2022

000013

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

ELK JOINT MUNICIPAL COURT

680 WHIG LANE

MONROEVILLE

NJ 08343-0000

856-881-6631

COUNTY OF: GLOUCESTER

of CHARGES

1

CO-DEFTS

POLICE CASE #:

COMPLAINANT
NAME:

ALICIA FRAGOSO

HERMA SIMMONS ELEMENTARY SCHOOL

300 W. CHESTNUT STREET

CLAYTON

NJ 08312

THE STATE OF NEW JERSEY

VS.

TARA EFFINGER

ADDRESS:

1311 WILLOW STREET

GLASSBORO

NJ 08028-0000

DEFENDANT INFORMATION

SEX: EYE COLOR:

DOB:

DRIVER'S LIC. #:

DL STATE:

SOCIAL SECURITY #:

SBI #:

TELEPHONE #:

(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:

Affidavit of Probable Cause

Page 5 of 7

1/1/2017

Affidavit of Probable Cause

COMPLAINT NUMBER

0804

S

2022

000013

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

THE STATE OF NEW JERSEY

VS.

TARA EFFINGER

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

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: _____ Date: _____

Affidavit of Probable Cause

Page 6 of 7

1/1/2017

Preliminary Law Enforcement Incident Report

COMPLAINT NUMBER			
COURT CODE	PREFIX	YEAR	SEQUENCE NO.
0804	S	2022	000013
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER			
# of CHARGES 1	CO-DEFTS	POLICE CASE #:	
COMPLAINANT NAME: ALICIA FRAGOSO HERMA SIMMONS ELEMENTARY SCHOOL 300 W. CHESTNUT STREET CLAYTON NJ 08312			
DEFENDANT INFORMATION SEX: EYE COLOR: DOB: DRIVER'S LIC. #: DL STATE: SOCIAL SECURITY #: SBI #: TELEPHONE #: (C) LIVESCAN PCN #:			
THE STATE OF NEW JERSEY VS. TARA EFFINGER ADDRESS: 1311 WILLOW STREET GLASSBORO NJ 08028-0000			
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			
Page 7 of 7			
7/20/2018			

COMPLAINT - SUMMONS

COMPLAINT NUMBER

0804**S****2022****000014**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

ELK JOINT MUNICIPAL COURT**680 WHIG LANE****MONROEVILLE****NJ 08343-0000****856-881-6631** COUNTY OF: **GLOUCESTER**

of CHARGES

1

CO-DEFTS.

POLICE CASE #:

COMPLAINANT
NAME:**ALICIA FRAGOSO****HERMA SIMMONS ELEMENTARY SCHOOL****300 W. CHESTNUT STREET****CLAYTON****NJ 08312****THE STATE OF NEW JERSEY****VS.****CAPRI STEVENS**

ADDRESS:

110 MELVIN STREET**CLAYTON****NJ 08312-0000**

DEFENDANT INFORMATION

SEX: EYE COLOR:

DOB:

DRIVER'S LIC. #:

SOCIAL SECURITY #:

SBI #:

DL STATE:

TELEPHONE #:

(c)

LIVSCAN 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 09/07/2021 in **CLAYTON BORO**, **GLOUCESTER County, NJ** did: WITHIN THE JURISDICTION OF THIS COURT, " THE DEFENDANT'S CHILD, P.G., HAS BEEN ABSENT A TOTAL OF 16 UNEXCUSED DAYS SINCE THE BEGINNING OF SCHOOL YEAR IN SEPTEMBER 2021> "

in violation of:

Original Charge

1) **18A:38-26**

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:

Alicia Fragoso

Date:

1/12/22

PROBABLE CAUSE DETERMINATION AND ISSUANCE OF SUMMONS

☐ 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-summons:

Signature of Judge

Date

SUMMONS

YOU ARE HEREBY SUMMONED to appear before the Municipal Court

in the county of: **GLOUCESTER**at the following address: **ELK JOINT MUNICIPAL COURT****680 WHIG LANE****MONROEVILLE****NJ 08343-0000**

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:

Appearance Date:

03/21/2022Time: **01:30PM**Phone: **856-881-6631**

Signature of Person Issuing Summons:

Date:

☐ 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**

Page 1 of 7

NJ/CDR1 1/1/2017

COMPLAINT - SUMMONS

COMPLAINT NUMBER

0804

S

2022

000014

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

ELK JOINT MUNICIPAL COURT

680 WHIG LANE

MONROEVILLE

NJ 08343-0000

856-881-6631

COUNTY OF: GLOUCESTER

of CHARGES

CO-DEFTS

POLICE CASE #:

COMPLAINANT
NAME:

ALICIA FRAGOSO

HERMA SIMMONS ELEMENTARY SCHOOL

300 W. CHESTNUT STREET

CLAYTON

NJ 08312

THE STATE OF NEW JERSEY

VS.

CAPRI STEVENS

ADDRESS:

110 MELVIN STREET

CLAYTON

NJ 08312-0000

DEFENDANT INFORMATION

SEX: EYE COLOR:

DOB:

DRIVER'S LIC. #:

SOCIAL SECURITY #:

SBI #:

DL STATE:

TELEPHONE #:

(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 09/07/2021 in CLAYTON BORO, GLOUCESTER County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, " THE DEFENDANT'S CHILD, P.G., HAS BEEN ABSENT A TOTAL OF 16 UNEXCUSED DAYS SINCE THE BEGINNING OF SCHOOL YEAR IN SEPTEMBER 2021> "

in violation of:

Original Charge

1) 18A:38-26

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: _____

Date: _____

PROBABLE CAUSE DETERMINATION AND ISSUANCE OF SUMMONS

☐ 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-summons:

Signature of Judge

Date

SUMMONS

YOU ARE HEREBY SUMMONED to appear before the Municipal Court

in the county of: GLOUCESTER

at the following address: ELK JOINT MUNICIPAL COURT

680 WHIG LANE

MONROEVILLE

NJ 08343-0000

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:

Appearance Date:

03/21/2022

Time: 01:30PM

Phone: 856-881-6631

Signature of Person Issuing Summons:

PAULINE

JORDAN JUDICIAL OFFICER

Date: 01/12/2022

☐ 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

0804 **S** **2022** **000014**

STATE V.

CAPRI STEVENS

FTA Bail Information

Date Bail Set:

Amount Bail Set: \$ _____ by: _____

☐ Bail Recog. Attached

Released on Bail

R.O.R.

Committed Default

Committed w/o Bail

Place Committed:

Date Referred to County Prosecutor: _____

Date of First Appearance: **03/21/2022**

☐ 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) **18A:38-26**

2)

3)

Amended Charge

Waiver Ind/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:

DEDR/Lab Fee

DEDR:

LAB:

DEDR:

LAB:

DEDR:

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:

* 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

Related Traffic Tickets and Complaints:

ORIGINAL - Court Action

JUDGE'S SIGNATURE _____

DATE _____

Page 2 of 7

NJ/CDR1.1/1/2017

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER			
0804	S	2022	000014
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

ELK JOINT MUNICIPAL COURT
680 WHIG LANE
MONROEVILLE NJ 08343-0000
856-881-6631 COUNTY OF: **GLOUCESTER**

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

COMPLAINANT **ALICIA FRAGOSO**
NAME: **HERMA SIMMONS ELEMENTARY SCHOOL**
300 W. CHESTNUT STREET
CLAYTON NJ 08312

THE STATE OF NEW JERSEY

VS.

CAPRI STEVENS

ADDRESS: **110 MELVIN STREET**

CLAYTON NJ 08312-0000

DEFENDANT INFORMATION			
SEX:	EYE COLOR:	DOB:	DL STATE:
DRIVER'S LIC. #:		SOCIAL SECURITY #:	
TELEPHONE #:		SBI #:	
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 **09/07/2021** in **CLAYTON BORO**, **GLOUCESTER County, NJ** did: **WITHIN THE JURISDICTION OF THIS COURT, " THE DEFENDANT'S CHILD, P.G., HAS BEEN ABSENT A TOTAL OF 16 UNEXCUSED DAYS SINCE THE BEGINNING OF SCHOOL YEAR IN SEPTEMBER 2021> "**

In violation of:

Original Charge	1) 18A: 38-26	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: _____ Date of Action: _____

Name, Title and Department of Officer

**RETURN OF SERVICE
INFORMATION**

Affidavit of Probable Cause

COMPLAINT NUMBER			
0804	S	2022	000014
COURT CODE	PREFIX	YEAR	SEQUENCE NO

THE STATE OF NEW JERSEY

VS.

CAPRI STEVENS

ELK JOINT MUNICIPAL COURT
680 WHIG LANE
MONROEVILLE NJ 08343-0000
856-881-6631 COUNTY OF: GLOUCESTER

ADDRESS: 110 MELVIN STREET

CLAYTON

NJ 08312-0000

# of CHARGES 1	CO-DEFTS	POLICE CASE #:
COMPLAINANT NAME:	ALICIA FRAGOSO HERMA SIMMONS ELEMENTARY SCHOOL 300 W. CHESTNUT STREET CLAYTON NJ 08312	

DEFENDANT INFORMATION	
SEX:	DOB:
EYE COLOR:	
DRIVER'S LIC. #:	DL STATE:
SOCIAL SECURITY #:	SBI #:
TELEPHONE #:	(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:

Affidavit of Probable Cause

Affidavit of Probable Cause

COMPLAINT NUMBER

THE STATE OF NEW JERSEY

0804

S

2022

000014

VS.

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

CAPRI STEVENS

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

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: _____ Date: _____

Affidavit of Probable Cause

Page 6 of 7

1/1/2017

Preliminary Law Enforcement Incident Report

CC COMPLAINT NUMBER			
0804	S	2022	000014
COURT CODE	PREFIX	YEAR	SEQUENCE NO.
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER			
# of CHARGES 1	CO-DEFTS	POLICE CASE #:	
COMPLAINANT ALICIA FRAGOSO NAME: HERMA SIMMONS ELEMENTARY SCHOOL 300 W. CHESTNUT STREET CLAYTON NJ 08312			
DEFENDANT INFORMATION SEX: EYE COLOR: DOB: DL STATE: DRIVER'S LIC. #: SOCIAL SECURITY #: (C) TELEPHONE #: (C) LIVESCAN PCN #:			

THE STATE OF NEW JERSEY

VS.

CAPRI STEVENS

ADDRESS: 110 MELVIN STREET

CLAYTON

NJ 08312-0000

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

Page 7 of 7

7/20/2018

COMPLAINT - SUMMONS

COMPLAINT NUMBER			
0804	S	2022	000015
COURT CODE	PREFIX	YEAR	SEQUENCE NO.
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER			
# of CHARGES 1	CO-DEFTS	POLICE CASE #:	
COMPLAINANT NAME: ALICIA FRAGOSO HERMA SIMMONS ELEMENTARY SCHOOL 300 W. CHESTNUT STREET CLAYTON NJ 08312		DEFENDANT INFORMATION SEX: EYE COLOR: DOB: DRIVER'S LIC. #: SOCIAL SECURITY #: (c) TELEPHONE #: (c) LIVSCAN PCN #:	
THE STATE OF NEW JERSEY VS. TERRI BROWN ADDRESS: 2 WHITNEY AVE CLAYTON NJ 08312-0000			
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 09/07/2021 in CLAYTON BORO, GLOUCESTER County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, " THE DEFENDANT'S CHILD, T. C. HAS BEEN ABSENT A TOTAL OF 14.75 UNEXCUSED DAYS (INCLUDING 7 TARDY DAYS) SINCE THE BEGINNING OF THE SCHOOL YEAR IN SEPTEMBER 2021. PLEASE NOTE 4 TARDY DAYS EQUAL 1 UNEXCUSED ABSENCE."			
in violation of:			
Original Charge	1) 18A:38-26		2)
Amended Charge	3)		
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: Alicia Fragoso		Date: 1/12/22	
PROBABLE CAUSE DETERMINATION AND ISSUANCE OF SUMMONS			
☐ Probable cause IS NOT found for the issuance of this complaint;			
Signature of Court Administrator or Deputy Court Administrator		Date	
☐ Probable cause IS found for the issuance of this complaint-summons:			
Signature of Judge		Date	
SUMMONS			
YOU ARE HEREBY SUMMONED to appear before the Municipal Court in the county of: GLOUCESTER			
at the following address: ELK JOINT MUNICIPAL COURT			
680 WHIG LANE		MONROEVILLE NJ 08343-0000	
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:		Appearance Date: 03/21/2022 Time: 01:30PM Phone: 856-881-6631	
Signature of Person Issuing Summons:		Date:	
☐ 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	
Page 1 of 7		NJ/CDR1 1/1/2017	

COMPLAINT - SUMMONS

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
0804	S	2022	000015	VS.	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	TERRI BROWN	
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				ADDRESS: 2 WHITNEY AVE CLAYTON NJ 08312-0000	
# of CHARGES 1	CO-DEFTS	POLICE CASE #:		DEFENDANT INFORMATION	
COMPLAINANT NAME: ALICIA FRAGOSO HERMA SIMMONS ELEMENTARY SCHOOL 300 W. CHESTNUT STREET CLAYTON NJ 08312				SEX: EYE COLOR: DOB: DL STATE: DRIVER'S LIC. #: SOCIAL SECURITY #: (c) TELEPHONE #: LIVSCAN 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 09/07/2021 in CLAYTON BORO, GLOUCESTER County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, " THE DEFENDANT'S CHILD, T. C. HAS BEEN ABSENT A TOTAL OF 14.75 UNEXCUSED DAYS (INCLUDING 7 TARDY DAYS) SINCE THE BEGINNING OF THE SCHOOL YEAR IN SEPTEMBER 2021. PLEASE NOTE 4 TARDY DAYS EQUAL 1 UNEXCUSED ABSENCE."					
in violation of:					
Original Charge	1) 18A:38-26		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: _____ Date: _____					
PROBABLE CAUSE DETERMINATION AND ISSUANCE OF SUMMONS					
☐ 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-summons:					
		Signature of Judge		Date	
SUMMONS					
YOU ARE HEREBY SUMMONED to appear before the Municipal Court in the county of: GLOUCESTER					
at the following address: ELK JOINT MUNICIPAL COURT					
680 WHIG LANE		MONROEVILLE		NJ 08343-0000	
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:		Appearance Date: 03/21/2022		Time: 01:30PM Phone: 856-881-6631	
Signature of Person Issuing Summons: PAULINE JORDAN JUDICIAL OFFICER Date: 01/12/2022					
☐ 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	
				Page 1 of 7 NJ/CDR1 1/1/2017	

COMPLAINT - SUMMONS (Court Action)

COMPLAINT NUMBER

0804**S****2022****000015**

STATE V.

