SCHILLER McMAHON
LIMITED LIABILITY COMPANY

123 South Avenue East
Second Floor
Westfield, New Jersey 07090

T: 908-233-4840
F: 908-935-0822

Email: AJE@SchillerMcMahon.com

BRIAN S. SCHILLER
Certified by the Supreme Court of New Jersey as a Criminal Trial Attorney
Member of the N.J. & N.Y. Bars

IVAN TUKHTIN
Member of the N.J. Bar

JOSHUA F. McMAHON
Certified by the Supreme Court of New Jersey as a Criminal Trial Attorney
Member of the N.J. & N.Y. Bars

ADAM J. ELIAS
Member of the N.J. Bar

November 22, 2016

Via Certified Mail
Via Facsimile to

Kelly G. Cupit
Municipal Clerk
Township of Green Brook
111 Greenbrook Road
Green Brook NJ 08812

RE: Notice of Tort Claim
Stephany Bernal, Edgar Cano, Andres Valencia and Blanca Zamudio

Dear Ms. Cupit:

Please be advised that Schiller McMahon represents Stephany Bernal, Edgar Cano, Andres Valencia and Blanca Zamudio.

Enclosed herewith please find a notice of tort claim on behalf of all claimants. HIPAA authorizations will be provided.

Very truly yours,

SCHILLER MCMAHON LLC

By: _____
Adam J. Elias, Esq.

Enc.

TOWNSHIP OF GREEN BROOK
111 GREENBROOK ROAD
GREEN BROOK, NJ 08812

NOTICE OF TORT CLAIM

CLAIMANT INFORMATION

Name Stephany Bernal Telephone _____

Address 401 Rt. 22 West, Apt. 22G Date of Birth 1/6/92

North Plainfield, NJ 07060 SS Number _____

ATTORNEY INFORMATION (if applicable)

Name Joshua F. McMahon Telephone (908) 233-4840

Address 123 South Ave East FAX Number (908) 935-0822

Westfield, NJ 07090 File Number _____

Send Notices to: _____ Claimant X Attorney

GENERAL INSTRUCTIONS: Pursuant to the provisions of the New Jersey Tort Claims Act, this Notice of Tort Claim form has been adopted as the official form for the filing of claims against the Township of Green Brook.

The questions are to be answered to the extent of all information available to the Claimant or to his or her attorneys, agents, servants, and employees, under oath. The fully completed Claim Form and the documents requested shall be returned to:

Township of Green Brook
111 Greenbrook Rd.
Green Brook NJ 08812

NOTE CAREFULLY: Your claim will not be considered filed as required by the New Jersey Tort Claims Act until this completed form has been filed with the Township of Green Brook. Failure to provide the information requested, including such responses as "To Be Provided" or "Under Investigation", will result in the claim being treated as not properly filed.

Timely Notices of Claim must be filed within 90 days after the incident giving rise to the claim.

This form is designed as a general form for use with respect to all claims. Some of the questions may not be applicable to your particular claim. For example, if your claim does not arise out of an automobile accident, questions regarding road conditions might not be applicable. In that event, please indicate "Not Applicable".

If you are unable to answer any question because of a lack of information available to you, specify the reason the information is not available to you. If a question asks that you identify a document, it will be sufficient to furnish true and legible copies. Where a question asks that you "identify all persons", provide the name, address and telephone number of the person.

If you need more space to provide a full answer, attach supplementary pages, identifying the continuation of the answer with the number of the applicable question.

DEFINITIONS:

"Claimant" shall refer to the person or persons on whose behalf the Notice of Claim has been filed with the Township of Green Brook.

"Documents" shall refer to any written, photographic or electronic representation, and any copy thereof, including, but not limited to, computer tapes and/or disks, videotapes and other material relating to the subject matter of the claim.

"Person" shall include in its meaning a partnership, joint venture, corporation, association, trust or any other kind of entity, as well as a natural person.

"Public Entity" shall refer to the Township of Green Brook along with any agent, official or employee of the Township of Green Brook against whom a claim is asserted by the Claimant.

NOTE that the questions are divided into sections relating to the claimant, the claim, property damage, personal injury and the basis for the claim against the public entity or a public employee.

If the claim involves only property damage, then the portion on personal injuries need not be answered. Just enter as the answer "No personal injuries to be claimed".

If the claim involves no property damage, then the portion on property damage need not be answered. Just enter as the answer "No property damage claimed".

INFORMATION OF THE CLAIMANT

1. Provide the following information with respect to the Claimant:

   a. Any other name by which the Claimant has been known.

      N/A.

   b. Address at the time of the incident giving rise to the claim.

      401 Rt. 22 West, Apt. 22G, North Plainfield, NJ 07060

   c. Marital Status (at the time of the incident and current).

      Information to be provided.

   d. Identify each person residing with the claimant and the relation, if any, of the person to the Claimant.

      Information to be provided.

2. Provide all addresses of the Claimant for the last 10 years, the dates of the residence, the persons residing at the addresses at the same time as the Claimant resided at the addresses and the relation, if any, of the person to the Claimant.

   Information to be provided.

INFORMATION ON ALL CLAIMS

3. Provide the exact date, time and location of the incident forming the basis of the claim and the weather conditions prevailing at the time.

August 27, 2016 at 11:32pm. Additional details to be provided.

4. Provide the Claimant's complete version of the events that form the basis of the claim.

On August 27, 2016, members of the North Plainfield Police Department, Watchung Police Department, Greenbrook Police Department, and perhaps others, unlawfully entered the residence of 155 Delacy Avenue, violating the claimants' constitutional rights and causing claimants to suffer physical injury, and/or emotional distress, and/or property damage.

5. List any and all individuals who were witnesses to or who have knowledge of the facts of the incident which gave rise to the claim. Provide the full name and addresses of each individual.

All individuals listed in police reports (attached) and additional individuals to be identified.

6. Identify all public entities or public employees (by name and position) alleged to have caused the injury or property damage and **specify as to each public entity or employee the exact nature of the act or omission alleged to have caused the injury or property damage.**

Greenbrook Township
Greenbrook Police Department
Ofc Jonathan Camp
Ofc Gary Maurer
Ofc Randy Stratton
North Plainfield Police Department
Watchung Police Department

Specific details to be provided.

7. If you claim that the injury or property damage was caused by a dangerous condition of property under the control of the public entity, specify the nature of the alleged dangerous condition and the manner in which you claim the condition caused the injury.

N/A.

8. If you allege a dangerous condition of public property, state the specific basis on which you claim that the public entity was responsible for the condition and the specific basis and date on which you claim that the public entity was given notice of the alleged dangerous condition. Statements such as "should have known" and "common knowledge" are insufficient.

N/A.

9. If you or any other party or witness consumed any alcoholic beverages, drugs or medications within twelve (12) hours before the incident forming the basis of the Claim, identify the person consuming the same and for each person (a) what was consumed (b) the quantity thereof (c) where consumed (d) the names and addresses of all persons present.

Under investigation. Information to be povided.

10. If you have received any money or thing of value for your injuries or damages from any person, firm or corporation, state the amounts received, the dates, names and addresses of the payors. Specifically list any policies of insurance, including policy number and claim number, from which benefits have been paid to you or to any person on your behalf, including doctors, hospitals or any person repairing damage to your property.