TERRI BROWN

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: **03/21/2022**☐ 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) **18A:38-26**

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:

DEDR/Lab Fee

DEDR:

LAB:

DEDR:

LAB:

DEDR:

LAB:

CD Fee/Drug Ed Fnd

CD:

DAEF:

CD:

DAEF:

CD:

DAEF:

DV Surch/Other Fees

DV:

Other:

DV:

Other:

DV:

Other:

Restitution

Beneficiary:

* 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 IO

Miscellaneous Information, Adjournments, Companion Complaints, Co-Defendants, Case Notes:

Related Traffic Tickets and Complaints:

ORIGINAL - Court Action

JUDGE'S SIGNATURE

DATE

Page 2 of 7

NJ/CDR1 1/1/2017

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER				THE STATE OF NEW JERSEY <i>VS.</i> TERRI BROWN ADDRESS : 2 WHITNEY AVE CLAYTON NJ 08312-0000	
0804	S	2022	000015		
COURT CODE	PREFIX	YEAR	SEQUENCE NO.		
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER					
# of CHARGES 1	CO-DEFTS	POLICE CASE #:		DEFENDANT INFORMATION	
COMPLAINANT NAME: ALICIA FRAGOSO HERMA SIMMONS ELEMENTARY SCHOOL 300 W. CHESTNUT STREET CLAYTON NJ 08312			SEX: EYE COLOR: DOB: DRIVER'S LIC. #: DL STATE: SOCIAL SECURITY #: (C) TELEPHONE #: (C) LIVSCAN 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 09/07/2021 in CLAYTON BORO , GLOUCESTER County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, " THE DEFENDANT'S CHILD, T. C. HAS BEEN ABSENT A TOTAL OF 14.75 UNEXCUSED DAYS (INCLUDING 7 TARDY DAYS) SINCE THE BEGINNING OF THE SCHOOL YEAR IN SEPTEMBER 2021. PLEASE NOTE 4 TARDY DAYS EQUAL 1 UNEXCUSED ABSENCE."					
In violation of:					
Original Charge		1) 18A:38-26		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: _____ Date of Action: _____ Name, Title and Department of Officer					
				RETURN OF SERVICE INFORMATION Page 4 of 7 NJ/CDR1 1/1/2017	

Affidavit of Probable Cause

COMPLAINT NUMBER

0804

S

2022

000015

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

ELK JOINT MUNICIPAL COURT

680 WHIG LANE

MONROEVILLE

NJ 08343-0000

856-881-6631

COUNTY OF: GLOUCESTER

of CHARGES

1

CO-DEFTS

POLICE CASE #:

COMPLAINANT ALICIA FRAGOSO

NAME:

HERMA SIMMONS ELEMENTARY SCHOOL

300 W. CHESTNUT STREET

CLAYTON

NJ 08312

THE STATE OF NEW JERSEY

VS.

TERRI BROWN

ADDRESS:

2 WHITNEY AVE

CLAYTON

NJ 08312-0000

DEFENDANT INFORMATION

SEX: EYE COLOR:

DOB:

DRIVER'S LIC. #:

DL STATE:

SOCIAL SECURITY #:

SBI #:

TELEPHONE #:

(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:

Affidavit of Probable Cause

Page 5 of 7

1/1/2017

Affidavit of Probable Cause

COMPLAINT NUMBER

0804**S****2022****000015**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

THE STATE OF NEW JERSEY**VS.****TERRI BROWN**

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

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: _____

Date: _____

Affidavit of Probable Cause**Page 6 of 7**

1/1/2017

Preliminary Law Enforcement Incident Report

COMPLAINT NUMBER				THE STATE OF NEW JERSEY VS. TERRI BROWN ADDRESS: 2 WHITNEY AVE CLAYTON NJ 08312-0000	
0804	S	2022	000015		
COURT CODE	PREFIX	YEAR	SEQUENCE NO.		
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER					
# of CHARGES 1	CO-DEFTS	POLICE CASE #:		DEFENDANT INFORMATION	
COMPLAINANT NAME: ALICIA FRAGOSO HERMA SIMMONS ELEMENTARY SCHOOL 300 W. CHESTNUT STREET CLAYTON NJ 08312			SEX: EYE COLOR: DOB: DRIVER'S LIC. #: DL STATE: SOCIAL SECURITY #: SBI #: TELEPHONE #: (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.

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

Page 7 of 7

7/20/2018

COMPLAINT - SUMMONS

COMPLAINT NUMBER			
0804	S	2022	000016
COURT CODE	PREFIX	YEAR	SEQUENCE NO.
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER			
# of CHARGES 1	CO-DEFENDANTS	POLICE CASE #:	DEFENDANT INFORMATION
COMPLAINANT NAME: ALICIA FRAGOSO HERMA SIMMONS ELEMENTARY SCHOOL 300 W CHESTNUT STREET CLAYTON NJ 08028			SEX: EYE COLOR: DOB: DL STATE: DRIVER'S LIC. #: SOCIAL SECURITY #: (C) TELEPHONE #: (C) LIVSCAN 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 09/07/2021 in CLAYTON BORO, GLOUCESTER County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, " THE DEFENDANT'S CHILD, D.K. HAS BEEN A TOTAL OF 21.75 UNEXCUSED DAYS (INCLUDING 23 TARDY DAYS) SINCE THE BEGINNING OF THE SEPTEMBER 2021 SCHOOL YEAR. PLEASE NOTE THAT EVERY 4 TARDY DAYS EQUAL 1 UNEXCUSED ABSENCE."			
in violation of:			
Original Charge	1) 18A:38-26	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: <u>Alicia Fragoso</u> Date: <u>1/12/22</u>			
PROBABLE CAUSE DETERMINATION AND ISSUANCE OF SUMMONS			
☐ 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-summons: Signature of Judge _____ Date _____			
SUMMONS			
YOU ARE HEREBY SUMMONED to appear before the Municipal Court in the county of: GLOUCESTER			
at the following address: ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000			
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: Appearance Date: 03/21/2022 Time: 01:30PM Phone: 856-881-6631			
Signature of Person Issuing Summons: _____ Date: _____			
☐ 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	
Page 1 of 7		NJ/CDR1 1/1/2017	

COMPLAINT - SUMMONS

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
0804	S	2022	000016	VS.	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	SIOBHAN MCCANN-KNOWLES	
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				ADDRESS: 805 PINE AVE CLAYTON NJ 08312-0000	
# of CHARGES 1	CO-DEFTS	POLICE CASE #:		DEFENDANT INFORMATION	
COMPLAINANT NAME: ALICIA FRAGOSO HERMA SIMMONS ELEMENTARY SCHOOL 300 W CHESTNUT STREET CLAYTON NJ 08028			SEX: EYE COLOR: DOB: DL STATE: DRIVER'S LIC. #: SOCIAL SECURITY #: SBI #: TELEPHONE #: (C) LIVSCAN 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 09/07/2021 in CLAYTON BORO, GLOUCESTER County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, " THE DEFENDANT'S CHILD, D.K. HAS BEEN A TOTAL OF 21.75 UNEXCUSED DAYS (INCLUDING 23 TARDY DAYS) SINCE THE BEGINNING OF THE SEPTEMBER 2021 SCHOOL YEAR. PLEASE NOTE THAT EVERY 4 TARDY DAYS EQUAL 1 UNEXCUSED ABSENCE."

in violation of:

Original Charge	1) 18A:38-26	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: _____ Date: _____

PROBABLE CAUSE DETERMINATION AND ISSUANCE OF SUMMONS

☐ 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-summons:

Signature of Judge _____ Date _____

SUMMONS

YOU ARE HEREBY SUMMONED to appear before the Municipal Court in the county of: GLOUCESTER

at the following address: ELK JOINT MUNICIPAL COURT

680 WHIG LANE MONROEVILLE NJ 08343-0000

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: Appearance Date: 03/21/2022 Time: 01:30PM Phone: 856-881-6631

Signature of Person Issuing Summons: PAULINE JORDAN JUDICIAL OFFICER Date: 01/12/2022

☐ 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				STATE V.	
0804	S	2022	000016	STIOBHAN MCCANN-KNOWLES	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.		
FTA Bail Information		Date Bail Set:	Amount Bail Set: \$ _____ by: _____		☐ Bail Recog. Attached
Released on Bail	R.O.R.	Committed Default	Committed w/o Bail	Place Committed:	Date Referred to County Prosecutor: _____
Date of First Appearance: 03/21/2022		☐ Advised of Rights by _____			Defendant Desires Counsel: ☐ Yes ☐ No
Prosecutor's Attorney Information				Defense Counsel Information	
Name:				Name:	
State	County	Municipal	Other	None	Retained
				Public Def	Assigned
				Waived	Other
Original Charge	1) 18A:38-26		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
Probation Term			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:
DEDR/Lab Fee	DEDR:	LAB:	DEDR:	LAB:	DEDR: 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:					* 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
Related Traffic Tickets and Complaints:					
JUDGE'S SIGNATURE _____ DATE _____					ORIGINAL - Court Action Page 2 of 7 NJ/CDR1 1/1/2017

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER				THE STATE OF NEW JERSEY VS. SIOBHAN MCCANN-KNOWLES	
0804	S	2022	000016		
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	ADDRESS: 805 PINE AVE CLAYTON NJ 08312-0000	
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER					
# of CHARGES	CO-DEFTS	POLICE CASE #:		DEFENDANT INFORMATION SEX: EYE COLOR: DOB: DL STATE: DRIVER'S LIC. #: SOCIAL SECURITY # SBI #: TELEPHONE # (C) LIVSCAN PCN #:	
1					
COMPLAINANT ALICIA FRAGOSO NAME: HERMA SIMMONS ELEMENTARY SCHOOL 300 W CHESTNUT STREET CLAYTON NJ 08028					

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 **09/07/2021** in **CLAYTON BORO**, **GLOUCESTER** County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, " THE DEFENDANT'S CHILD, D.K. HAS BEEN A TOTAL OF 21.75 UNEXCUSED DAYS (INCLUDING 23 TARDY DAYS) SINCE THE BEGINNING OF THE SEPTEMBER 2021 SCHOOL YEAR. PLEASE NOTE THAT EVERY 4 TARDY DAYS EQUAL 1 UNEXCUSED ABSENCE."

In violation of:

Original Charge	1) 18A:38-26	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: _____ Date of Action: _____
Name, Title and Department of Officer

RETURN OF SERVICE INFORMATION

Affidavit of Probable Cause

COMPLAINT NUMBER			
0804	S	2022	000016
COURT CODE	PREFIX	YEAR	SEQUENCE NO.
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER			
# of CHARGES 1	CO-DEFTS	POLICE CASE #:	
COMPLAINANT ALICIA FRAGOSO NAME: HERMA : IMMONS ELEMENTARY SCHOOL 300 W CHESTNUT STREET CLAYTON NJ 08028			
DEFENDANT INFORMATION SEX: EYE COLOR: DOB: DL STATE: DRIVER'S LIC. #: SOCIAL SECURITY #: SBI #: TELEPHONE #: (C) LIVESCAN PCN #:			
ADDRESS: 805 PINE AVE CLAYTON NJ 08312-0000			
THE STATE OF NEW JERSEY VS. SIOBHAN MCCANN-KNOWLES			
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 <u>and</u> (2) the defendant is the one who committed it:			
Affidavit of Probable Cause			
Page 5 of 7 1/1/2017			

Affidavit of Probable Cause

COMPLAINT NUMBER

0804**S****2022****000016**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

THE STATE OF NEW JERSEY**VS.****SIOBHAN MCCANN-KNOWLES**

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

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: _____ Date: _____

Affidavit of Probable Cause

Preliminary Law Enforcement Incident Report

COMPLAINT NUMBER				THE STATE OF NEW JERSEY VS. SIOBHAN MCCANN-KNOWLES	
0804	S	2022	000016		
COURT CODE	PREFIX	YEAR	SEQUENCE NO.		
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				ADDRESS: 805 PINE AVE CLAYTON NJ 08312-0000	
# of CHARGES 1	CO-DEFTS	POLICE CASE #:		DEFENDANT INFORMATION	
COMPLAINANT ALICIA FRAGOSO NAME: HERMA SIMMONS ELEMENTARY SCHOOL 300 W CHESTNUT STREET CLAYTON NJ 08028			SEX: EYE COLOR: DOB: DRIVER'S LIC. #: SOCIAL SECURITY #: SBI #: TELEPHONE #: (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.

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

Page 7 of 7

7/20/2018

COMPLAINT - SUMMONS

COMPLAINT NUMBER				THE STATE OF NEW JERSEY VS. CHRISTOPH D VELEZ	
0804	S	2022	000017		
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	ADDRESS:	
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				209 AWALT DRIVE, APT M2 GLASSBORO NJ 08028-0000	
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 2020-00777		DEFENDANT INFORMATION	
COMPLAINANT NAME: BRIAN LLOYD		SEX: M EYE COLOR: BROWN		DOB: [REDACTED]	
PO BOX 623		DRIVER'S LIC: [REDACTED]		DL STATE: NJ	
WOODBURY NJ 08096		SOCIAL SECURITY #: [REDACTED]		SBI #: [REDACTED]	
		TELEPHONE #: [REDACTED]		LIVSCAN PCN #: [REDACTED]	

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 **09/28/2020** in **CLAYTON BORO**, **GLOUCESTER County, NJ** did: WITHIN THE JURISDICTION OF THIS COURT, IN THE COURSE OF COMMITTING A THEFT, KNOWINGLY DID INFLICT BODILY INJURY UPON DAVID CARDONICK WHILE ARMED WITH, OR USING OR THREATENING THE IMMEDIATE USE OF A DEADLY WEAPON, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:15-1, AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF SAME. SAID CRIME BEING A CRIME OF 1ST DEGREE.

WITHIN THE JURISDICTION OF THIS COURT, ACTING ALONE OR WITH ONE OR MORE PERSONS DID CAUSE THE DEATH OF DAVID CARDONICK DURING THE COMMISSION OF THE CRIME OF ROBBERY, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:11-3A(3), AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF SAME. SAID CRIME BEING A CRIME OF 1ST DEGREE.

in violation of:

Original Charge	1) 2C:15-1	2) 2C:11-3A(3)	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: **BRIAN LLOYD** Date: **01/12/2022**

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: **GLOUCESTER** at the following address: **GLOUCESTER COUNTY COURTS**

JUSTICE COMPLEX 70 HUNTER STREET WOODBURY NJ 08096-0000

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: Appearance Date: **12/31/2022** Time: Phone: **856-878-5050**

Signature of Person Issuing Summons: **BRIAN LLOYD** Date: **01/12/2022**

☐ 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
0804 | **S** | **2022** | **000017**
COURT CODE PREFIX YEAR SEQUENCE NUMBER

STATE V.**CHRISTOPH D VELEZ**

FTA Bail Information		Date Bail Set:	Amount Bail Set: \$ _____ by: _____	☐ Bail Recog. Attached
Released on Bail	R.O.R.	Committed Default	Committed w/o Bail	Date Referred to: _____ County Prosecutor: _____
Place Committed:				

Date of First Appearance: 12/31/2022	☐ 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:15-1	2) 2C:11-3A(3)	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: _____
DEDR/Lab Fee	DEDR: _____ LAB: _____	DEDR: _____ LAB: _____	DEDR: _____ 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:	* 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
Related Traffic Tickets and Complaints:	

JUDGE'S SIGNATURE _____	DATE _____	ORIGINAL - Court Action Page 2 of 7 NO/CDR 1/1/2017
-------------------------	------------	--

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

COMPLAINT NUMBER			
0804	S	2022	000017
COURT CODE	PREFIX	YEAR	SEQUENCE NO.
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER			
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 2020-00777	
COMPLAINANT NAME: BRIAN LLOYD		DEFENDANT INFORMATION SEX: M EYE COLOR: BROWN DOB: [REDACTED] DRIVER'S LIC. # [REDACTED] DL STATE: NJ SOCIAL SECURITY #: [REDACTED] SBI #: [REDACTED] TELEPHONE #: () LIVESCAN PCN #: [REDACTED]	

THE STATE OF NEW JERSEY
VS.

CHRISTOPH D VELEZ

ADDRESS: **209 AWALT DRIVE, APT M2**

GLASSBORO

NJ 08028-0000

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 **09/28/2020** in **CLAYTON BORO**, **GLOUCESTER** County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, IN THE COURSE OF COMMITTING A ROBBERY, KNOWINGLY DID INFLICT BODILY INJURY UPON DAVID CARDONICK WHILE ARMED WITH, OR USING OR THREATENING THE IMMEDIATE USE OF A DEADLY WEAPON, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:15-1, AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF SAME. SAID CRIME BEING A CRIME OF 1ST DEGREE.

WITHIN THE JURISDICTION OF THIS COURT, ACTING ALONE OR WITH ONE OR MORE PERSONS, DID CAUSE THE DEATH OF DAVID CARDONICK DURING THE COMMISSION OF THE CRIME OF ROBBERY, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:11-3A(3), AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF SAME. SAID CRIME BEING A CRIME OF 1ST DEGREE.

in violation of:

Original Charge	1) 2C:15-1	2) 2C:11-3A(3)	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: **BRIAN LLOYD**

Date: **01/12/2022**

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: **GLOUCESTER** at the following address: **GLOUCESTER COUNTY COURTS**

JUSTICE COMPLEX **70 HUNTER STREET**

WOODBURY

08096-0000

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:

Appearance Date: **12/31/2022**

Time:

Phone: **856-878-5050**

Signature of Person Issuing Summons:

BRIAN

LLOYD

Date: **01/12/2022**

☐ **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):**

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

Page 3 of 7

NJ/CDR1 1/1/2017

NJ 08096-0000

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER				<i>THE STATE OF NEW JERSEY</i>	
0804	S	2022	000017	VS.	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	CHRISTOPH D VELEZ	
ELK JOINT MUNICIPAL COURT				ADDRESS:	
680 WHIG LANE				209 AWALT DRIVE, APT M2	
MONROEVILLE NJ 08343-0000				GLASSBORO NJ 08028-0000	
856-881-6631 COUNTY OF: GLOUCESTER				DEFENDANT INFORMATION	
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 2020-00777		SEX: M EYE COLOR: BROWN	DOB: [REDACTED]
COMPLAINANT BRIAN LLOYD				DRIVER'S LIC. # [REDACTED]	DL STATE: NJ
NAME: PO BOX 623				SOCIAL SECURITY # [REDACTED]	SBI #: [REDACTED]
WOODBURY NJ 08096				TELEPHONE #: [REDACTED]	LIVSCAN PCN #: [REDACTED]

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 **09/28/2020** in **CLAYTON BORO**, **GLOUCESTER County, NJ** did: WITHIN THE JURISDICTION OF THIS COURT, IN THE COURSE OF COMMITTING A THEFT, KNOWINGLY DID INFLICT BODILY INJURY UPON DAVID CARDONICK WHILE ARMED WITH, OR USING OR THREATENING THE IMMEDIATE USE OF A DEADLY WEAPON, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:15-1, AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF SAME. SAID CRIME BEING A CRIME OF 1ST DEGREE.

WITHIN THE JURISDICTION OF THIS COURT, ACTING ALONE OR WITH ONE OR MORE PERSONS DID CAUSE THE DEATH OF DAVID CARDONICK DURING THE COMMISSION OF THE CRIME OF ROBBERY, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:11-3A(3), AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF SAME. SAID CRIME BEING A CRIME OF 1ST DEGREE.

in violation of:

Original Charge	1) 2C:15-1	2) 2C:11-3A(3)	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: **BRIAN LLOYD GLOUCESTER CO PROSECUTORS OFF**
Name, Title and Department of Officer

Date of Action: **01/12/2022**

**RETURN OF SERVICE
INFORMATION**

Affidavit of Probable Cause

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
0804	S	2022	000017	VS.	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	CHRISTOPH D VELEZ	
ELK JOINT MUNICIPAL COURT				ADDRESS:	
680 WHIG LANE				209 AWALT DRIVE, APT M2	
MONROEVILLE NJ 08343-0000				GLASSBORO NJ 08028-0000	
856-881-6631				COUNTY OF: GLOUCESTER	
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 2020-00777		DEFENDANT INFORMATION	
COMPLAINANT BRIAN LLOYD		SEX: M EYE COLOR: BROWN DOB: [REDACTED]		DL STATE: NJ	
NAME: PO BOX 623		DRIVER'S LIC. [REDACTED]		SBI #: [REDACTED]	
WOODBURY NJ 08096		SOCIAL SECURITY #: [REDACTED]		TELEPHONE #: [REDACTED]	
		LIVESCAN PCN #: [REDACTED]			

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:

Grand Jury Direct Presentment

Affidavit of Probable Cause

Page 5 of 7

1/1/2017

Affidavit of Probable Cause**COMPLAINT NUMBER****THE STATE OF NEW JERSEY****0804****S****2022****000017****VS.****CHRISTOPH D VELEZ**

COURT CODE PREFIX YEAR SEQUENCE NO.

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

I am a Detective with the Gloucester County Prosecutor's Office

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

Murder

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: BRIAN LLOYD LAW ENFORCEMENT OFFICER

Date: 01/12/2022

Affidavit of Probable Cause**Page 6 of 7**

1/1/2017

Preliminary Law Enforcement Incident Report

COMPLAINT NUMBER			
0804	S	2022	000017
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

THE STATE OF NEW JERSEY**VS.****CHRISTOPH D VELEZ**ADDRESS: **209 AWALT DRIVE, APT M2****GLASSBORO****NJ 08028-0000**

ELK JOINT MUNICIPAL COURT
680 WHIG LANE
MONROEVILLE NJ 08343-0000
856-881-6631 COUNTY OF: **GLOUCESTER**

# of CHARGES 2	CO-DEFTS	POLICE CASE #: 2020-00777
--------------------------	----------	-------------------------------------

COMPLAINANT **BRIAN LLOYD**
 NAME: **PO BOX 623**

WOODBURY**NJ 08096**

DEFENDANT INFORMATION

SEX: **M** EYE COLOR: **BROWN** DOB: [REDACTED]

DRIVER'S LIC. [REDACTED]

SOCIAL SECURITY #: [REDACTED]

TELEPHONE #: [REDACTED]

LIVESCAN PCN #: [REDACTED]

DL STATE: **NJ**

SBI #: [REDACTED]

()

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**Page 7 of 7**

7/20/2018

COMPLAINT - SUMMONS

COMPLAINT NUMBER			
0804	S	2022	000018
COURT CODE	PREFIX	YEAR	SEQUENCE NUMBER

THE STATE OF NEW JERSEY
VS.
SENIO O STERLING

ELK JOINT MUNICIPAL COURT
680 WHIG LANE
MONROEVILLE NJ 08343-0000
856-881-6631 COUNTY OF: GLOUCESTER

ADDRESS: 17 STILL RUN

CLAYTON

NJ 08312-0000

# of CHARGES 1	CO-DEFTS 0	POLICE CASE #: 2022-676
COMPLAINANT PTLM J MAYO NAME: 125 N DELSEA DR CLAYTON NJ 08312		

DEFENDANT INFORMATION
SEX: M EYE COLOR: BROWN DOB: [REDACTED]
DRIVER'S LIC. # [REDACTED] DL STATE: NJ
SOCIAL SECURITY # [REDACTED] SBI #: [REDACTED]
TELEPHONE #: [REDACTED] (c)
LIVESCAN PCN: [REDACTED]

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 01/13/2022 in CLAYTON BORO, GLOUCESTER County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, COMMIT ASSAULT BY PURPOSELY, KNOWINGLY OR RECKLESSLY CAUSING BODILY INJURY TO REBECCA SANTANA, SPECIFICALLY BY ENGAGING IN A VERBAL AND PHYSICAL DISPUTE. DURING THE DISPUTE THE VICTIM STATED THAT THE DEFENDANT STRUCK HER IN THE MOUTH CAUSING A CUT TO HER INNER LIP.

in violation of:

Original Charge	1) 2C:12-1A(1)	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: PTLM J MAYO Date: 01/13/2022

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: GLOUCESTER at the following address: GLOUCESTER COUNTY COURTS

JUSTICE COMPLEX 70 HUNTER STREET WOODBURY NJ 08096-0000

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: 01/13/2022 Appearance Date: 02/01/2022 Time: 09:00AM Phone: 856-878-5050

Signature of Person Issuing Summons: JOHN ARMANO JUDICIAL OFFICER Date: 01/13/2022

☒ 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:
0804 | **S** | **2022** | **000018**
COURT CODE PREFIX YEAR SEQUENCE NO.

STATE V.

SENIO O STERLING

FTA Bail Information		Date Bail Set: _____		Amount Bail Set: \$ _____ by: _____		☐ Bail Recog. Attached	
Released on Bail	R.O.R.	Committed Default	Committed w/o Ball	Place Committed: _____			Date Referred to: _____ County Prosecutor: _____
Date of First Appearance: 02/01/2022		☐ 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
Original Charge		1) 2C:12-1A(1)		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	
Probation Term				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: _____	
DEDR/Lab Fee		DEDR: _____ LAB: _____		DEDR: _____ LAB: _____		DEDR: _____ 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:

*** Finding Codes**

- 1 - Guilty
- 2 - Not Guilty
- 3 - Dismissed
- 4 - Guilty but Mentally Ill
- 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

Related Traffic Tickets and Complaints:

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
0804	S	2022	000018	VS.	
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				ADDRESS: 17 STILL RUN CLAYTON NJ 08312-0000	
# of CHARGES 1	CO-DEFTS 0	POLICE CASE #: 2022-676		DEFENDANT INFORMATION	
COMPLAINANT NAME: PTLM J MAYO			SEX: M EYE COLOR: BROWN DOB: [REDACTED] DRIVER'S LIC. # [REDACTED] DL STATE: NJ SOCIAL SECURITY # [REDACTED] SBI # [REDACTED] TELEPHONE # [REDACTED] (C) LIVSCAN PCN # [REDACTED]		

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 01/13/2022 in CLAYTON BORO, GLOUCESTER County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, COMMIT ASSAULT BY PURPOSELY, KNOWINGLY OR RECKLESSLY CAUSING BODILY INJURY TO REBECCA SANTANA, SPECIFICALLY BY ENGAGING IN A VERBAL AND PHYSICAL DISPUTE. DURING THE DISPUTE THE VICTIM STATED THAT THE DEFENDANT STRUCK HER IN THE MOUTH CAUSING A CUT TO HER INNER LIP.

In violation of:

Original Charge	1) 2C:12-1A(1)	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: PTLM J MAYO

Date: 01/13/2022

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: GLOUCESTER at the following address: GLOUCESTER COUNTY COURTS

JUSTICE COMPLEX 70 HUNTER STREET WOODBURY NJ 08096-0000

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: 01/13/2022 Appearance Date: 02/01/2022 Time: 09:00AM Phone: 856-878-5050

Signature of Person Issuing Summons: JOHN ARMANO JUDICIAL OFFICER

Date: 01/13/2022

☒ 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):

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER			
0804	S	2022	000018
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

THE STATE OF NEW JERSEY

VS.

SENIO O STERLING

ELK JOINT MUNICIPAL COURT
680 WHIG LANE
MONROEVILLE NJ 08343-0000
856-881-6631 COUNTY OF: **GLOUCESTER**

ADDRESS: **17 STILL RUN**

CLAYTON

NJ 08312-0000

# of CHARGES 1	CO-DEFTS 0	POLICE CASE #: 2022-676
--------------------------	----------------------	-----------------------------------

DEFENDANT INFORMATION

SEX: M EYE COLOR: BROWN

DOB: [REDACTED]

DRIVER'S LIC. # [REDACTED]

DL STATE: NJ

SOCIAL SECURITY # [REDACTED]

SBI #: [REDACTED]

TELEPHONE #: [REDACTED] (C)

LIVSCAN PCN # [REDACTED]

COMPLAINANT PTLM J MAYO
NAME: 125 N DELSEA DR

CLAYTON

NJ 08312

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 **01/13/2022** in **CLAYTON BORO**, **GLOUCESTER County, NJ** did: WITHIN THE JURISDICTION OF THIS COURT, COMMIT ASSAULT BY PURPOSELY, KNOWINGLY OR RECKLESSLY CAUSING BODILY INJURY TO REBECCA SANTANA, SPECIFICALLY BY ENGAGING IN A VERBAL AND PHYSICAL DISPUTE. DURING THE DISPUTE THE VICTIM STATED THAT THE DEFENDANT STRUCK HER IN THE MOUTH CAUSING A CUT TO HER INNER LIP.

in violation of:

Original Charge	1) 2C:12-1A(1)	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: **PTLM J MAYO CLAYTON BOROUGH PD** Date of Action: **01/13/2022**
Name, Title and Department of Officer

**RETURN OF SERVICE
INFORMATION**

Affidavit of Probable Cause

COMPLAINT NUMBER			
0804	S	2022	000018
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

THE STATE OF NEW JERSEY

VS.

SENIO O STERLING

ELK JOINT MUNICIPAL COURT
680 WHIG LANE
MONROEVILLE NJ 08343-0000
856-881-6631 COUNTY OF: **GLOUCESTER**

ADDRESS: **17 STILL RUN**

CLAYTON

NJ 08343-0000

# of CHARGES 1	CO-DEFTS	POLICE CASE #: 2022-676
--------------------------	----------	-----------------------------------

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

COMPLAINANT PTLM J MAYO
 NAME: 125 N DELSEA DR
 CLAYTON NJ 08312

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 STATED THAT SHE AND THE DEFENDANT WERE IN A VERBAL ARGUMENT WHEN THE DEFENDANT STRUCK HER IN THE MOUTH CAUSING A CUT TO HER INNER LIP. OFFICERS OBSERVED THE CUT

Affidavit of Probable Cause

Affidavit of Probable Cause

COMPLAINT NUMBER

0804

S

2022

000018

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

THE STATE OF NEW JERSEY

VS.