Under investigation. Information to be povided.

11. If any photographs, sketches, charts or maps were made with respect to anything which is the subject matter of the claim, state the date thereof, the names and addresses of the persons making the same and of the persons who have present possession thereof. Attach copies of any photographs, sketches, charts or maps.

Under investigation. Information to be povided.

12. If you or any of the parties to this action or any of the witnesses made any statements or admissions, set forth what was said; by whom said; date and place where said; and in whose presence, giving names and addresses of any persons having knowledge thereof.

Under investigation. Information to be povided.

13. State the total amount of your claim and the basis on which you calculate the amount claimed.

Under investigation. Information to be povided.

14. Provide copies of all documents, memoranda, correspondence, reports (including police reports), etc., which discuss, mention or pertain to the subject matter of this claim.

See attached.

15. Provide the names and addresses of all persons or entities against whom claims have been made for injuries or damages arising out of the incident forming the basis of this claim and give the basis for the claim against each.

Under investigation. Information to be povided.

PROPERTY DAMAGE CLAIMS

16. If your claim is for property damage, attach a description of the property damage and an estimate of the costs of repair. If your claim does not involve any claim for property damage, enter "None".

Under investigation. Information to be povided.

_____ **If your claim is for property damage only, initial here, proceed directly and sign the Certification.**

PERSONAL INJURY CLAIMS

17. Was any complaint made to the public entity or to any official or employee of the public entity. State the time and place of the complaint and the person or persons to whom the complaint was made.

Under investigation. Information to be povided.

18. Describe in detail, the nature, extent and duration of any and all injuries.

Under investigation. Information to be povided.

19. Describe in detail, any injury or condition claimed to be permanent.

Under investigation. Information to be povided.

20. If confined to any hospitals, state name and address of each and the dates of admission and discharge. Include all hospital admissions prior to and subsequent to the alleged injury and give the reason for each admission.

Under investigation. Information to be povided.

21. If x-rays were taken, state (a) the address of the place where each was taken (b) the name and address of the person who took them (c) the date when each was taken (d) what each disclosed (e) where and in whose possession they now are. Include x-rays, whether prior to or subsequent to the alleged injury forming the basis of the claim.

Under investigation. Information to be povided.

22. If treated by doctors, including psychiatrists or psychologists, state (a) the name and present address of each doctor (b) the dates and places where treatments were received (c) the nature of the treatment (d) the date of the last treatment or, if treatments are continuing, the schedule of continuing treatments. Provide true copies of all written reports rendered to you or about you by any doctors whom you propose to have testify on your behalf.

Under investigation. Information to be povided.

23. If you have any physical impairment which you allege is caused by the injury forming the basis of your claim and which is affecting your ordinary movements, hearing or sight, state in detail, the nature and extent of the impairment and what corrective appliances, support or device you use to overcome or alleviate the impairment.

24. If you claim that a previous injury has been aggravated or exacerbated, describe the injury and give the name and present address of each doctor who treated you for the condition, the period during which treatment was received and the cause of the previous injury. Specifically list any impairment, including use of eyeglasses, hearing aid or similar device, which existed at the time of the injury, forming the basis of the claim.

25. If any treatments, operation or other form of surgery in the future has been recommended to alleviate any injury or condition resulting from the incident which forms the basis of the claim, state in detail (a) the nature and extent of the treatment, operation or surgery (b) the purpose thereof and the results anticipated or expected (c) the name and address of the doctor who recommended the treatments, operation or surgery (d) the name and address of the doctor who will administer or perform the same (e) the estimated medical expenses to be incurred (f) the estimated length of time of treatments, operation or surgery, period of hospitalization and period of convalescence (g) all other losses or expenditures anticipated as a result of the treatments, operation or surgery and the approximate date.

Under investigation. Information to be povided.

26. Itemize any and all expenses incurred for hospitals, doctors, nurses, x-rays, medicines, care and appliances and indicate which expenses were paid by any insurance coverage.

Under investigation. Information to be povided.

27. If employed at the time of the alleged injury forming the basis of the claim state (a) the name and address of the employer (b) position held and the nature of the work performed (c) average weekly wages for the year prior to the injury (d) period of time lost from employment, giving dates (e) amount of wages lost, if any. List any sources of income continuation or replacement, including, but not limited to, worker's compensation, disability income, social security and income continuation insurance.

Under investigation. Information to be povided.

28. If other loss of income, profit or earnings is claimed, state (a) total amount of the loss (b) give a complete detailed computation of the loss (c) the nature and dates of loss.

Under investigation. Information to be povided.

29. If you are claiming lost wages state (a) the date that the employment began (b) the name and address of the employer (c) the position held and the nature of the work performed (d) the wages received during the past year.

Under investigation. Information to be povided.

DOCUMENT REQUEST: Produce all documents identified in your answers to the above questions.

See attached. Information to be povided.

CERTIFICATION

I hereby certify that the information provided is the truth and is the full and complete response to the questions, to the best of my knowledge.

11/21/16

Date Signature of Claimant

TOWNSHIP OF GREEN BROOK
111 GREENBROOK ROAD
GREEN BROOK, NJ 08812

NOTICE OF TORT CLAIM

CLAIMANT INFORMATION

Name Andres Valencia
Address 401 Rt. 22 West, Apt. 22G
North Plainfield, NJ 07060

Telephone
Date of Birth 5/9/87
SS Number

ATTORNEY INFORMATION (if applicable)

Name Joshua F. McMahon
Address 123 South Ave East
Westfield, NJ 07090

Telephone (908) 233-4840
FAX Number (908) 935-0822
File Number

Send Notices to: _____ Claimant X Attorney

GENERAL INSTRUCTIONS: Pursuant to the provisions of the New Jersey Tort Claims Act, this Notice of Tort Claim form has been adopted as the official form for the filing of claims against the Township of Green Brook.

The questions are to be answered to the extent of all information available to the Claimant or to his or her attorneys, agents, servants, and employees, under oath. The fully completed Claim Form and the documents requested shall be returned to:

Township of Green Brook
111 Greenbrook Rd.
Green Brook NJ 08812

NOTE CAREFULLY: Your claim will not be considered filed as required by the New Jersey Tort Claims Act until this completed form has been filed with the Township of Green Brook. Failure to provide the information requested, including such responses as "To Be Provided" or "Under Investigation", will result in the claim being treated as not properly filed.

Timely Notices of Claim must be filed within 90 days after the incident giving rise to the claim.

This form is designed as a general form for use with respect to all claims. Some of the questions may not be applicable to your particular claim. For example, if your claim does not arise out of an automobile accident, questions regarding road conditions might not be applicable. In that event, please indicate "Not Applicable".

If you are unable to answer any question because of a lack of information available to you, specify the reason the information is not available to you. If a question asks that you identify a document, it will be sufficient to furnish true and legible copies. Where a question asks that you "identify all persons", provide the name, address and telephone number of the person.

If you need more space to provide a full answer, attach supplementary pages, identifying the continuation of the answer with the number of the applicable question.

DEFINITIONS:

"Claimant" shall refer to the person or persons on whose behalf the Notice of Claim has been filed with the Township of Green Brook.

"Documents" shall refer to any written, photographic or electronic representation, and any copy thereof, including, but not limited to, computer tapes and/or disks, videotapes and other material relating to the subject matter of the claim.

"Person" shall include in its meaning a partnership, joint venture, corporation, association, trust or any other kind of entity, as well as a natural person.

"Public Entity" shall refer to the Township of Green Brook along with any agent, official or employee of the Township of Green Brook against whom a claim is asserted by the Claimant.

NOTE that the questions are divided into sections relating to the claimant, the claim, property damage, personal injury and the basis for the claim against the public entity or a public employee.

If the claim involves only property damage, then the portion on personal injuries need not be answered. Just enter as the answer "No personal injuries to be claimed".

If the claim involves no property damage, then the portion on property damage need not be answered. Just enter as the answer "No property damage claimed".

INFORMATION OF THE CLAIMANT

1. Provide the following information with respect to the Claimant:

   a. Any other name by which the Claimant has been known.

      N/A.

   b. Address at the time of the incident giving rise to the claim.

      401 Rt. 22 West, Apt. 22G, North Plainfield, NJ 07060

   c. Marital Status (at the time of the incident and current).

      Information to be provided.

   d. Identify each person residing with the claimant and the relation, if any, of the person to the Claimant.

      Information to be provided.

2. Provide all addresses of the Claimant for the last 10 years, the dates of the residence, the persons residing at the addresses at the same time as the Claimant resided at the addresses and the relation, if any, of the person to the Claimant.

   Information to be provided.

INFORMATION ON ALL CLAIMS

3. Provide the exact date, time and location of the incident forming the basis of the claim and the weather conditions prevailing at the time.

August 27, 2016 at 11:32pm. Additional details to be provided.

4. Provide the Claimant's complete version of the events that form the basis of the claim.

On August 27, 2016, members of the North Plainfield Police Department, Watchung Police Department, Greenbrook Police Department, and perhaps others, unlawfully entered the residence of 155 Delacy Avenue, violating the claimants' constitutional rights and causing claimants to suffer physical injury, and/or emotional distress, and/or property damage.

5. List any and all individuals who were witnesses to or who have knowledge of the facts of the incident which gave rise to the claim. Provide the full name and addresses of each individual.

All individuals listed in police reports (attached) and additional individuals to be identified.

6. Identify all public entities or public employees (by name and position) alleged to have caused the injury or property damage and **specify as to each public entity or employee the exact nature of the act or omission alleged to have caused the injury or property damage.**

Greenbrook Township
Greenbrook Police Department
Ofc Jonathan Camp
Ofc Gary Maurer
Ofc Randy Stratton
North Plainfield Police Department
Watchung Police Department

Specific details to be provided.

7. If you claim that the injury or property damage was caused by a dangerous condition of property under the control of the public entity, specify the nature of the alleged dangerous condition and the manner in which you claim the condition caused the injury.

N/A.

8. If you allege a dangerous condition of public property, state the specific basis on which you claim that the public entity was responsible for the condition and the specific basis and date on which you claim that the public entity was given notice of the alleged dangerous condition. Statements such as "should have known" and "common knowledge" are insufficient.

N/A.

9. If you or any other party or witness consumed any alcoholic beverages, drugs or medications within twelve (12) hours before the incident forming the basis of the Claim, identify the person consuming the same and for each person (a) what was consumed (b) the quantity thereof (c) where consumed (d) the names and addresses of all persons present.

Under investigation. Information to be povided.

10. If you have received any money or thing of value for your injuries or damages from any person, firm or corporation, state the amounts received, the dates, names and addresses of the payors. Specifically list any policies of insurance, including policy number and claim number, from which benefits have been paid to you or to any person on your behalf, including doctors, hospitals or any person repairing damage to your property.

Under investigation. Information to be povided.

11. If any photographs, sketches, charts or maps were made with respect to anything which is the subject matter of the claim, state the date thereof, the names and addresses of the persons making the same and of the persons who have present possession thereof. Attach copies of any photographs, sketches, charts or maps.

Under investigation. Information to be povided.

12. If you or any of the parties to this action or any of the witnesses made any statements or admissions, set forth what was said; by whom said; date and place where said; and in whose presence, giving names and addresses of any persons having knowledge thereof.

Under investigation. Information to be povided.

13. State the total amount of your claim and the basis on which you calculate the amount claimed.

Under investigation. Information to be povided.

14. Provide copies of all documents, memoranda, correspondence, reports (including police reports), etc., which discuss, mention or pertain to the subject matter of this claim.

See attached.

15. Provide the names and addresses of all persons or entities against whom claims have been made for injuries or damages arising out of the incident forming the basis of this claim and give the basis for the claim against each.

Under investigation. Information to be povided.

PROPERTY DAMAGE CLAIMS

16. If your claim is for property damage, attach a description of the property damage and an estimate of the costs of repair. If your claim does not involve any claim for property damage, enter "None".

Under investigation. Information to be povided.

_____ **If your claim is for property damage only, initial here, proceed directly and sign the Certification.**

PERSONAL INJURY CLAIMS

17. Was any complaint made to the public entity or to any official or employee of the public entity. State the time and place of the complaint and the person or persons to whom the complaint was made.

Under investigation. Information to be povided.

18. Describe in detail, the nature, extent and duration of any and all injuries.

Under investigation. Information to be povided.

19. Describe in detail, any injury or condition claimed to be permanent.

Under investigation. Information to be povided.

20. If confined to any hospitals, state name and address of each and the dates of admission and discharge. Include all hospital admissions prior to and subsequent to the alleged injury and give the reason for each admission.

Under investigation. Information to be povided.

21. If x-rays were taken, state (a) the address of the place where each was taken (b) the name and address of the person who took them (c) the date when each was taken (d) what each disclosed (e) where and in whose possession they now are. Include x-rays, whether prior to or subsequent to the alleged injury forming the basis of the claim.

Under investigation. Information to be povided.

22. If treated by doctors, including psychiatrists or psychologists, state (a) the name and present address of each doctor (b) the dates and places where treatments were received (c) the nature of the treatment (d) the date of the last treatment or, if treatments are continuing, the schedule of continuing treatments. Provide true copies of all written reports rendered to you or about you by any doctors whom you propose to have testify on your behalf.

Under investigation. Information to be povided.

23. If you have any physical impairment which you allege is caused by the injury forming the basis of your claim and which is affecting your ordinary movements, hearing or sight, state in detail, the nature and extent of the impairment and what corrective appliances, support or device you use to overcome or alleviate the impairment.

24. If you claim that a previous injury has been aggravated or exacerbated, describe the injury and give the name and present address of each doctor who treated you for the condition, the period during which treatment was received and the cause of the previous injury. Specifically list any impairment, including use of eyeglasses, hearing aid or similar device, which existed at the time of the injury, forming the basis of the claim.

25. If any treatments, operation or other form of surgery in the future has been recommended to alleviate any injury or condition resulting from the incident which forms the basis of the claim, state in detail (a) the nature and extent of the treatment, operation or surgery (b) the purpose thereof and the results anticipated or expected (c) the name and address of the doctor who recommended the treatments, operation or surgery (d) the name and address of the doctor who will administer or perform the same (e) the estimated medical expenses to be incurred (f) the estimated length of time of treatments, operation or surgery, period of hospitalization and period of convalescence (g) all other losses or expenditures anticipated as a result of the treatments, operation or surgery and the approximate date.