SENIO O STERLING

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

VICTIM STATED THAT SHE AND THE DEFENDANT WERE IN A VERBAL ARGUMENT WHEN THE DEFENDANT STRUCK HER IN THE MOUTH CAUSING A CUT TO HER INNER LIP. OFFICERS OBSERVED THE CUT. DENDANT ADMITTED TO BEING IN A VERBAL DISPUTE AND STATED THAT THE DISPUTE BECAME PHYSICAL ON BOTH BEHALVES.

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

MINOR CUT TO UPPER INSIDE LIP

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: PTLM J MAYO LAW ENFORCEMENT OFFICER

Date: 01/13/2022

Affidavit of Probable Cause

Page 6 of 7

1/1/2017

Preliminary Law Enforcement Incident Report

COMPLAINANT NUMBER			
0804	S	2022	000018
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

ELK JOINT MUNICIPAL COURT
680 WHIG LANE
MONROEVILLE NJ 08343-0000
856-881-6631 COUNTY OF: **GLOUCESTER**

# of CHARGES 1	CO-DEFTS	POLICE CASE #: 2022-676
--------------------------	----------	-----------------------------------

COMPLAINANT PTLM J MAYO
NAME: 125 N DELSEA DR

CLAYTON NJ 08312

THE STATE OF NEW JERSEY

VS.

SENIO O STERLING

ADDRESS: **17 STILL RUN**

CLAYTON

NJ 08312-0000

DEFENDANT INFORMATION

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

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:
•Victim concern about future assaults
•Victim and/or Defendant have more than 1 child altogether

-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 PRESENT

-A member of the public provided information to a 9-1-1 call center or dispatcher (or similar) at [REDACTED]

-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: **PTLM J MAYO LAW ENFORCEMENT OFFICER**

Date: **01/13/2022**

Preliminary Law Enforcement Incident Report

COMPLAINT - SUMMONS

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
0804	S	2022	000018	VS.	
COURT CODE PREFIX YEAR SEQUENCE NO				SENIO O STERLING	
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				ADDRESS: 17 STILL RUN CLAYTON NJ 08312-0000	
# of CHARGES 1	CO-DEFTS 0	POLICE CASE #: 2022-676		DEFENDANT INFORMATION	
COMPLAINANT PTLM J MAYO NAME: 125 N DELSEA DR CLAYTON NJ 08312		SEX: M EYE COLOR: BROWN DOB: [REDACTED] DRIVER'S LIC. # [REDACTED] DL STATE: NJ SOCIAL SECURITY #: xxx-xx- [REDACTED] SBI #: [REDACTED] TELEPHONE #: [REDACTED] (C) LIVESCAN PCN #: [REDACTED]			

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 01/13/2022 in CLAYTON BORO, GLOUCESTER County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, COMMIT ASSAULT BY PURPOSELY, KNOWINGLY OR RECKLESSLY CAUSING BODILY INJURY TO REBECCA SANTANA, SPECIFICALLY BY ENGAGING IN A VERBAL AND PHYSICAL DISPUTE. DURING THE DISPUTE THE VICTIM STATED THAT THE DEFENDANT STRUCK HER IN THE MOUTH CAUSING A CUT TO HER INNER LIP.

In violation of:

Original Charge	1) 2C:12-1A(1)	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: PTLM J MAYO

Date: 01/13/2022

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: GLOUCESTER at the following address: GLOUCESTER COUNTY COURTS

JUSTICE COMPLEX 70 HUNTER STREET WOODBURY NJ 08096-0000

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: 01/13/2022 Appearance Date: 02/01/2022 Time: 09:00AM Phone: 856-878-5050

Signature of Person Issuing Summons: JOHN ARMANO JUDICIAL OFFICER

Date: 01/13/2022

☒ 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

0804

S

2022

000018

STATE V.

SENIO O STERLING

FTA Bail Information		Date Bail Set:	Amount Bail Set: \$	by:	☐ Bail Recog. Attached
Released on Bail	R.O.R.	Committed Default	Committed w/o Bail	Place Committed:	Date Referred to County Prosecutor:

Date of First Appearance:	02/01/2022	☐ 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

Original Charge	1) 2C:12-1A(1)	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:
DEDR/Lab Fee	DEDR: LAB:	DEDR: LAB:	DEDR: 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:	* 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 - Motion P - Dismissed - Plea Agreement S - Disposed at Superior W - Dismissed - False ID
Related Traffic Tickets and Complaints:	

JUDGE'S SIGNATURE	DATE	ORIGINAL - Court Action
		Page 2 of 7

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
0804	S	2022	000018	VS.	
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				ADDRESS: 17 STILL RUN CLAYTON NJ 08312-0000	
# of CHARGES 1	CO-DEFTS 0	POLICE CASE #: 2022-676		DEFENDANT INFORMATION	
COMPLAINANT NAME: PTLM J MAYO		SEX: M EYE COLOR: BROWN DOB: [REDACTED] DRIVER'S LIC. # [REDACTED] DL STATE: NJ SOCIAL SECURITY #: XXX-XX-XXXX SBI #: [REDACTED] TELEPHONE #: [REDACTED] LIVESCAN PCN #: [REDACTED]			

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 01/13/2022 in **CLAYTON BORO**, **GLOUCESTER County, NJ** did: WITHIN THE JURISDICTION OF THIS COURT, COMMIT ASSAULT BY PURPOSELY, KNOWINGLY OR RECKLESSLY CAUSING BODILY INJURY TO REBECCA SANTANA, SPECIFICALLY BY ENGAGING IN A VERBAL AND PHYSICAL DISPUTE. DURING THE DISPUTE THE VICTIM STATED THAT THE DEFENDANT STRUCK HER IN THE MOUTH CAUSING A CUT TO HER INNER LIP.

in violation of:

Original Charge	1) 2C:12-1A(1)	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: PTLM J MAYO

Date: 01/13/2022

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: GLOUCESTER at the following address: GLOUCESTER COUNTY COURTS

JUSTICE COMPLEX 70 HUNTER STREET WOODBURY NJ 08096-0000

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: 01/13/2022 Appearance Date: 02/01/2022 Time: 09:00AM Phone: 856-878-5050

Signature of Person Issuing Summons: JOHN ARMANO JUDICIAL OFFICER

Date: 01/13/2022

☒ 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):

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

Page 3 of 7

NJ/CDR 1/1/2017

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER				THE STATE OF NEW JERSEY VS. SENIO O STERLING ADDRESS: 17 STILL RUN CLAYTON NJ 08312-0000	
0804	S	2022	000018		
COURT CODE	PREFIX	YEAR	SEQUENCE NO		
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER					
# of CHARGES 1	CO-DEFTS 0	POLICE CASE #: 2022-676		DEFENDANT INFORMATION SEX: M EYE COLOR: BROWN DOB: [REDACTED] DRIVER'S LIC. # [REDACTED] DL STATE: NJ SOCIAL SECURITY # xxx-xx SBI #: [REDACTED] TELEPHONE # [REDACTED] (C) LIVESCAN PCN #: [REDACTED]	
COMPLAINANT PTLM J MAYO NAME: 125 N DELSEA DR CLAYTON NJ 08312					

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 **01/13/2022** in **CLAYTON BORO**, **GLOUCESTER County, NJ** did: **WITHIN THE JURISDICTION OF THIS COURT, COMMIT ASSAULT BY PURPOSELY, KNOWINGLY OR RECKLESSLY CAUSING BODILY INJURY TO REBECCA SANTANA, SPECIFICALLY BY ENGAGING IN A VERBAL AND PHYSICAL DISPUTE. DURING THE DISPUTE THE VICTIM STATED THAT THE DEFENDANT STRUCK HER IN THE MOUTH CAUSING A CUT TO HER INNER LIP.**

In violation of:

Original Charge	1) 2C:12-1A(1)	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: **PTLM J MAYO CLAYTON BOROUGH PD** Date of Action: **01/13/2022**
Name, Title and Department of Officer

RETURN OF SERVICE INFORMATION

Affidavit of Probable Cause

COMPLAINT NUMBER			
0804	S	2022	000018
COURT CODE	PREFIX	YEAR	SEQUENCING

ELK JOINT MUNICIPAL COURT
680 WHIG LANE
MONROEVILLE NJ 08343-0000
856-881-6631 COUNTY OF: **GLOUCESTER**

# of CHARGES 1	CO-DEFTS	POLICE CASE #: 2022-676
--------------------------	----------	-----------------------------------

COMPLAINANT **PTLM J MAYO**
 NAME: **125 N DELSEA DR**

CLAYTON NJ 08312

THE STATE OF NEW JERSEY

VS.

SENIO O STERLING

ADDRESS: **17 STILL RUN**

CLAYTON

NJ 08312-0000

DEFENDANT INFORMATION

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

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 STATED THAT SHE AND THE DEFENDANT WERE IN A VERBAL ARGUMENT WHEN THE DEFENDANT STRUCK HER IN THE MOUTH CAUSING A CUT TO HER INNER LIP. OFFICERS OBSERVED THE CUT.

Affidavit of Probable Cause

Affidavit of Probable Cause

COMPLAINT NUMBER

THE STATE OF NEW JERSEY

VS.

SENIO O STERLING

0804

S

2022

000018

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

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

VICTIM STATED THAT SHE AND THE DEFENDANT WERE IN A VERBAL ARGUMENT WHEN THE DEFENDANT STRUCK HER IN THE MOUTH CAUSING A CUT TO HER INNER LIP. OFFICERS OBSERVED THE CUT. DENDANT ADMITTED TO BEING IN A VERBAL DISPUTE AND STATED THAT THE DISPUTE BECAME PHYSICAL ON BOTH BEHALVES.

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

MINOR CUT TO UPPER INSIDE LIP

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: PTLM J MAYO LAW ENFORCEMENT OFFICER

Date: 01/13/2022

Affidavit of Probable Cause

Page 6 of 7

1/1/2017

Preliminary Law Enforcement Incident Report

COMPLAINT NUMBER			
0804	S	2022	000018
COURT CODE	BREK	YEAR	SEQUENCE NO

THE STATE OF NEW JERSEY

VS.

SENIO O STERLING

ADDRESS: 17 STILL RUN

CLAYTON

NJ 08312-0000

ELK JOINT MUNICIPAL COURT
680 WHIG LANE
MONROEVILLE NJ 08343-0000
856-881-6631 COUNTY OF: GLOUCESTER

# of CHARGES 1	CO-DEFTS	POLICE CASE #: 2022-676
-------------------	----------	----------------------------

COMPLAINANT PTLM J MAYO
NAME: 125 N DELSEA DR

CLAYTON

NJ 08312

DEFENDANT INFORMATION

SEX: M EYE COLOR: BROWN

DOB:

DRIVER'S LIC.

SOCIAL SECURITY #: xxx-

SBI #:

DL STATE: NJ

TELEPHONE #: 8

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 cited in an investigation.

- The offense Involved domestic violence.
 - DVCR was checked.
- ODARA was completed and:
 - Victim concern about future assaults
 - Victim and/or Defendant have more than 1 child altogether
- 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 PRESENT
- A member of the public provided information to a 9-1-1 call center or dispatcher (or similar)
- 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: PTLM J MAYO LAW ENFORCEMENT OFFICER

Date: 01/13/2022

Preliminary Law Enforcement Incident Report

Page 7 of 7

7/20/2018

COMPLAINT - SUMMONS

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
0804	S	2022	000019	VS.	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	DUANE K GARRISON	
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				ADDRESS: LKA 1 S DELSEA DR APT B CLAYTON NJ 08312-0000	
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 2021-15990		DEFENDANT INFORMATION	
COMPLAINANT NAME: MICHAEL BIELSKI, DET. PO BOX 623 WOODBURY NJ 08096				SEX: M EYE COLOR: HAZEL DOB: [REDACTED] DRIVER'S LIC. # [REDACTED] DL STATE: [REDACTED] SOCIAL SECURITY # [REDACTED] SBI #: [REDACTED] TELEPHONE #: [REDACTED] () LIVSCAN PCN #: [REDACTED]	

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 **10/22/2021** in **CLAYTON BORO**, **GLOUCESTER County, NJ** did: WITHIN THE JURISDICTION OF THIS COURT, DID UNLAWFULLY AND KNOWINGLY OR PURPOSELY POSSESS METHAMPHETAMINE, A SCHEDULE II CONTROLLED DANGEROUS SUBSTANCE, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:35-10A(1), AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF THE SAME. SAID CRIME BEING A CRIME OF 3RD DEGREE.

WITHIN THE JURISDICTION OF THIS COURT, WITH THE PURPOSE OF PROMOTING OR FACILITATING THE COMMISSION OF THE CRIME OF POSSESSION WITH INTENT TO DISTRIBUTE OR DISTRIBUTION OF CDS IN VIOLATION OF 2C: 35-5B(9)A - SPECIFICALLY METHAMPHETAMINE, A SCHEDULE II CONTROLLED DANGEROUS SUBSTANCE, DID (1) AGREE WITH ONE ANOTHER THAT THEY OR ONE OR MORE OF THEM WOULD ENGAGE IN CONDUCT WHICH CONSTITUTES SUCH CRIME; OR (2) AGREE TO AID ANOTHER PERSON OR PERSONS IN THE PLANNING OR COMMISSION OR SUCH CRIMES OR OF AN ATTEMPT OR SOLICITATION TO COMMIT SUCH CRIMES, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:5-2/35-5B(9)A, AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF THE SAME. SAID CRIME BEING A CRIME OF 3RD DEGREE.

in violation of:

Original Charge	1) 2C:35-10A(1)	2) 2C:5-2A(1) 2C:35-5B(9)(A)	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: MICHAEL BIELSKI, DET.Date: 01/24/2022

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: GLOUCESTER

at the following address: GLOUCESTER COUNTY COURTS

JUSTICE COMPLEX

70 HUNTER STREET

WOODBURY

NJ 08096-0000

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:

Appearance Date: 01/25/2022

Time: 09:00AM

Phone: 856-878-5050

Signature of Person Issuing Summons:

MICHAEL BIELSKI, DET.

Date:

01/24/2022

☐ 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**COMPLAINT NUMBER****0804****S****2022****000019****STATE V.****DUANE K GARRISON**

COURT CODE PREFIX YEAR SEQUENCE NO.

CRIME BEING A CRIME OF 3RD DEGREE.

Original Charge

Amended Charge

COMPLAINT - SUMMONS

Page 2 of 11

NJ/CDR 1/1/2017

COMPLAINT - SUMMONS (Court Action)

COMPLAINT NUMBER			
0804	S	2022	000019
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

STATE V.

DUANE K GARRISON

FTA Bail Information		Date Bail Set:	Amount Bail Set: \$ _____ by: _____		☐ Bail Recog. Attached
Released on Bail	R.O.R.	Committed Default	Committed w/o Bail	Date Referred to County Prosecutor: _____	
Date of First Appearance: 01/25/2022				☐ 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:35-10A(1)		2) 2C:5-2A(1) 2C:35-5B(9)(A)		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:
DEDR/Lab Fee	DEDR:	LAB:	DEDR:	LAB:	DEDR: 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 Alleged
- 5 - Dismissed
- 6 - Dismissed - Prosecution
- 7 - Dismissed - Pro 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 3 of 11

COMPLAINT - SUMMONS (Court Action)

COMPLAINT NUMBER
0804 S 2022 000019

STATE V.