Under investigation. Information to be povided.

26. Itemize any and all expenses incurred for hospitals, doctors, nurses, x-rays, medicines, care and appliances and indicate which expenses were paid by any insurance coverage.

Under investigation. Information to be povided.

27. If employed at the time of the alleged injury forming the basis of the claim state (a) the name and address of the employer (b) position held and the nature of the work performed (c) average weekly wages for the year prior to the injury (d) period of time lost from employment, giving dates (e) amount of wages lost, if any. List any sources of income continuation or replacement, including, but not limited to, worker's compensation, disability income, social security and income continuation insurance.

Under investigation. Information to be povided.

28. If other loss of income, profit or earnings is claimed, state (a) total amount of the loss (b) give a complete detailed computation of the loss (c) the nature and dates of loss.

Under investigation. Information to be povided.

29. If you are claiming lost wages state (a) the date that the employment began (b) the name and address of the employer (c) the position held and the nature of the work performed (d) the wages received during the past year.

Under investigation. Information to be povided.

DOCUMENT REQUEST: Produce all documents identified in your answers to the above questions.

See attached. Information to be povided.

CERTIFICATION

I hereby certify that the information provided is the truth and is the full and complete response to the questions, to the best of my knowledge.

11/21/16

Date

Signature of Claimant

TOWNSHIP OF GREEN BROOK
111 GREENBROOK ROAD
GREEN BROOK, NJ 08812

NOTICE OF TORT CLAIM

CLAIMANT INFORMATION

Name Edgar Cano Telephone _____

Address 401 Rt. 22 West, Apt. 48B Date of Birth 12/18/65

North Plainfield, NJ 07060 SS Number _____

ATTORNEY INFORMATION (if applicable)

Name Joshua F. McMahon Telephone (908) 233-4840

Address 123 South Ave East FAX Number (908) 935-0822

Westfield, NJ 07090 File Number _____

Send Notices to: _____ Claimant X Attorney

GENERAL INSTRUCTIONS: Pursuant to the provisions of the New Jersey Tort Claims Act, this Notice of Tort Claim form has been adopted as the official form for the filing of claims against the Township of Green Brook.

The questions are to be answered to the extent of all information available to the Claimant or to his or her attorneys, agents, servants, and employees, under oath. The fully completed Claim Form and the documents requested shall be returned to:

Township of Green Brook
111 Greenbrook Rd.
Green Brook NJ 08812

NOTE CAREFULLY: Your claim will not be considered filed as required by the New Jersey Tort Claims Act until this completed form has been filed with the Township of Green Brook. Failure to provide the information requested, including such responses as "To Be Provided" or "Under Investigation", will result in the claim being treated as not properly filed.

Timely Notices of Claim must be filed within 90 days after the incident giving rise to the claim.

This form is designed as a general form for use with respect to all claims. Some of the questions may not be applicable to your particular claim. For example, if your claim does not arise out of an automobile accident, questions regarding road conditions might not be applicable. In that event, please indicate "Not Applicable".

If you are unable to answer any question because of a lack of information available to you, specify the reason the information is not available to you. If a question asks that you identify a document, it will be sufficient to furnish true and legible copies. Where a question asks that you "identify all persons", provide the name, address and telephone number of the person.

If you need more space to provide a full answer, attach supplementary pages, identifying the continuation of the answer with the number of the applicable question.

DEFINITIONS:

"Claimant" shall refer to the person or persons on whose behalf the Notice of Claim has been filed with the Township of Green Brook.

"Documents" shall refer to any written, photographic or electronic representation, and any copy thereof, including, but not limited to, computer tapes and/or disks, videotapes and other material relating to the subject matter of the claim.

"Person" shall include in its meaning a partnership, joint venture, corporation, association, trust or any other kind of entity, as well as a natural person.

"Public Entity" shall refer to the Township of Green Brook along with any agent, official or employee of the Township of Green Brook against whom a claim is asserted by the Claimant.

NOTE that the questions are divided into sections relating to the claimant, the claim, property damage, personal injury and the basis for the claim against the public entity or a public employee.

If the claim involves only property damage, then the portion on personal injuries need not be answered. Just enter as the answer "No personal injuries to be claimed".

If the claim involves no property damage, then the portion on property damage need not be answered. Just enter as the answer "No property damage claimed".

INFORMATION OF THE CLAIMANT

1. Provide the following information with respect to the Claimant:

   a. Any other name by which the Claimant has been known.

      N/A.

   b. Address at the time of the incident giving rise to the claim.

      401 Rt. 22 West, Apt. 22G, North Plainfield, NJ 07060

   c. Marital Status (at the time of the incident and current).

      Information to be provided.

   d. Identify each person residing with the claimant and the relation, if any, of the person to the Claimant.

      Information to be provided.

2. Provide all addresses of the Claimant for the last 10 years, the dates of the residence, the persons residing at the addresses at the same time as the Claimant resided at the addresses and the relation, if any, of the person to the Claimant.

   Information to be provided.

INFORMATION ON ALL CLAIMS

3. Provide the exact date, time and location of the incident forming the basis of the claim and the weather conditions prevailing at the time.

August 27, 2016 at 11:32pm. Additional details to be provided.

4. Provide the Claimant's complete version of the events that form the basis of the claim.

On August 27, 2016, members of the North Plainfield Police Department, Watchung Police Department, Greenbrook Police Department, and perhaps others, unlawfully entered the residence of 155 Delacy Avenue, violating the claimants' constitutional rights and causing claimants to suffer physical injury, and/or emotional distress, and/or property damage.

5. List any and all individuals who were witnesses to or who have knowledge of the facts of the incident which gave rise to the claim. Provide the full name and addresses of each individual.

All individuals listed in police reports (attached) and additional individuals to be identified.

6. Identify all public entities or public employees (by name and position) alleged to have caused the injury or property damage and **specify as to each public entity or employee the exact nature of the act or omission alleged to have caused the injury or property damage.**

Greenbrook Township
Greenbrook Police Department
Ofc Jonathan Camp
Ofc Gary Maurer
Ofc Randy Stratton
North Plainfield Police Department
Watchung Police Department

Specific details to be provided.

7. If you claim that the injury or property damage was caused by a dangerous condition of property under the control of the public entity, specify the nature of the alleged dangerous condition and the manner in which you claim the condition caused the injury.

N/A.

8. If you allege a dangerous condition of public property, state the specific basis on which you claim that the public entity was responsible for the condition and the specific basis and date on which you claim that the public entity was given notice of the alleged dangerous condition. Statements such as "should have known" and "common knowledge" are insufficient.

N/A.

9. If you or any other party or witness consumed any alcoholic beverages, drugs or medications within twelve (12) hours before the incident forming the basis of the Claim, identify the person consuming the same and for each person (a) what was consumed (b) the quantity thereof (c) where consumed (d) the names and addresses of all persons present.

Under investigation. Information to be povided.