DUANE K GARRISON

FTA Bail Information		Date Bail Set:		Amount Bail Set: \$ _____ by: _____		☐ Bail Recog. Attached	
Released on Bail	R.O.R.	Committed Default	Committed w/o Bail	Place Committed:			Date Referred to County Prosecutor: _____
Date of First Appearance: 01/25/2022		☐ 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
Original Charge							
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: _____	Fines: _____ Costs: _____			
VCCB/SNSF	VCCB: _____ SNSF: _____	VCCB: _____ SNSF: _____	VCCB: _____ SNSF: _____	VCCB: _____ SNSF: _____			
DEDR/Lab Fee	DEDR: _____ LAB: _____	DEDR: _____ LAB: _____	DEDR: _____ LAB: _____	DEDR: _____ LAB: _____			
CD Fee/Drug Ed Fnd	CD: _____ DAEP: _____	CD: _____ DAEP: _____	CD: _____ DAEP: _____	CD: _____ DAEP: _____			
DV Surch/Other Fees	DV: _____ Other: _____	DV: _____ Other: _____	DV: _____ Other: _____	DV: _____ Other: _____			
Restitution Beneficiary: _____							

Miscellaneous Information, Adjournments, Companion Complaints, Co-Defendants, Case Notes:

*Finding Codes

- 1 - Guilty
- 2 - Not Guilty
- 3 - Dismissed - Other
- 4 - Guilty but Alleged
- 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

Related Traffic Tickets and Complaints:

COMPLAINT - SUMMONS (Court Action)

JUDGE'S SIGNATURE _____

DATE _____

Page 4 of 11

01/24/2022

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
0804	S	2022	000019	VS.	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	DUANE K GARRISON	
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				ADDRESS: LKA 1 S DELSEA DR APT B CLAYTON NJ 08312-0000	
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 2021-15990		DEFENDANT INFORMATION	
COMPLAINANT NAME: MICHAEL BIELSKI, DET.				SEX: M EYE COLOR: HAZEL DOB: [REDACTED] DRIVER'S LIC. #. SOCIAL SECURITY #: [REDACTED] SBI #: [REDACTED] TELEPHONE #: () LIVESCAN PCN #:	
				DL STATE:	

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 **10/22/2021** in **CLAYTON BORO**, **GLOUCESTER County, NJ** did: WITHIN THE JURISDICTION OF THIS COURT, DID UNLAWFULLY AND KNOWINGLY OR PURPOSELY POSSESS METHAMPHETAMINE, A SCHEDULE II CONTROLLED DANGEROUS SUBSTANCE, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:35-10A(1), AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF THE SAME. SAID CRIME BEING A CRIME OF 3RD DEGREE.

WITHIN THE JURISDICTION OF THIS COURT, WITH THE PURPOSE OF PROMOTING OR FACILITATING THE COMMISSION OF THE CRIME OF POSSESSION WITH INTENT TO DISTRIBUTE OR DISTRIBUTION OF CDS IN VIOLATION OF 2C: 35-5B(9)A - SPECIFICALLY METHAMPHETAMINE, A SCHEDULE II CONTROLLED DANGEROUS SUBSTANCE, DID (1) AGREE WITH ONE ANOTHER THAT THEY OR ONE OR MORE OF THEM WOULD ENGAGE IN CONDUCT WHICH CONSTITUTES SUCH CRIME; OR (2) AGREE TO AID ANOTHER PERSON OR PERSONS IN THE PLANNING OR COMMISSION OR SUCH CRIMES OR OF AN ATTEMPT OR SOLICITATION TO COMMIT SUCH CRIMES, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:5-2/35-5B(9)A, AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF THE SAME. SAID

in violation of:

Original Charge	1) 2C:35-10A(1)	2) 2C:5-2A(1) 2C:35-5B(9)(A)	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: **MICHAEL BIELSKI, DET.**

Date: **01/24/2022**

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: **GLOUCESTER** at the following address: **GLOUCESTER COUNTY COURTS**

JUSTICE COMPLEX **70 HUNTER STREET** **WOODBURY** **NJ 08096-0000**

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: Appearance Date: **01/25/2022** Time: **09:00AM** Phone: **856-878-5050**

Signature of Person Issuing Summons: **MICHAEL BIELSKI, DET.**

Date: **01/24/2022**

☐ **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):**

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

COMPLAINT - SUMMONS (DEFENDANT'S COPY)**0804****S****2022****000019****STATE V.****DUANE K GARRISON**

CRIME BEING A CRIME OF 3RD DEGREE.

Original Charge

Amended Charge

COMPLAINT - SUMMONS (DEFENDANT'S COPY)**Page 6 of 11****NOTED 1/17/2017**

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER				THE STATE OF NEW JERSEY VS. DUANE K GARRISON	
0804	S	2022	000019		
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	ADDRESS: LKA 1 S DELSEA DR APT B CLAYTON NJ 08312-0000	
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER					
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 2021-15990		DEFENDANT INFORMATION SEX: M EYE COLOR: HAZEL DOB: [REDACTED] DRIVER'S LIC. #: [REDACTED] DL STATE: SOCIAL SECURITY #: [REDACTED] SBI #: TELEPHONE #: [REDACTED] LIVESCAN PCN #:	
COMPLAINANT NAME: MICHAEL BIELSKI, DET.					
PO BOX 623					
WOODBURY NJ 08096					

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 **10/22/2021** in **CLAYTON BORO**, **GLOUCESTER County, NJ** did: WITHIN THE JURISDICTION OF THIS COURT, DID UNLAWFULLY AND KNOWINGLY OR PURPOSELY POSSESS METHAMPHETAMINE, A SCHEDULE II CONTROLLED DANGEROUS SUBSTANCE, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:35-10A(1), AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF THE SAME. SAID CRIME BEING A CRIME OF 3RD DEGREE.

WITHIN THE JURISDICTION OF THIS COURT, WITH THE PURPOSE OF PROMOTING OR FACILITATING THE COMMISSION OF THE CRIME OF POSSESSION WITH INTENT TO DISTRIBUTE OR DISTRIBUTION OF CDS IN VIOLATION OF 2C: 35-5B(9)A - SPECIFICALLY METHAMPHETAMINE, A SCHEDULE II CONTROLLED DANGEROUS SUBSTANCE, DID (1) AGREE WITH ONE ANOTHER THAT THEY OR ONE OR MORE OF THEM WOULD ENGAGE IN CONDUCT WHICH CONSTITUTES SUCH CRIME; OR (2) AGREE TO AID ANOTHER PERSON OR PERSONS IN THE PLANNING OR COMMISSION OR SUCH CRIMES OR OF AN ATTEMPT OR SOLICITATION TO COMMIT SUCH CRIMES, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:5-2/35-5B(9)A, AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF THE SAME. SAID in violation of:

Original Charge	1) 2C:35-10A(1)	2) 2C:5-2A(1) 2C:35-5B(9)(A)	3) 2C:35-5B(9)(A)
-----------------	------------------------	---	--------------------------

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: DIRECT PRESENTMENT
	I certify that I was unable to serve the complaint-summons.

Signed: **MICHAEL BIELSKI, DET. GLOUCESTER CO PROSECUTORS OFF**
Name, Title and Department of Officer

Date of Action: **01/24/2022**

RETURN OF SERVICE INFORMATION

RETURN OF SERVICE INFORMATION**COMPLAINT NUMBER****0804****S****2022****000019****STATE V.****DUANE K GARRISON**

COURT CODE PREFIX YEAR SEQUENCE NO.

CRIME BEING A CRIME OF 3RD DEGREE.

Original Charge

Amended Charge

RETURN OF SERVICE INFORMATION**Page 8 of 11**

NJ/CDR1 1/1/2017

Affidavit of Probable Cause

COMPLAINT NUMBER			
0804	S	2022	000019
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

ELK JOINT MUNICIPAL COURT
680 WHIG LANE
MONROEVILLE NJ 08343-0000
856-881-6631 COUNTY OF: **GLOUCESTER**

of CHARGES **2** CO-DEFTS POLICE CASE #:
2021-15990

COMPLAINANT **MICHAEL BIELSKI, DET.**
NAME: **PO BOX 623**
WOODBURY NJ 08096

THE STATE OF NEW JERSEY**VS.****DUANE K GARRISON**

ADDRESS:

LKA 1 S DELSEA DR
APT B
CLAYTON NJ 08312-0000

DEFENDANT INFORMATION

SEX: **M** EYE COLOR: **HAZEL**

DOB: [REDACTED]

DRIVER'S LIC. #:

D.L. STATE:

SOCIAL SECURITY # [REDACTED]

SBI #:

TELEPHONE #:

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:

Direct presentment

Affidavit of Probable Cause**Page 9 of 11**

1/1/2017

Affidavit of Probable Cause**COMPLAINT NUMBER****0804****S****2022****000019**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

THE STATE OF NEW JERSEY**VS.****DUANE K GARRISON**

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

Direct presentment

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

Direct presentment

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: MICHAEL BIELSKI, DET. LAW ENFORCEMENT OFFICERDate: 01/24/2022**Affidavit of Probable Cause****Page 10 of 11**

1/1/2017

Preliminary Law Enforcement Incident Report

COMPLAINT NUMBER				<i>THE STATE OF NEW JERSEY</i>	
0804	S	2022	000019	<i>VS.</i>	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	DUANE K GARRISON	
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				ADDRESS: LKA 1 S DELSEA DR APT B CLAYTON NJ 08312-0000	
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 2021-15990		DEFENDANT INFORMATION	
COMPLAINANT NAME: MICHAEL BIELSKI, DET. PO BOX 623 WOODBURY NJ 08096				SEX: M EYE COLOR: HAZEL DOB: [REDACTED] DRIVER'S LIC. # [REDACTED] DL STATE: [REDACTED] SOCIAL SECURITY # [REDACTED] SBI #: [REDACTED] TELEPHONE #: [REDACTED] LIVESCAN PCN #: [REDACTED]	

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.

-Additional information relevant to the offense(s) charged: Direct presentment

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: MICHAEL BIELSKI, DET. LAW ENFORCEMENT OFFICER Date: 01/24/2022

Preliminary Law Enforcement Incident Report

Page 11 of 11

7/20/2018

COMPLAINT - SUMMONS

COMPLAINT NUMBER			
0804	S	2022	000020
COURT CODE	PREFIX	YEAR	SEQUENCE NO.
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER			
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 2021-15990	
COMPLAINANT NAME: MICHAEL PO BOX 623		BIELSKI, DET. WOODBURY NJ 08096	
		ADDRESS: 1 SOUTH DELSEA DRIVE APT B CLAYTON NJ 08312-0000	
DEFENDANT INFORMATION SEX: M EYE COLOR: BROWN DOB: [REDACTED] DRIVER'S LIC. #: [REDACTED] DL STATE: [REDACTED] SOCIAL SECURITY #: [REDACTED] SBI #: [REDACTED] TELEPHONE #: [REDACTED] LIVESCAN PCN #: [REDACTED]			

*THE STATE OF NEW JERSEY**VS.***MICHAEL D WINDHURST**

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 **10/22/2021** in **CLAYTON BORO, GLOUCESTER County, NJ** did: WITHIN THE JURISDICTION OF THIS COURT, DID UNLAWFULLY AND KNOWINGLY OR PURPOSELY POSSESS METHAMPHETAMINE, A SCHEDULE II CONTROLLED DANGEROUS SUBSTANCE, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:35-10A(1), AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF THE SAME. SAID CRIME BEING A CRIME OF 3RD DEGREE.

WITHIN THE JURISDICTION OF THIS COURT, WITH THE PURPOSE OF PROMOTING OR FACILITATING THE COMMISSION OF THE CRIME OF POSSESSION WITH INTENT TO DISTRIBUTE OR DISTRIBUTION OF CDS IN VIOLATION OF 2C: 35-5B(9)A - SPECIFICALLY METHAMPHETAMINE, A SCHEDULE II CONTROLLED DANGEROUS SUBSTANCE, DID (1) AGREE WITH ONE ANOTHER THAT THEY OR ONE OR MORE OF THEM WOULD ENGAGE IN CONDUCT WHICH CONSTITUTES SUCH CRIME; OR (2) AGREE TO AID ANOTHER PERSON OR PERSONS IN THE PLANNING OR COMMISSION OR SUCH CRIMES OR OF AN ATTEMPT OR SOLICITATION TO COMMIT SUCH CRIMES, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:5-2/35-5B(9)A, AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF THE SAME. SAID

in violation of:

Original Charge	1) 2C:35-10A(1)	2) 2C:5-2A(1) 2C:35-5B(9)(A)	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: **MICHAEL BIELSKI, DET.** Date: **01/24/2022**

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: **GLOUCESTER**

at the following address: **GLOUCESTER COUNTY COURTS**

JUSTICE COMPLEX 70 HUNTER STREET WOODBURY NJ 08096-0000

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: Appearance Date: **01/25/2022** Time: **09:00AM** Phone: **856-878-5050**

Signature of Person Issuing Summons: **MICHAEL BIELSKI, DET.** Date: **01/24/2022**

☐ **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**COMPLAINT NUMBER****0804****S****2022****000020****STATE V.****MICHAEL D WINDHURST**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

CRIME BEING A CRIME OF 3RD DEGREE.

Original Charge

Amended Charge

COMPLAINT - SUMMONS**Page 2 of 11**

NJ/CDR1-1/1/2017

COMPLAINT - SUMMONS (Court Action)

COMPLAINT NUMBER

0804**S****2022****000020**

STATE V.

SUMMONS**MICHAEL D WINDHURST****FTA Bail Information**

Date Bail Set:

Amount Bail Set: \$

by:

☐ Bail Received AttachedReleased
on Bail

R.O.R.