10. If you have received any money or thing of value for your injuries or damages from any person, firm or corporation, state the amounts received, the dates, names and addresses of the payors. Specifically list any policies of insurance, including policy number and claim number, from which benefits have been paid to you or to any person on your behalf, including doctors, hospitals or any person repairing damage to your property.

Under investigation. Information to be povided.

11. If any photographs, sketches, charts or maps were made with respect to anything which is the subject matter of the claim, state the date thereof, the names and addresses of the persons making the same and of the persons who have present possession thereof. Attach copies of any photographs, sketches, charts or maps.

Under investigation. Information to be povided.

12. If you or any of the parties to this action or any of the witnesses made any statements or admissions, set forth what was said; by whom said; date and place where said; and in whose presence, giving names and addresses of any persons having knowledge thereof.

Under investigation. Information to be povided.

13. State the total amount of your claim and the basis on which you calculate the amount claimed.

Under investigation. Information to be povided.

14. Provide copies of all documents, memoranda, correspondence, reports (including police reports), etc., which discuss, mention or pertain to the subject matter of this claim.

See attached.

15. Provide the names and addresses of all persons or entities against whom claims have been made for injuries or damages arising out of the incident forming the basis of this claim and give the basis for the claim against each.

Under investigation. Information to be povided.

PROPERTY DAMAGE CLAIMS

16. If your claim is for property damage, attach a description of the property damage and an estimate of the costs of repair. If your claim does not involve any claim for property damage, enter "None".

Under investigation. Information to be povided.

_____ **If your claim is for property damage only, initial here, proceed directly and sign the Certification.**

PERSONAL INJURY CLAIMS

17. Was any complaint made to the public entity or to any official or employee of the public entity. State the time and place of the complaint and the person or persons to whom the complaint was made.

Under investigation. Information to be povided.

18. Describe in detail, the nature, extent and duration of any and all injuries.

Under investigation. Information to be povided.

19. Describe in detail, any injury or condition claimed to be permanent.

Under investigation. Information to be povided.

20. If confined to any hospitals, state name and address of each and the dates of admission and discharge. Include all hospital admissions prior to and subsequent to the alleged injury and give the reason for each admission.

Under investigation. Information to be povided.

21. If x-rays were taken, state (a) the address of the place where each was taken (b) the name and address of the person who took them (c) the date when each was taken (d) what each disclosed (e) where and in whose possession they now are. Include x-rays, whether prior to or subsequent to the alleged injury forming the basis of the claim.

Under investigation. Information to be povided.

22. If treated by doctors, including psychiatrists or psychologists, state (a) the name and present address of each doctor (b) the dates and places where treatments were received (c) the nature of the treatment (d) the date of the last treatment or, if treatments are continuing, the schedule of continuing treatments. Provide true copies of all written reports rendered to you or about you by any doctors whom you propose to have testify on your behalf.

Under investigation. Information to be povided.

23. If you have any physical impairment which you allege is caused by the injury forming the basis of your claim and which is affecting your ordinary movements, hearing or sight, state in detail, the nature and extent of the impairment and what corrective appliances, support or device you use to overcome or alleviate the impairment.

24. If you claim that a previous injury has been aggravated or exacerbated, describe the injury and give the name and present address of each doctor who treated you for the condition, the period during which treatment was received and the cause of the previous injury. Specifically list any impairment, including use of eyeglasses, hearing aid or similar device, which existed at the time of the injury, forming the basis of the claim.

25. If any treatments, operation or other form of surgery in the future has been recommended to alleviate any injury or condition resulting from the incident which forms the basis of the claim, state in detail (a) the nature and extent of the treatment, operation or surgery (b) the purpose thereof and the results anticipated or expected (c) the name and address of the doctor who recommended the treatments, operation or surgery (d) the name and address of the doctor who will administer or perform the same (e) the estimated medical expenses to be incurred (f) the estimated length of time of treatments, operation or surgery, period of hospitalization and period of convalescence (g) all other losses or expenditures anticipated as a result of the treatments, operation or surgery and the approximate date.

Under investigation. Information to be povided.

26. Itemize any and all expenses incurred for hospitals, doctors, nurses, x-rays, medicines, care and appliances and indicate which expenses were paid by any insurance coverage.

Under investigation. Information to be povided.

27. If employed at the time of the alleged injury forming the basis of the claim state (a) the name and address of the employer (b) position held and the nature of the work performed (c) average weekly wages for the year prior to the injury (d) period of time lost from employment, giving dates (e) amount of wages lost, if any. List any sources of income continuation or replacement, including, but not limited to, worker's compensation, disability income, social security and income continuation insurance.

Under investigation. Information to be povided.

28. If other loss of income, profit or earnings is claimed, state (a) total amount of the loss (b) give a complete detailed computation of the loss (c) the nature and dates of loss.

Under investigation. Information to be povided.

29. If you are claiming lost wages state (a) the date that the employment began (b) the name and address of the employer (c) the position held and the nature of the work performed (d) the wages received during the past year.

Under investigation. Information to be povided.

DOCUMENT REQUEST: Produce all documents identified in your answers to the above questions.

See attached. Information to be povided.

CERTIFICATION

I hereby certify that the information provided is the truth and is the full and complete response to the questions, to the best of my knowledge.

11/21/16

Date

Signature of Claimant

TOWNSHIP OF GREEN BROOK
111 GREENBROOK ROAD
GREEN BROOK, NJ 08812

NOTICE OF TORT CLAIM

CLAIMANT INFORMATION

Name Blanca Zamudio Telephone _____

Address 401 Rt. 22 West, Apt. 48B Date of Birth 11/30/59

North Plainfield, NJ 07060 SS Number _____

ATTORNEY INFORMATION (if applicable)

Name Joshua F. McMahon Telephone (908) 233-4840

Address 123 South Ave East FAX Number (908) 935-0822

Westfield, NJ 07090 File Number _____

Send Notices to: _____ Claimant X Attorney

GENERAL INSTRUCTIONS: Pursuant to the provisions of the New Jersey Tort Claims Act, this Notice of Tort Claim form has been adopted as the official form for the filing of claims against the Township of Green Brook.

The questions are to be answered to the extent of all information available to the Claimant or to his or her attorneys, agents, servants, and employees, under oath. The fully completed Claim Form and the documents requested shall be returned to:

Township of Green Brook
111 Greenbrook Rd.
Green Brook NJ 08812

NOTE CAREFULLY: Your claim will not be considered filed as required by the New Jersey Tort Claims Act until this completed form has been filed with the Township of Green Brook. Failure to provide the information requested, including such responses as "To Be Provided" or "Under Investigation", will result in the claim being treated as not properly filed.

Timely Notices of Claim must be filed within 90 days after the incident giving rise to the claim.

This form is designed as a general form for use with respect to all claims. Some of the questions may not be applicable to your particular claim. For example, if your claim does not arise out of an automobile accident, questions regarding road conditions might not be applicable. In that event, please indicate "Not Applicable".

If you are unable to answer any question because of a lack of information available to you, specify the reason the information is not available to you. If a question asks that you identify a document, it will be sufficient to furnish true and legible copies. Where a question asks that you "identify all persons", provide the name, address and telephone number of the person.

If you need more space to provide a full answer, attach supplementary pages, identifying the continuation of the answer with the number of the applicable question.

DEFINITIONS:

"Claimant" shall refer to the person or persons on whose behalf the Notice of Claim has been filed with the Township of Green Brook.

"Documents" shall refer to any written, photographic or electronic representation, and any copy thereof, including, but not limited to, computer tapes and/or disks, videotapes and other material relating to the subject matter of the claim.

"Person" shall include in its meaning a partnership, joint venture, corporation, association, trust or any other kind of entity, as well as a natural person.

"Public Entity" shall refer to the Township of Green Brook along with any agent, official or employee of the Township of Green Brook against whom a claim is asserted by the Claimant.

NOTE that the questions are divided into sections relating to the claimant, the claim, property damage, personal injury and the basis for the claim against the public entity or a public employee.

If the claim involves only property damage, then the portion on personal injuries need not be answered. Just enter as the answer "No personal injuries to be claimed".

If the claim involves no property damage, then the portion on property damage need not be answered. Just enter as the answer "No property damage claimed".

INFORMATION OF THE CLAIMANT

1. Provide the following information with respect to the Claimant:

   a. Any other name by which the Claimant has been known.

      N/A.

   b. Address at the time of the incident giving rise to the claim.

      401 Rt. 22 West, Apt. 22G, North Plainfield, NJ 07060

   c. Marital Status (at the time of the incident and current).

      Information to be provided.

   d. Identify each person residing with the claimant and the relation, if any, of the person to the Claimant.

      Information to be provided.

2. Provide all addresses of the Claimant for the last 10 years, the dates of the residence, the persons residing at the addresses at the same time as the Claimant resided at the addresses and the relation, if any, of the person to the Claimant.

   Information to be provided.

INFORMATION ON ALL CLAIMS

3. Provide the exact date, time and location of the incident forming the basis of the claim and the weather conditions prevailing at the time.

August 27, 2016 at 11:32pm. Additional details to be provided.

4. Provide the Claimant's complete version of the events that form the basis of the claim.

On August 27, 2016, members of the North Plainfield Police Department, Watchung Police Department, Greenbrook Police Department, and perhaps others, unlawfully entered the residence of 155 Delacy Avenue, violating the claimants' constitutional rights and causing claimants to suffer physical injury, and/or emotional distress, and/or property damage.

5. List any and all individuals who were witnesses to or who have knowledge of the facts of the incident which gave rise to the claim. Provide the full name and addresses of each individual.

All individuals listed in police reports (attached) and additional individuals to be identified.

6. Identify all public entities or public employees (by name and position) alleged to have caused the injury or property damage and **specify as to each public entity or employee the exact nature of the act or omission alleged to have caused the injury or property damage.**

Greenbrook Township
Greenbrook Police Department
Ofc Jonathan Camp
Ofc Gary Maurer
Ofc Randy Stratton
North Plainfield Police Department
Watchung Police Department

Specific details to be provided.

7. If you claim that the injury or property damage was caused by a dangerous condition of property under the control of the public entity, specify the nature of the alleged dangerous condition and the manner in which you claim the condition caused the injury.

N/A.

8. If you allege a dangerous condition of public property, state the specific basis on which you claim that the public entity was responsible for the condition and the specific basis and date on which you claim that the public entity was given notice of the alleged dangerous condition. Statements such as "should have known" and "common knowledge" are insufficient.

N/A.

9. If you or any other party or witness consumed any alcoholic beverages, drugs or medications within twelve (12) hours before the incident forming the basis of the Claim, identify the person consuming the same and for each person (a) what was consumed (b) the quantity thereof (c) where consumed (d) the names and addresses of all persons present.

Under investigation. Information to be povided.

10. If you have received any money or thing of value for your injuries or damages from any person, firm or corporation, state the amounts received, the dates, names and addresses of the payors. Specifically list any policies of insurance, including policy number and claim number, from which benefits have been paid to you or to any person on your behalf, including doctors, hospitals or any person repairing damage to your property.

Under investigation. Information to be povided.

11. If any photographs, sketches, charts or maps were made with respect to anything which is the subject matter of the claim, state the date thereof, the names and addresses of the persons making the same and of the persons who have present possession thereof. Attach copies of any photographs, sketches, charts or maps.

Under investigation. Information to be povided.

12. If you or any of the parties to this action or any of the witnesses made any statements or admissions, set forth what was said; by whom said; date and place where said; and in whose presence, giving names and addresses of any persons having knowledge thereof.

Under investigation. Information to be povided.

13. State the total amount of your claim and the basis on which you calculate the amount claimed.

Under investigation. Information to be povided.

14. Provide copies of all documents, memoranda, correspondence, reports (including police reports), etc., which discuss, mention or pertain to the subject matter of this claim.

See attached.

15. Provide the names and addresses of all persons or entities against whom claims have been made for injuries or damages arising out of the incident forming the basis of this claim and give the basis for the claim against each.

Under investigation. Information to be povided.

PROPERTY DAMAGE CLAIMS

16. If your claim is for property damage, attach a description of the property damage and an estimate of the costs of repair. If your claim does not involve any claim for property damage, enter "None".

Under investigation. Information to be povided.

_____ **If your claim is for property damage only, initial here, proceed directly and sign the Certification.**

PERSONAL INJURY CLAIMS

17. Was any complaint made to the public entity or to any official or employee of the public entity. State the time and place of the complaint and the person or persons to whom the complaint was made.

Under investigation. Information to be povided.

18. Describe in detail, the nature, extent and duration of any and all injuries.

Under investigation. Information to be povided.

19. Describe in detail, any injury or condition claimed to be permanent.

Under investigation. Information to be povided.

20. If confined to any hospitals, state name and address of each and the dates of admission and discharge. Include all hospital admissions prior to and subsequent to the alleged injury and give the reason for each admission.

Under investigation. Information to be povided.

21. If x-rays were taken, state (a) the address of the place where each was taken (b) the name and address of the person who took them (c) the date when each was taken (d) what each disclosed (e) where and in whose possession they now are. Include x-rays, whether prior to or subsequent to the alleged injury forming the basis of the claim.

Under investigation. Information to be povided.

22. If treated by doctors, including psychiatrists or psychologists, state (a) the name and present address of each doctor (b) the dates and places where treatments were received (c) the nature of the treatment (d) the date of the last treatment or, if treatments are continuing, the schedule of continuing treatments. Provide true copies of all written reports rendered to you or about you by any doctors whom you propose to have testify on your behalf.

Under investigation. Information to be povided.

23. If you have any physical impairment which you allege is caused by the injury forming the basis of your claim and which is affecting your ordinary movements, hearing or sight, state in detail, the nature and extent of the impairment and what corrective appliances, support or device you use to overcome or alleviate the impairment.

24. If you claim that a previous injury has been aggravated or exacerbated, describe the injury and give the name and present address of each doctor who treated you for the condition, the period during which treatment was received and the cause of the previous injury. Specifically list any impairment, including use of eyeglasses, hearing aid or similar device, which existed at the time of the injury, forming the basis of the claim.