Committed
DefaultCommitted
w/o Bail

Place Committed:

Date Referred to
County Prosecutor:Date of First
Appearance:**01/25/2022**☐ 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:35-10A(1)**2) **2C:5-2A(1)****2C:35-5B(9)(A)**

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:

DEDR/Lab Fee

DEDR:

LAB:

DEDR:

LAB:

DEDR:

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:
DIRECT PRESENTMENT**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 3 of 11

NA/CDR-1/1/2017

COMPLAINT - SUMMONS (Court Action)

COMPLAINT NUMBER
0804 | **S** | **2022** | **000020**
COURT CODE PREFIX YEAR MONTH DAY SEQUENCE NUMBER

STATE V.**MICHAEL D WINDHURST**

FTA Bail Information		Date Bail Set: _____		Amount Bail Set: \$ _____ by: _____		☐ Bail Recog. Attached		
Released on Bail	R.O.R.	Committed Default	Committed w/o Bail	Place Committed: _____				Date Referred to County Prosecutor: _____
Date of First Appearance: 01/25/2022		☐ 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
Original Charge								
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: _____			
DEDR/Lab Fee		DEDR: _____ LAB: _____	DEDR: _____ LAB: _____		DEDR: _____ 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:
DIRECT PRESENTMENT

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 - ID

JUDGE'S SIGNATURE _____

DATE _____

Page 4 of 11

COMPLAINT - SUMMONS (Court Action)

NJ/CbR1/1/2017

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
0804	S	2022	000020	VS.	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	MICHAEL D WINDHURST	
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				ADDRESS: 1 SOUTH DELSEA DRIVE APT B CLAYTON NJ 08312-0000	
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 2021-15990		DEFENDANT INFORMATION	
COMPLAINANT NAME: MICHAEL BIELSKI, DET.				SEX: M EYE COLOR: BROWN DOB: [REDACTED] DRIVER'S LIC. #: SOCIAL SECURITY #: [REDACTED] SBI #: TELEPHONE #: [REDACTED] (C) LIVESCAN PCN #:	
DL STATE:					

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 **10/22/2021** in **CLAYTON BORO**, **GLOUCESTER County, NJ** did: WITHIN THE JURISDICTION OF THIS COURT, DID UNLAWFULLY AND KNOWINGLY OR PURPOSELY POSSESS METHAMPHETAMINE, A SCHEDULE II CONTROLLED DANGEROUS SUBSTANCE, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:35-10A(1), AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF THE SAME. SAID CRIME BEING A CRIME OF 3RD DEGREE.

WITHIN THE JURISDICTION OF THIS COURT, WITH THE PURPOSE OF PROMOTING OR FACILITATING THE COMMISSION OF THE CRIME OF POSSESSION WITH INTENT TO DISTRIBUTE OR DISTRIBUTION OF CDS IN VIOLATION OF 2C: 35-5B(9)A - SPECIFICALLY METHAMPHETAMINE, A SCHEDULE II CONTROLLED DANGEROUS SUBSTANCE, DID (1) AGREE WITH ONE ANOTHER THAT THEY OR ONE OR MORE OF THEM WOULD ENGAGE IN CONDUCT WHICH CONSTITUTES SUCH CRIME; OR (2) AGREE TO AID ANOTHER PERSON OR PERSONS IN THE PLANNING OR COMMISSION OR SUCH CRIMES OR OF AN ATTEMPT OR SOLICITATION TO COMMIT SUCH CRIMES, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:5-2/35-5B(9)A, AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF THE SAME. SAID

in violation of:

Original Charge	1) 2C:35-10A(1)	2) 2C:5-2A(1) 2C:35-5B(9)(A)	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: MICHAEL BIELSKI, DET. Date: 01/24/2022

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: GLOUCESTER at the following address: GLOUCESTER COUNTY COURTS JUSTICE COMPLEX 70 HUNTER STREET WOODBURY NJ 08096-0000

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: Appearance Date: 01/25/2022 Time: 09:00AM Phone: 856-873-1000

Signature of Person Issuing Summons: MICHAEL BIELSKI, DET. Date: 01/24/2022

☐ 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):

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

COMPLAINT NUMBER			
0804	S	2022	000020
COURT CODE	PREF	YEAR	SEQUENCE NUMBER

STATE V.

MICHAEL D WINDHURST

CRIME BEING A CRIME OF 3RD DEGREE.

Original Charge			
Amended Charge			

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

Page 6 of 11

IN OPS 1/1/2017

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
0804	S	2022	000020	VS.	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	MICHAEL D WINDHURST	
ELK JOINT MUNICIPAL COURT				ADDRESS:	
680 WHIG LANE				1 SOUTH DELSEA DRIVE	
MONROEVILLE NJ 08343-0000				APT B	
856-881-6631 COUNTY OF: GLOUCESTER				CLAYTON NJ 08312-0000	
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 2021-15990		DEFENDANT INFORMATION	
COMPLAINANT MICHAEL		BIELSKI, DET.		SEX: M EYE COLOR: BROWN	DOB: [REDACTED]
NAME: PO BOX 623				DRIVER'S LIC. #.	DL STATE:
WOODBURY		NJ 08096		SOCIAL SECURITY # [REDACTED]	SBI #:
				TELEPHONE # [REDACTED]	
				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 **10/22/2021** in **CLAYTON BORO**, **GLOUCESTER County, NJ** did: WITHIN THE JURISDICTION OF THIS COURT, DID UNLAWFULLY AND KNOWINGLY OR PURPOSELY POSSESS METHAMPHETAMINE, A SCHEDULE II CONTROLLED DANGEROUS SUBSTANCE, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:35-10A(1), AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF THE SAME. SAID CRIME BEING A CRIME OF 3RD DEGREE.

WITHIN THE JURISDICTION OF THIS COURT, WITH THE PURPOSE OF PROMOTING OR FACILITATING THE COMMISSION OF THE CRIME OF POSSESSION WITH INTENT TO DISTRIBUTE OR DISTRIBUTION OF CDS IN VIOLATION OF 2C: 35-5B(9)A - SPECIFICALLY METHAMPHETAMINE, A SCHEDULE II CONTROLLED DANGEROUS SUBSTANCE, DID (1) AGREE WITH ONE ANOTHER THAT THEY OR ONE OR MORE OF THEM WOULD ENGAGE IN CONDUCT WHICH CONSTITUTES SUCH CRIME; OR (2) AGREE TO AID ANOTHER PERSON OR PERSONS IN THE PLANNING OR COMMISSION OR SUCH CRIMES OR OF AN ATTEMPT OR SOLICITATION TO COMMIT SUCH CRIMES, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:5-2/35-5B(9)A, AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF THE SAME. SAID in violation of:

Original Charge	1) 2C:35-10A(1)	2) 2C:5-2A(1) 2C:35-5B(9)(A)	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	
	I certify that I mailed a copy of the complaint-summons by ordinary mail to the defendant at his or her 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.	
✓	Other manner of service: I certify that I served the complaint-summons in the following manner: DIRECT PRESENTMENT	
	I certify that I was unable to serve the complaint-summons.	

Signed: **MICHAEL BIELSKI, DET. GLOUCESTER CO PROSECUTORS OFF** Date of Action: **01/24/2022**
Name, Title and Department of Officer

RETURN OF SERVICE INFORMATION

RETURN OF SERVICE INFORMATION**COMPLAINT NUMBER****0804****S****2022****000020**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

STATE V.

MICHAEL D WINDHURST

CRIME BEING A CRIME OF 3RD DEGREE.

Original Charge

Amended Charge

RETURN OF SERVICE INFORMATION

Page 8 of 11

NJ/CDR 1/1/2017

Affidavit of Probable Cause

COMPLAINT NUMBER			
0804	S	2022	000020
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

ELK JOINT MUNICIPAL COURT
680 WHIG LANE
MONROEVILLE NJ 08343-0000
856-881-6631 COUNTY OF: **GLOUCESTER**

of CHARGES **2** CO-DEFTS POLICE CASE #:
2021-15990

COMPLAINANT **MICHAEL** **BIELSKI, DET.**
NAME: **PO BOX 623**
WOODBURY NJ 08096

THE STATE OF NEW JERSEY**VS.****MICHAEL D WINDHURST**

ADDRESS:

1 SOUTH DELSEA DRIVE**APT B****CLAYTON****NJ 08312-0000**

DEFENDANT INFORMATION

SEX: **M** EYE COLOR: **BROWN**

DOB: [REDACTED]

DRIVER'S LIC. #:

DL STATE:

SOCIAL SECURITY #:

SBI #:

TELEPHONE #:

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:

Direct presentment

Affidavit of Probable Cause

Page 9 of 11

1/1/2017

Affidavit of Probable Cause**COMPLAINT NUMBER****THE STATE OF NEW JERSEY****VS.****MICHAEL D WINDHURST****0804****S****2022****000020**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

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

Direct presentment

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

Direct presentment

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: MICHAEL BIELSKI, DET. LAW ENFORCEMENT OFFICERDate: 01/24/2022**Affidavit of Probable Cause****Page 10 of 11**

1/1/2017

Preliminary Law Enforcement Incident Report

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
0804	S	2022	000020	VS.	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	MICHAEL D WINDHURST	
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				ADDRESS: 1 SOUTH DELSEA DRIVE APT B CLAYTON NJ 08312-0000	
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 2021-15990		DEFENDANT INFORMATION SEX: M EYE COLOR: BROWN DOB: [REDACTED] DRIVER'S LIC. #. [REDACTED] DL STATE: SOCIAL SECURITY #. [REDACTED] SBI #: [REDACTED] TELEPHONE #: [REDACTED] LIVESCAN PCN #: [REDACTED]	
COMPLAINANT NAME: MICHAEL BIELSKI, DET. PO BOX 623 WOODBURY NJ 08096					

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.

-Additional information relevant to the offense(s) charged: Direct presentment

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: **MICHAEL BIELSKI, DET. LAW ENFORCEMENT OFFICER** Date: **01/24/2022**

Preliminary Law Enforcement Incident Report

Page 11 of 11

7/20/2018

COMPLAINT - SUMMONS

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
0804	S	2022	000021	VS.	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	GABRIELLE M GEHOUSKEY	
ELK JOINT MUNICIPAL COURT				ADDRESS:	
680 WHIG LANE				LKA 1 S DELSEA DR	
MONROEVILLE NJ 08343-0000				APT B	
856-881-6631 COUNTY OF: GLOUCESTER				CLAYTON NJ 08312-0000	
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 2021-15990		DEFENDANT INFORMATION	
COMPLAINANT NAME: MICHAEL BIELSKI, DET.		SEX: F EYE COLOR: BROWN DOB: [REDACTED]		DL STATE:	
PO BOX 623		DRIVER'S LIC. #:		SBI #:	
WOODBURY NJ 08096		SOCIAL SECURITY: [REDACTED]		(c)	
		TELEPHONE #:		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 **10/22/2021** in **CLAYTON BORO**, **GLOUCESTER** County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, DID UNLAWFULLY AND KNOWINGLY OR PURPOSELY POSSESS METHAMPHETAMINE, A SCHEDULE II CONTROLLED DANGEROUS SUBSTANCE, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:35-10A(1), AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF THE SAME. SAID CRIME BEING A CRIME OF 3RD DEGREE.

WITHIN THE JURISDICTION OF THIS COURT, WITH THE PURPOSE OF PROMOTING OR FACILITATING THE COMMISSION OF THE CRIME OF POSSESSION WITH INTENT TO DISTRIBUTE OR DISTRIBUTION OF CDS IN VIOLATION OF 2C: 35-5B(9)A - SPECIFICALLY METHAMPHETAMINE, A SCHEDULE II CONTROLLED DANGEROUS SUBSTANCE, DID (1) AGREE WITH ONE ANOTHER THAT THEY OR ONE OR MORE OF THEM WOULD ENGAGE IN CONDUCT WHICH CONSTITUTES SUCH CRIME; OR (2) AGREE TO AID ANOTHER PERSON OR PERSONS IN THE PLANNING OR COMMISSION OR SUCH CRIMES OR OF AN ATTEMPT OR SOLICITATION TO COMMIT SUCH CRIMES, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:5-2/35-5B(9)A, AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF THE SAME. SAID

in violation of:

Original Charge	1) 2C:35-10A(1)	2) 2C:5-2A(1) 2C:35-5B(9)(A)	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: **MICHAEL BIELSKI, DET.** Date: **01/24/2022**

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: **GLOUCESTER** at the following address: **GLOUCESTER COUNTY COURTS**

JUSTICE COMPLEX 70 HUNTER STREET WOODBURY NJ 08095-0000

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: Appearance Date: **01/25/2022** Time: **09:00AM** Phone: **856-871-1100**

Signature of Person Issuing Summons: **MICHAEL BIELSKI, DET.** Date: **01/24/2022**

☐ 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**COMPLAINT NUMBER****0804****S****2022****000021****STATE V.****GABRIELLE M GEHOUSKEY**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

CRIME BEING A CRIME OF 3RD DEGREE.

8-5050

359

8-5050

Original Charge

Amended Charge

COMPLAINT - SUMMONS

Page 2 of 11

NJ/CDR1 1/1/2017

COMPLAINT - SUMMONS (Court Action)

COMPLAINT NUMBER				STATE V.	
0804	S	2022	000021	GABRIELLE M GEHOUSKEY	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.		

FTA Bail Information		Date Bail Set:	Amount Bail Set: \$	by:	☐ Bail Recog. Attached
Released on Bail	R.O.R.	Committed Default	Committed w/o Bail	Date Referred to County Prosecutor:	
Place Committed:					

Date of First Appearance: 01/25/2022	☐ Advised of Rights by	Defendant Has 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:35-10A(1)		2) 2C:5-2A(1) 2C:35-5B(9)(A)		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
Probation Term			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:
DEDR/Lab Fee	DEDR:	LAB:	DEDR:	LAB:	DEDR: 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: DIRECT PRESENTMENT	* 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
Related Traffic Tickets and Complaints:	

JUDGE'S SIGNATURE	DATE	ORIGINAL - Court Action
		Page 3 of 11

COMPLAINT - SUMMONS (Court Action)

COMPLAINT NUMBER			
0804	S	2022	000021
COURT CODE	PREFIX	YEAR	SEQUENCE NUMBER

STATE V.

GABRIELLE M GEHOUSKEY

FTA Bail Information		Date Bail Set: _____		Amount Bail Set: \$ _____ by: _____		☐ Bail Recog. Attached	
Released on Bail	R.O.R.	Committed Default	Committed w/o Bail	Place Committed:			Date Referred to County Probation
Date of First Appearance: 01/25/2022		☐ 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
Original Charge							
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: _____		
DEDR/Lab Fee		DEDR: _____ LAB: _____	DEDR: _____ LAB: _____		DEDR: _____ LAB: _____		
CD Fee/Drug Ed Fnd		CD: _____ DAFF: _____	CD: _____ DAFF: _____		CD: _____ DAFF: _____		
DV Surch/Other Fees		DV: _____ Other: _____	DV: _____ Other: _____		DV: _____ Other: _____		
Restitution							
Beneficiary: _____							

Miscellaneous Information, Adjournments, Companion Complaints, Co-Defendants, Case Notes:
DIRECT PRESENTMENT

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 - Probs 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

JUDGE'S SIGNATURE _____

DATE _____

COMPLAINT - SUMMONS (Court Action)

Page 4 of 11 NJ CDR 1/1/2017

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
0804	S	2022	000021	VS.	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	GABRIELLE M GEHOUSKEY	
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				ADDRESS: LKA 1 S DELSEA DR APT B CLAYTON NJ 08312-0000	
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 2021-15990		DEFENDANT INFORMATION SEX: F EYE COLOR: BROWN DOB: [REDACTED] DRIVER'S LIC. #. [REDACTED] DL STATE: SOCIAL SECURITY [REDACTED] SBI #: [REDACTED] TELEPHONE #: [REDACTED] (C) LIVESCAN PCN #:	
COMPLAINANT NAME: MICHAEL BIELSKI, DET.					