25. If any treatments, operation or other form of surgery in the future has been recommended to alleviate any injury or condition resulting from the incident which forms the basis of the claim, state in detail (a) the nature and extent of the treatment, operation or surgery (b) the purpose thereof and the results anticipated or expected (c) the name and address of the doctor who recommended the treatments, operation or surgery (d) the name and address of the doctor who will administer or perform the same (e) the estimated medical expenses to be incurred (f) the estimated length of time of treatments, operation or surgery, period of hospitalization and period of convalescence (g) all other losses or expenditures anticipated as a result of the treatments, operation or surgery and the approximate date.

Under investigation. Information to be povided.

26. Itemize any and all expenses incurred for hospitals, doctors, nurses, x-rays, medicines, care and appliances and indicate which expenses were paid by any insurance coverage.

Under investigation. Information to be povided.

27. If employed at the time of the alleged injury forming the basis of the claim state (a) the name and address of the employer (b) position held and the nature of the work performed (c) average weekly wages for the year prior to the injury (d) period of time lost from employment, giving dates (e) amount of wages lost, if any. List any sources of income continuation or replacement, including, but not limited to, worker's compensation, disability income, social security and income continuation insurance.

Under investigation. Information to be povided.

28. If other loss of income, profit or earnings is claimed, state (a) total amount of the loss (b) give a complete detailed computation of the loss (c) the nature and dates of loss.

Under investigation. Information to be povided.

29. If you are claiming lost wages state (a) the date that the employment began (b) the name and address of the employer (c) the position held and the nature of the work performed (d) the wages received during the past year.

Under investigation. Information to be povided.

DOCUMENT REQUEST: Produce all documents identified in your answers to the above questions.

See attached. Information to be povided.

CERTIFICATION

I hereby certify that the information provided is the truth and is the full and complete response to the questions, to the best of my knowledge.

11/21/16

Date

Signature of Claimant

NORTH PLAINFIELD POLICE — SUPPLEMENTARY INVESTIGATION REPORT

1.Complaint Number	2. Mun. Code	3. Phone Number	4. UCR	21. Prosecutor's Case Number	22. Department Case Number
I-N2016-021320	1814	908-769-2937			

5.Crime/Incident	5A. New Crime/Incident If Changed	23. Victim(s) New Address If Changed
10 - DISORDERLY	OBSTRUCTION	
		23a. Victim(s) Name

6A. New NJS	7. Date of Crime	Additional Value Stolen Property	40A. Currency	41A. Jewelry	42A. Furs
2C:29-1	08/27/2016		$0.00	$0.00	$0.00

43A. Clothing	44A. Auto	Miscellaneous
$0.00	$0.00	$0.00

46A. S.C.I.C	49A. Additional Technical Service-Agency	48A. Additional Stolen Property Value	47A. Add'l Recoverd Property Value
		$0.00	$0.00

51A. B.C. Radio	52A. B.C. Radio Cancel	53A. N.C.I.C.

57. Vehicle	58. Year	59. Make	60. Body Type	61. Color	62. Registration Number & State	62A. Serial Number or Identification

List Name Only of Previous Accused. Complete Information on New Accused; Include Additional Perpetrators: Suspects: Record all Developments Since Last Report: Explain Any Crime Change; List Additional Interviews of Victims: Persons Contacted: Witnesses: Evidence; Technical Services, Stolen Property: Recoverd Property; Court Action.

63. No. of Accused	63A. New Accused	64A. Adult	65A. Juvenile	66A. Status Crime	67A. Status Case	68A. UCR Status Month Yr.	69A. Date Cleared

70. Name	Address	71. Age	72. Sex	73. Race	74. DOB

********** PARTIES INVOLVED **********
ROLE: Arrested | NAME: LOPEZ-LOPEZ, SULY | HOME ADDRESS: 301 MAPLE AVENUE APT 2G3, NORTH PLAINFIELD NJ 07060 | HOME PHONE: [redacted] HOME ALT. PHONE: [redacted] | SEX: F | DOB: 05/14/1983 | AGE: 33 | RACE: WHITE | HAIR COLOR: BROWN | COMPLEXION: FAIR | HEIGHT: 5' 2" | WEIGHT: 140 | BUILD: MEDIUM

I responded to 155 Delacy Ave. to assist Ofc. Mazza who was calling for back-up after attempting to place an individual inside said residence under arrest. Upon arrival I met with Ofc. Mazza inside the residence at the bottom of a stairway and observed that his avenue to get upstairs was blocked by approximately 15 individuals ranging from children to adults. The male party that Ofc. Mazza wanted to arrest, later identified as Andres Valencia, ran upstairs after he attempted to arrest him and Ofc. Mazza was now unable to get to him with the parties blocking him.

At that time I asked all parties involved to come downstairs and leave the residence since we were now shutting down the party. As I was speaking to people who were walking outside, I began hearing some yelling and what appeared to be fighting upstairs. I ran upstairs to find Ofc. Mazza and Sgt. Perrone in a second floor bedroom attempting to place Valencia under arrest again. Valencia was clearly struggling with uniformed officers who were giving him loud clear demands that he was under arrest. As I attempted to assist in the arrest, the entire family of approximately 15-20 people converged in said room and cornered us.

As we attempted to remove his arms from in front of him and bring it behind him, several of the family members grabbed at our arms and attempted to even pull Valencia away from us. This went on for a few minutes with the family fighting our every efforts to arrest Valencia and blocking our way from exiting the room. One woman in particular, Stephany Bernal, was attempting to get at Valencia while holding her 9 month old baby girl. She was advised numerous times to please get out of the room with the baby but completely disregarded my commands. By doing this she was putting the baby in severe jeopardy of being harmed. At that time I asked dispatch to notify surrounding authorities to assist us in getting out of the room and placing parties under arrest for Obstruction, Assault and other criminal violations. Multiple jurisdictions which included, Watchung PD, Green Brook PD, Dunellen PD, Union County PD, Plainfield PD, Waren PD, and State Police were notified and responded to assist.

Once other officers from other jurisdictions arrived in the room, we were able to start removing people and making room to place Valencia under arrest. While attempting to place him under arrest, family members again barged into the room and began fighting with all police inside. At one point while...

75A. Name P.O. CANICA, DAVID	3314	78A. Date Report	79A. Reviewed By
Signature		08/28/2016	3707

Valencia was on the ground and officers were attempting to place him under arrest, a female, later identified as Suly Lopez-Lopez, began punching my arm as I was assisting the officers. At that point I grabbed her by her shirt, picked her up, and threw her onto a bed in the room. I immediately gave her loud clear verbal commands in both English and Spanish, to turn around and place her hands behind her back. She subsequently complied with my demands, turned over, and was placed under arrest.