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 **10/22/2021** in **CLAYTON BORO**, **GLOUCESTER County, NJ** did: WITHIN THE JURISDICTION OF THIS COURT, DID UNLAWFULLY AND KNOWINGLY OR PURPOSELY POSSESS METHAMPHETAMINE, A SCHEDULE II CONTROLLED DANGEROUS SUBSTANCE, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:35-10A(1), AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF THE SAME. SAID CRIME BEING A CRIME OF 3RD DEGREE.

WITHIN THE JURISDICTION OF THIS COURT, WITH THE PURPOSE OF PROMOTING OR FACILITATING THE COMMISSION OF THE CRIME OF POSSESSION WITH INTENT TO DISTRIBUTE OR DISTRIBUTION OF CDS IN VIOLATION OF 2C: 35-5B(9)A - SPECIFICALLY METHAMPHETAMINE, A SCHEDULE II CONTROLLED DANGEROUS SUBSTANCE, DID (1) AGREE WITH ONE ANOTHER THAT THEY OR ONE OR MORE OF THEM WOULD ENGAGE IN CONDUCT WHICH CONSTITUTES SUCH CRIME; OR (2) AGREE TO AID ANOTHER PERSON OR PERSONS IN THE PLANNING OR COMMISSION OR SUCH CRIMES OR OF AN ATTEMPT OR SOLICITATION TO COMMIT SUCH CRIMES, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:5-2/35-5B(9)A, AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF THE SAME. SAID

in violation of:

Original Charge	1) 2C:35-10A(1)	2) 2C:5-2A(1) 2C:35-5B(9)(A)	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: **MICHAEL BIELSKI, DET.**

Date: **01/24/2022**

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: **GLOUCESTER** at the following address: **GLOUCESTER COUNTY COURTS**

JUSTICE COMPLEX **70 HUNTER STREET** **WOODBURY** **NJ 08096-0000**

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: Appearance Date: **01/25/2022** Time: **09:00AM** Phone: **856-878-5050**

Signature of Person Issuing Summons: **MICHAEL BIELSKI, DET.**

Date: **01/24/2022**

☐ 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):

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

COMPLAINT - SUMMONS (DEFENDANT'S COPY)**0804**

COURT CODE

COMPLAINT NUMBER

S

PREFIX

2022

YEAR

000021

SEQUENCE NUMBER

STATE V.**GABRIELLE M GEHOUSKEY**

CRIME BEING A CRIME OF 3RD DEGREE.

Original Charge

Amended Charge

COMPLAINT - SUMMONS (DEFENDANT'S COPY)**Page 6 of 11**

NY CDR 1/1/2017

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER				THE STATE OF NEW JERSEY VS. GABRIELLE M GEHOUSKEY	
0804	S	2022	000021		
COURT CODE	PREFIX	YEAR	SEQUENCE NO.		
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				ADDRESS: LKA 1 S DELSEA DR APT B CLAYTON NJ 08312-0000	
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 2021-15990		DEFENDANT INFORMATION	
COMPLAINANT MICHAEL BIELSKI, DET.		SEX: F EYE COLOR: BROWN DOB: [REDACTED]		DRIVER'S LIC. #.	
NAME: PO BOX 623		SOCIAL SECURITY #: [REDACTED] SBI #: [REDACTED]		DL STATE: [REDACTED]	
WOODBURY NJ 08096		TELEPHONE #: [REDACTED]		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 **10/22/2021** in **CLAYTON BORO**, **GLOUCESTER County, NJ** did: WITHIN THE JURISDICTION OF THIS COURT, DID UNLAWFULLY AND KNOWINGLY OR PURPOSELY POSSESS METHAMPHETAMINE, A SCHEDULE II CONTROLLED DANGEROUS SUBSTANCE, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:35-10A(1), AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF THE SAME. SAID CRIME BEING A CRIME OF 3RD DEGREE.

WITHIN THE JURISDICTION OF THIS COURT, WITH THE PURPOSE OF PROMOTING OR FACILITATING THE COMMISSION OF THE CRIME OF POSSESSION WITH INTENT TO DISTRIBUTE OR DISTRIBUTION OF CDS IN VIOLATION OF 2C: 35-5B(9)A - SPECIFICALLY METHAMPHETAMINE, A SCHEDULE II CONTROLLED DANGEROUS SUBSTANCE, DID (1) AGREE WITH ONE ANOTHER THAT THEY OR ONE OR MORE OF THEM WOULD ENGAGE IN/CONDUCT WHICH CONSTITUTES SUCH CRIME; OR (2) AGREE TO AID ANOTHER PERSON OR PERSONS IN THE PLANNING OR COMMISSION OR SUCH CRIMES OR OF AN ATTEMPT OR SOLICITATION TO COMMIT SUCH CRIMES, CONTRARY TO THE PROVISIONS OF N.J.S.A. 2C:5-2/35-5B(9)A, AND AGAINST THE PEACE OF THIS STATE, THE GOVERNMENT AND DIGNITY OF THE SAME. SAID CRIME BEING A CRIME OF 3RD DEGREE.

in violation of:

Original Charge	1) 2C:35-10A(1)	2) 2C:5-2A(1) 2C:35-5B(9)(A)	3) [REDACTED]
-----------------	------------------------	---	---------------

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: DIRECT PRESENTMENT
	I certify that I was unable to serve the complaint-summons.

Signed: **MICHAEL BIELSKI, DET. GLOUCESTER CO PROSECUTORS OFF**
Name, Title and Department of Officer

Date of Action: **01/24/2022**

RETURN OF SERVICE INFORMATION

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER			
0804	S	2022	000021
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

STATE V.

GABRIELLE M GEHOUSKEY

CRIME BEING A CRIME OF 3RD DEGREE.

Original Charge

Amended Charge

RETURN OF SERVICE INFORMATION

Page 8 of 11

NJ/CDR 1/1/2017

Affidavit of Probable Cause

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
0804	S	2022	000021	VS.	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	GABRIELLE M GEHOUSKEY	
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				ADDRESS: LKA 1 S DELSEA DR APT B CLAYTON NJ 08312-0000	
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 2021-15990		DEFENDANT INFORMATION	
COMPLAINANT MICHAEL BIELSKI, DET. NAME: PO BOX 623 WOODBURY NJ 08096				SEX: F EYE COLOR: BROWN DOB: [REDACTED] DRIVER'S LIC. #. [REDACTED] DL STATE: SOCIAL SECURITY # [REDACTED] SBI #: [REDACTED] TELEPHONE #: [REDACTED] LIVESCAN PCN #: [REDACTED]	

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:
Direct presentment

Affidavit of Probable Cause

Page 9 of 11

1/1/2017

Affidavit of Probable Cause**COMPLAINT NUMBER****0804****S****2022****000021****THE STATE OF NEW JERSEY****VS.****GABRIELLE M GEHOUSKEY**

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

Direct presentment

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

Direct presentment

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: MICHAEL BIELSKI, DET. LAW ENFORCEMENT OFFICERDate: 01/24/2022**Affidavit of Probable Cause****Page 10 of 11**

1/1/2017

Preliminary Law Enforcement Incident Report

COMPLAINT NUMBER				THE STATE OF NEW JERSEY VS. GABRIELLE M GEHOUSKEY	
0804	S	2022	000021		
COURT CODE	PREFIX	YEAR	SEQUENCE NO.		
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				ADDRESS: LKA 1 S DELSEA DR APT B CLAYTON NJ 08312-0000	
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 2021-15990		DEFENDANT INFORMATION	
COMPLAINANT MICHAEL		BIELSKI, DET.		SEX: F EYE COLOR: BROWN	DOB: [REDACTED]
NAME: PO BOX 623				DRIVER'S LIC. #:	DL STATE:
WOODBURY NJ 08096				SOCIAL SECURITY #:	SBI #:
				TELEPHONE #:	
				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.

-Additional information relevant to the offense(s) charged: Direct presentment

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: **MICHAEL BIELSKI, DET. LAW ENFORCEMENT OFFICER**

Date: **01/24/2022**

Preliminary Law Enforcement Incident Report

Page 11 of 11

7/20/2018

COMPLAINT - SUMMONS

COMPLAINT NUMBER			
0804	S	2022	000025
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

ELK JOINT MUNICIPAL COURT
680 WHIG LANE
MONROEVILLE NJ 08343-0000
856-881-6631 COUNTY OF: GLOUCESTER

# of CHARGES 1	CO-DEFTS	POLICE CASE #:
COMPLAINANT NAME: PRIVATE CITIZEN 667 WHIG LANE RD ATTN WARRANTS MONROEVILLE NJ 08343		

THE STATE OF NEW JERSEY
VS.
LAUREN WICKERSHAM
ADDRESS: 118 W. CLAYTON AVE
CLAYTON NJ 08312-0000

DEFENDANT INFORMATION		DOB: [REDACTED]	DL STATE:
SEX: EYE COLOR:	DRIVER'S LIC. #:	SBI #:	
SOCIAL SECURITY #:	TELEPHONE #:	()	
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 01/24/2022 in CLAYTON BORO, GLOUCESTER County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, SINCE OCTOBER MY FRIEND ERIK SMITH, HAS LET ME HOUSE MY LATE MOTHER'S CATS IN A SPARE ROOM AT HIS HOUSE. ON THE NIGHT OF 1/24/2022 AROUND 8PM AFTER WORKING, I STOPPED AT HERITAGES TO GRAB WET CAT FOOD BEFORE HEADING OVER TO ERIK'S HOUSE LIKE I DO DAILY. I WALKED INTO ERIK'S HOUSE AND SAW A VISIBLY DRUNK LAUREN. I WALKED OVER STAIR GATES TO FEED CATS, I GASPED AND SAID "OH MY GOD" BECAUSE HER NEGLECTED KITTENS WERE ON THE STAIRCASE (LEFT DOOR OPEN DUE TO INTOXICATION) LAUREN THEN STARTED TO YELL AT ME FROM LIVING ROOM CALLING ERIK (NOT PRESENT) NAMES. I STARTED TO RECORD HER AND SHE THEN PUSHED ME HARD AGAINST THE WALL. I PUSHED BACK WE FOUGHT ON FLOOR. SHE WAS BITING SO HARD I BEGGED HER TO LET GO SEVERAL TIMES I THEN HIT HER IN THE HEAD WITH MY PHONE TO GET OFF OF ME. I CALLED BOYFRIEND AND COPS & EXITED HOUSE. WHILE GETTING IN AMBULANCE IN FRONT OF POLICE & EMT, LAUREN SHOUTED "YOU SKANK, I'M GOING TO PUT DOWN YOUR CATS" STARTED TO POST SLANDER ON FACEBOOK WHILE IN HOSPITAL

In violation of:

Original Charge	1) 2C:12-1A(1)	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: [Signature] Date: 1/28/2022

PROBABLE CAUSE DETERMINATION AND ISSUANCE OF SUMMONS

☐ 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-summons:			Signature of Judge	Date

SUMMONS

YOU ARE HEREBY SUMMONED to appear before the Municipal Court

in the county of: GLOUCESTER

at the following address: ELK JOINT MUNICIPAL COURT

680 WHIG LANE

MONROEVILLE

NJ 08343-0000

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:

Appearance Date: 02/15/2022

Time: 01:30 PM

Phone: 856-881-6631

Signature of Person Issuing Summons:

Date:

☐ 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

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
0804	S	2022	000025	VS.	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	LAUREN WICKERSHAM	
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				ADDRESS: 118 W. CLAYTON AVE CLAYTON NJ 08312-0000	
# of CHARGES 1	CO-DEFTS	POLICE CASE #:		DEFENDANT INFORMATION	
COMPLAINANT NAME: PRIVATE CITIZEN 667 WHIG LANE RD ATTN WARRANTS MONROEVILLE NJ 08343			SEX: EYE COLOR: DOB: [REDACTED] DRIVER'S LIC. #: DL STATE: SOCIAL SECURITY #: SBI #: TELEPHONE #: () LIVSCAN 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 01/24/2022 in CLAYTON BORO, GLOUCESTER County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, SINCE OCTOBER MY FRIEND ERIK SMITH, HAS LET ME HOUSE MY LATE MOTHER'S CATS IN A SPARE ROOM AT HIS HOUSE. ON THE NIGHT OF 1/24/2022 AROUND 8PM AFTER WORKING, I STOPPED AT HERITAGES TO GRAB WET CAT FOOD BEFORE HEADING OVER TO ERIK'S HOUSE LIKE I DO DAILY. I WALKED INTO ERIK'S HOUSE AND SAW A VISIBLY DRUNK LAUREN. I WALKED OVER STAIR GATES TO FEED CATS, I GASPED AND SAID "OH MY GOD" BECAUSE HER NEGLECTED KITTENS WERE ON THE STAIRCASE (LEFT DOOR OPEN DUE TO INTOXICATION) LAUREN THEN STARTED TO YELL AT ME FROM LIVING ROOM CALLING ERIK (NOT PRESENT) NAMES. I STARTED TO RECORD HER AND SHE THEN PUSHED ME HARD AGAINST THE WALL. I PUSHED BACK WE FOUGHT ON FLOOR. SHE WAS BITING SO HARD I BEGGED HER TO LET GO SEVERAL TIMES I THEN HIT HER IN THE HEAD WITH MY PHONE TO GET OFF OF ME. I CALLED BOYFRIEND AND COPS & EXITED HOUSE. WHILE GETTING IN AMBULANCE IN FRONT OF POLICE & EMT, LAUREN SHOUTED "YOU SKANK, I'M GOING TO PUT DOWN YOUR CATS" STARTED TO POST SLANDER ON FACEBOOK WHILE IN HOSPITAL in violation of:					
Original Charge	1) 2C:12-1A(1)		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: _____ Date: _____					
PROBABLE CAUSE DETERMINATION AND ISSUANCE OF SUMMONS					
☐ 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-summons:					
Signature of Judge		Date			
SUMMONS					
YOU ARE HEREBY SUMMONED to appear before the Municipal Court in the county of: GLOUCESTER					
at the following address: ELK JOINT MUNICIPAL COURT					
680 WHIG LANE		MONROEVILLE		NJ 08343-0000	
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:		Appearance Date: 02/15/2022		Time: 01:30PM Phone: 856-881-6631	
Signature of Person Issuing Summons: PAULINE JORDAN JUDICIAL OFFICER				Date: 01/28/2022	
☐ 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	
				Page 1 of 7 NJ/CDR1 1/1/2017	

COMPLAINT – SUMMONS (Court Action)

COMPLAINT NUMBER

0804

S

2022

000025

STATE V.

LAUREN WICKERSHAM

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: 02/15/2022☐ 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:12-1A(1)

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:

DEDR/Lab Fee

DEDR:

LAB:

DEDR:

LAB:

DEDR:

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:

* 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

Related Traffic Tickets and Complaints:

ORIGINAL - Court Action

JUDGE'S SIGNATURE

DATE

Page 2 of 7

NJ/CDR1 1/1/2017

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER

0804

S

2022

000025

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

THE STATE OF NEW JERSEY

VS.

LAUREN WICKERSHAM

ELK JOINT MUNICIPAL COURT

680 WHIG LANE

MONROEVILLE

NJ 08343-0000

856-881-6631 COUNTY OF: **GLOUCESTER**

ADDRESS:

118 W. CLAYTON AVE

CLAYTON

NJ 08312-0000

of CHARGES

CO-DEF 'S

POLICE CASE #:

1

COMPLAINANT PRIVATE CITIZEN

NAME: **667 WHIG LANE RD**

ATTN WARRANTS

MONROEVILLE

NJ 08343

DEFENDANT INFORMATION

SEX: EYE COLOR:

DOB: [REDACTED]

DRIVER'S LIC. #:

DL STATE:

SOCIAL SECURITY #

SBI #:

TELEPHONE #:

()

LIVSCAN 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 **01/24/2022** in **CLAYTON BORO**, **GLOUCESTER** County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, SINCE OCTOBER MY FRIEND ERIK SMITH, HAS LET ME HOUSE MY LATE MOTHER'S CATS IN A SPARE ROOM AT HIS HOUSE. ON THE NIGHT OF 1/24/2022 AROUND 8PM AFTER WORKING, I STOPPED AT HERITAGES TO GRAB WET CAT FOOD BEFORE HEADING OVER TO ERIK'S HOUSE LIKE I DO DAILY. I WALKED INTO ERIK'S HOUSE AND SAW A VISIBLY DRUNK LAUREN. I WALKED OVER STAIR GATES TO FEED CATS, I GASPED AND SAID "OH MY GOD" BECAUSE HER NEGLECTED KITTENS WERE ON THE STAIRCASE (LEFT DOOR OPEN DUE TO INTOXICATION) LAUREN THEN STARTED TO YELL AT ME FROM LIVING ROOM CALLING ERIK (NOT PRESENT) NAMES. I STARTED TO RECORD HER AND SHE THEN PUSHED ME HARD AGAINST THE WALL. I PUSHED BACK WE FOUGHT ON FLOOR. SHE WAS BITING SO HARD I BEGGED HER TO LET GO SEVERAL TIMES I THEN HIT HER IN THE HEAD WITH MY PHONE TO GET OFF OF ME. I CALLED BOYFRIEND AND COPS & EXITED HOUSE. WHILE GETTING IN AMBULANCE IN FRONT OF POLICE & EMT, LAUREN SHOUTED "YOU SKANK, I'M GOING TO PUT DOWN YOUR CATS" STARTED TO POST SLANDER ON FACEBOOK WHILE IN HOSPITAL

in violation of:

Original Charge

1) **2C:12-1A(1)**

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 derendant 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:

Name, Title and Department of Officer

Date of Action:

1/25/2022

**RETURN OF SERVICE
INFORMATION**

Affidavit of Probable Cause

COMPLAINT NUMBER			
0804	S	2022	000025
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

ELK JOINT MUNICIPAL COURT
680 WHIG LANE
MONROEVILLE NJ 08343-0000
856-881-6631 COUNTY OF: GLOUCESTER

of CHARGES
1

CO-DEFTS

POLICE CASE #:

COMPLAINANT PRIVATE CITIZEN
NAME: 667 WHIG LANE RD
ATTN WARRANTS
MONROEVILLE NJ 08343

THE STATE OF NEW JERSEY
VS.

LAUREN WICKERSHAM

ADDRESS: 118 W. CLAYTON AVE

CLAYTON NJ 08312-0000

DEFENDANT INFORMATION

SEX: EYE COLOR: DOB: [REDACTED]
DRIVER'S LIC. #: DL STATE:
SOCIAL SECURITY #: SBI #:
TELEPHONE #: ()
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:

Affidavit of Probable Cause

Affidavit of Probable Cause

COMPLAINT NUMBER

0804

S

2022

000025

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

THE STATE OF NEW JERSEY

VS.

LAUREN WICKERSHAM

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

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: _____

Date: _____

Affidavit of Probable Cause

Preliminary Law Enforcement Incident Report

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
0804	S	2022	000025	VS.	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	LAUREN WICKERSHAM	
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				ADDRESS: 118 W. CLAYTON AVE CLAYTON NJ 08312-0000	
# of CHARGES 1	CO-DEFTS	POLICE CASE #:		DEFENDANT INFORMATION	
COMPLAINANT NAME: PRIVATE CITIZEN 667 WHIG LANE RD ATTN WARRANTS MONROEVILLE NJ 08343			SEX: EYE COLOR: DOB: [REDACTED] DRIVER'S LIC. #: DL STATE: SOCIAL SECURITY #: SBI #: () TELEPHONE #: 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.

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

Page 7 of 7

7/20/2018

COMPLAINT - SUMMONS

COMPLAINT NUMBER

0804

S

2022

000039

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

THE STATE OF NEW JERSEY
VS.

NADINE PLATTS

ADDRESS:

32 NORTH DELSEA DRIVE
APARTMENT F
CLAYTON

NJ 08312-0000

ELK JOINT MUNICIPAL COURT
680 WHIG LANE
MONROEVILLE NJ 08343-0000
856-881-6631 COUNTY OF: GLOUCESTER

of CHARGES CO-DEFTS POLICE CASE #:

1
COMPLAINANT NAME: JOHN BAYOR
32 NORTH DELSEA DRIVE
APARTMENT F
CLAYTON NJ 08312

DEFENDANT INFORMATION

SEX: EYE COLOR: DOB:

DRIVER'S LIC. #.

SOCIAL SECURITY #:

TELEPHONE #:

LIVESCAN PCN #:

DOB:

DL STATE:

SBI #:

(C)

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 01/27/2022 in CLAYTON BORO, GLOUCESTER County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, "ON 1/27/22 APPROX. 10:29PM, NADINE PLATTS WAS TRYING TO FORCE ME OUT OF THE APARTMENT. SHE WAS DRUNK AND BEING VIOLENT. SHE PROCEEDED TO SLAM MY DOOR AND TRYING TO FORCE ME TO LEAVE MY APARTMENT. SHE CAME IN MY ROOM AND WAS PUNCHING MY TELEVISION AND PUT ABOUT 5 OR 6 PUNCH HOLES IN THE SCREEN. SHE ALSO TRIED TO PICK UP MY TV & TOSS IT TO THE GROUND. AS SHE WAS TRYING TO TOSS MY TV, SHE STABBED THE BACK OF THE TV WITH A BUTCHER KNIFE. CLAYTON POLICE ARRIVED. OFFICER TRAVIS WHITMAN SAID IN THE POLICE REPORT THAT MY TV VALUED AT APPROX. \$1,000."

in violation of:

Original Charge	1) 2C:17-3A(1)	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: _____

Date: _____

PROBABLE CAUSE DETERMINATION AND ISSUANCE OF SUMMONS

☐ 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-summons:

Signature of Judge _____

Date _____

SUMMONS

YOU ARE HEREBY SUMMONED to appear before the Superior Court in the county of: GLOUCESTER.

at the following address: GLOUCESTER COUNTY COURTS

JUSTICE COMPLEX

70 HUNTER STREET

WOODBURY

NJ 08096-0000

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:

Appearance Date: 03/24/2022

Time: 09:00AM

Phone: 856-878-5050

Signature of Person Issuing Summons: _____

Date: _____

☒ 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

Page 1 of 7

NJ/CDF-1/1/2017

COMPLAINT - SUMMONS (Court Action)

COMPLAINT NUMBER
0804 | **S** | **2022** | **000039**
COURT CODE PREFIX YEAR SEQUENCE NUMBER

STATE V.

NADINE PLATTS

FTA Bail Information		Date Bail Set: _____	Amount Bail Set: \$ _____ by: _____	☐ Bail Recog. Attached
Released on Bail	R.O.R.	Committed Default	Committed w/o Bail	Date Referred to County Prosecutor: _____
Place Committed: _____				

Date of First Appearance: **03/24/2022** ☐ 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:17-3A(1)		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: _____
DEDR/Lab Fee	DEDR: _____	LAB: _____	DEDR: _____	LAB: _____	DEDR: _____	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
--	---

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
0804	S	2022	000039	VS.	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.		
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER				ADDRESS: 32 NORTH DELSEA DRIVE APARTMENT F CLAYTON NJ 08312-0000	
# of CHARGES 1	CO-DEFTS	POLICE CASE #:		DEFENDANT INFORMATION	
COMPLAINANT NAME: JOHN BAYOR				SEX: EYE COLOR: DOB: DL STATE:	
				DRIVER'S LIC. #:	
				SOCIAL SECURITY #: SBI #:	
				TELEPHONE #: (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 01/27/2022 in CLAYTON BORO, GLOUCESTER County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, "ON 1/27/22 APPROX. 10:29PM, NADINE PLATTS WAS TRYING TO FORCE ME OUT OF THE APARTMENT. SHE WAS DRUNK AND BEING VIOLENT. SHE PROCEEDED TO SLAM MY DOOR AND TRYING TO FORCE ME TO LEAVE MY APARTMENT. SHE CAME IN MY ROOM AND WAS PUNCHING MY TELEVISION AND PUT ABOUT 5 OR 6 PUNCH HOLES IN THE SCREEN. SHE ALSO TRIED TO PICK UP MY TV & TOSS IT TO THE GROUND. AS SHE WAS TRYING TO TOSS MY TV, SHE STABBED THE BACK OF THE TV WITH A BUTCHER KNIFE. CLAYTON POLICE ARRIVED. OFFICER TRAVIS WHITMAN SAID IN THE POLICE REPORT THAT MY TV VALUED AT APPROX. \$1,000."

In violation of:

Original Charge	1) 2C:17-3A(1)	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: _____

Date: _____

PROBABLE CAUSE DETERMINATION AND ISSUANCE OF SUMMONS

☐ 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-summons:

Signature of Judge

Date

SUMMONS

YOU ARE HEREBY **SUMMONED** to appear before the Superior Court

in the county of: GLOUCESTER

at the following address: GLOUCESTER COUNTY COURTS

JUSTICE COMPLEX

70 HUNTER STREET

WOODBURY

NJ 08096-0000

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:

Appearance Date:

03/24/2022

Time: 09:00AM

Phone:

856-878-5050

Signature of Person Issuing Summons: _____

Date: _____

☒ 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):

COMPLAINT - SUMMONS (DEFENDANT'S COPY)

Page 3 of 7

NJ/CDR 1/1/2017

RETURN OF SERVICE INFORMATION

COMPLAINT NUMBER				THE STATE OF NEW JERSEY VS. NADINE PLATTS ADDRESS: 32 NORTH DELSEA DRIVE APARTMENT F CLAYTON NJ 08312-0000	
0804	S	2022	000039		
COURT CODE	PREFIX	YEAR	SEQUENCE NO.		
ELK JOINT MUNICIPAL COURT 680 WHIG LANE MONROEVILLE NJ 08343-0000 856-881-6631 COUNTY OF: GLOUCESTER					
# of CHARGES 1	CO-DEFTS	POLICE CASE #:		DEFENDANT INFORMATION SEX: EYE COLOR: DOB: DL STATE: DRIVER'S LIC. #: SOCIAL SECURITY #: SBI #: (C) TELEPHONE #: LIVESCAN PCN #:	
COMPLAINANT JOHN BAYOR NAME: 32 NORTH DELSEA DRIVE APARTMENT F CLAYTON NJ 08312					

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 **01/27/2022** in **CLAYTON BORO**, **GLOUCESTER County, NJ** did: WITHIN THE JURISDICTION OF THIS COURT, "ON 1/27/22 APPROX. 10:29PM, NADINE PLATTS WAS TRYING TO FORCE ME OUT OF THE APARTMENT. SHE WAS DRUNK AND BEING VIOLENT. SHE PROCEEDED TO SLAM MY DOOR AND TRYING TO FORCE ME TO LEAVE MY APARTMENT. SHE CAME IN MY ROOM AND WAS PUNCHING MY TELEVISION AND PUT ABOUT 5 OR 6 PUNCH HOLES IN THE SCREEN. SHE ALSO TRIED TO PICK UP MY TV & TOSS IT TO THE GROUND. AS SHE WAS TRYING TO TOSS MY TV, SHE STABBED THE BACK OF THE TV WITH A BUTCHER KNIFE. CLAYTON POLICE ARRIVED. OFFICER TRAVIS WHITMAN SAID IN THE POLICE REPORT THAT MY TV VALUED AT APPROX. \$1,000."

In violation of:

Original Charge	1) 2C:17-3A(1)	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: _____ Name, Title and Department of Officer	Date of Action: _____
--	-----------------------

Affidavit of Probable Cause

COMPLAINT NUMBER

0804

S

2022

000039

COURT ID

TYPE

YEAR

SEQUENCE NO

THE STATE OF NEW JERSEY

VS.

NADINE PLATTS

ELK JOINT MUNICIPAL COURT
680 WHIG LANE
MONROEVILLE NJ 08343-0000
856-881-6631 COUNTY OF: GLOUCESTER

ADDRESS: 32 NORTH DELSEA DRIVE
APARTMENT F
CLAYTON NJ 08312-0000

of CHARGES 1 CO-DEFTS POLICE CASE #:

DEFENDANT INFORMATION

COMPLAINANT JOHN BAYOR
NAME: 32 NORTH DELSEA DRIVE
APARTMENT F
CLAYTON NJ 08312

SEX: EYE COLOR: DOB: DL STATE:
DRIVER'S LIC. #:
SOCIAL SECURITY #: SBI #:
TELEPHONE #: (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:

Affidavit of Probable Cause

Page 5 of 7

Affidavit of Probable Cause

COMPLAINT NUMBER

0804

S

2022

000039

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

THE STATE OF NEW JERSEY

VS.

NADINE PLATTS

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

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: _____

Date: _____

Affidavit of Probable Cause

Page 6 of 7

1/1/2017

Preliminary Law Enforcement Incident Report

COMPLAINT NUMBER

0804

S

2022

000039

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

THE STATE OF NEW JERSEY

VS.

NADINE PLATTS

ADDRESS:

32 NORTH DELSEA DRIVE
APARTMENT F
CLAYTON

NJ 08312-0000

ELK JOINT MUNICIPAL COURT

680 WHIG LANE

MONROEVILLE

NJ 08343-0000

856-881-6631 COUNTY OF: GLOUCESTER

of CHARGES

CO-DEFTS

POLICE CASE #:

1

COMPLAINANT JOHN BAYOR

NAME:

32 NORTH DELSEA DRIVE

APARTMENT F

CLAYTON

NJ 08312

DEFENDANT INFORMATION

SEX: EYE COLOR:

DOB:

DRIVER'S LIC. #:

DL STATE:

SOCIAL SECURITY #:

SBI #:

TELEPHONE:

(C)

LIVSCAN 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.

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: 02/15/2022

Preliminary Law Enforcement Incident Report

Page 7 of 7

7/20/2018