After a struggle with several more family members, we were all finally able to exit the residence along with 3 arrested, which included, Valencia, Bernal, and Lopez-Lopez. We immediately placed them in our patrol cars, exited the area, and responded with those arrested to police hq's. Lopez was charged with the following:

Obstruction (DP)
Assault (DP)

She was served her copy of the summons for the aforementioned charges and released. A Use of Force Report was filed with this case. A property report was also filed for the video from my Body Worn Camera. (See other Ofc.'s reports for more details)

75A. Name P.O. CANICA, DAVID	3314	78A. Date Report	79A. Reviewed By
Signature		08/28/2016	

INVESTIGATION REPORT

263 SOMERSET STREET
908-769-2937
NORTH PLAINFIELD, NJ 07060

Municipal Code: 1814
ORI: NJ0181400

DEPARTMENT CASE NUMBER	MUN. CODE	PHONE NUMBER	UCR	DEPARTMENT ARREST NUMBER	
I-N2016-021320	1814	908-769-2937		16-641	

CRIME/INCIDENT	NJS	VICTIM NAME(Last Name, First Name, MI)	DOB
AGGRAVATED ASSAULT RESISTING ARREST ENDANGERING WELFARE OF	2C:12-1B 2C:29-2 2C:24-4	STATE OF NJ	

SSN NO.	AGE	SEX	RACE	ETHNICITY

DATE AND TIME	BETWEEN	HOUR	MONTH	DAY	YEAR	VICTIM'S HOME ADDRESS	PHONE
	☐	23:32	08	27	2016	263 SOMERSET STREET, NORTH PLAINFIELD NJ 07060	908-769-2937

CRIME/INCIDENT LOCATION	EMPLOYER	PHONE
155 DELACY AVENUE, NORTH PLAINFIELD NJ 07060		

MUNICIPALITY	COUNTY	CODE	PERSON REPORTING CRIME	DATE AND TIME
NORTH PLAINFIELD BORO	SOMERSET	1814	P.O. Mazza, Joseph	08/27/2016 23:32

TYPE OF PREMISES	WEAPONS - TOOLS	ADDRESS	PHONE
Dwelling		263 SOMERSET STREET, NORTH PLAINFIELD NJ 07060	908-769-2937

MODUS OPERANDI

VEHICLE	YEAR	MAKE	MODEL	BODY TYPE	COLOR	REG. PLATE - STATE	VIN	VEHICLE VALUE

VALUE STOLEN PROPERTY	CURRENCY	JEWELRY	FURS	CLOTHING	AUTO	MISC.

TOTAL VALUE STOLEN	TOTAL VALUE RECOVERED	TELETYPE ALARM	TECHNICAL SERVICES	TECHNICAL AGENCY
$0.00				

WEATHER	SIC	NIC	ASSISTING AGENCIES

NO. OF ACCUSED	ADULT	JUVENILE	STATUS CRIME	STATUS CASE	UCR STATUS	DATE CLEARED

NARRATIVE

********** PARTIES INVOLVED **********

ROLE: Arrested | NAME: BERNAL, STEPHANY | HOME ADDRESS: 401 RT22 WEST APT 22G, NORTH PLAINFIELD NJ 07060 | HOME PHONE: [redacted] | WORK ADDRESS: SUMMIT MEDICAL GROUP - 1 DIAMOND HILL ROAD, BERKELEY HEIGHTS NJ 07922 | WORK PHONE: [redacted] | SEX: F | DOB: 01/06/1992 | AGE: 24 | SSN: [redacted] | RACE: WHITE | HAIR COLOR: BROWN | COMPLEXION: FAIR | HEIGHT: 5' 3" | WEIGHT: 154 | DL#: [redacted] | DL EXP: 03/13/2017 | DL STATE: NJ

ROLE: Arrested | NAME: LOPEZ-LOPEZ, SULY | HOME ADDRESS: 301 MAPLE AVENUE APT 263, NORTH PLAINFIELD NJ 07060 | HOME PHONE: [redacted] | HOME ALT. PHONE: [redacted] | SEX: F | DOB: 05/14/1983 | AGE: 33 | RACE: WHITE | HAIR COLOR: BROWN | COMPLEXION: FAIR | HEIGHT: 5' 2" | WEIGHT: 140 | BUILD: MEDIUM

ROLE: Arrested | NAME: VALENCIA, ANDRES C | HOME ADDRESS: 401 RT22 WEST APT 22G, NORTH PLAINFIELD NJ 07060 | HOME PHONE: [redacted] | WORK ADDRESS: UNEMPLOYED - | SEX: M | DOB: 05/09/1987 | AGE: 29 | SSN: [redacted] | RACE: WHITE | HAIR COLOR: BLACK | COMPLEXION: MEDIUM | WEIGHT: 220 | DL#: [redacted] | DL EXP: 06/13/2016 | DL STATE: NJ

ROLE: Juvenile | NAME: VALENCIA, VALENTINA | HOME ADDRESS: 401 RT22 WEST, NORTH PLAINFIELD NJ 07060 | SEX: F | DOB: 11/02/2015 | AGE: 0 | RACE: WHITE

On Saturday, August 27, 2016 at approximately 23:32 hours I responded to 155 Delacy Avenue for a report of a loud party. This was the second time that I responded to this location for a loud party on this night. I spoke with Andres Valencia the first time for a loud front lawn party and advised him to bring the party inside. Upon my arrival, I could hear loud music and conversation coming from the rear of the yard. I walked to the backyard of the residence and observed approximately 10 people sitting in a circle speaking...

NAME	DATE OF REPORT	REVIEWED BY	SIGNATURE
P.O. MAZZA, JOSEPH 2024	08/28/2016	Cpl # 3707	

loudly, along with loud music playing from a speaker. I advised the group of people that I was called for another complaint of loud noise and asked them to turn the music off. I asked the group of individuals to go inside and inquired where the owner of the residence was. A female emerged from the back door and advised that she was the owner but only had a Columbian passport. I requested that she obtain her identification. She entered the residence but never returned. Moments later, Valencia exited from the rear of the residence. I asked Valencia if he lived in the residence, at which time he stated that he did. I requested that he provide me his identification in order for me to issue him a summons for the noise violation. Valencia stated he didn't have his identification on him and proceeded to walk back into the house. I advised him to step out of the residence to obtain his information at which time he walked toward the kitchen of the residence stating "I don't have to come outside".

I walked into the residence and was immediately blocked in the doorway by Stephanie Bernal. I approached Valencia in the kitchen and again asked for his identification at which time he advised me that I needed a permit to be in the house, and would not provide me his identification. I then pulled out my handcuffs and attempted to place Valencia under arrest for Obstruction administration of law. At this time Valencia broke free his arms and from my control and resisted his arrest. Bernal approached me, yelled "you can't lock him up" and pushed me. It was this time that I was attacked by approximately 40 people inside the residence. Valencia ran out of the kitchen and attempted to run upstairs. I tried to give chase, but I was pushed and pulled by numerous people in the kitchen and foyer. My gun belt was pulled and pushed as people were rushing me from giving chase to Valencia. I requested back up at this time. The residents in the home continually prevented me from reaching Valencia by pushing me and creating a wall of people at the base of the stairs.

At this time Sgt. Perrone, Ptl. Branco and Ptl. Canica responded. Many of the occupants in the house began to leave as the officers cleared the house. I then walked upstairs to place Valencia under arrest. I located Valencia hiding in the corner of a dark bedroom on the second floor. Valencia had his hands in his pockets and refused to remove them. I again attempted to handcuff Valencia, but was unsuccessful as he resisted arrest. During this incident, approximately 20 people, including Bernal (who was now holding her 9 month old child) rushed the bedroom to prevent me from arresting Valencia. Sgt. Perrone, Ptl. Canica and Ptl. Branco created a barrier between me and approximately 20 angry individuals.

It was at this time that we were trapped inside the second floor bedroom and would not be able to exit the residence with Valencia under arrest. I was able to place one handcuff on Valencia, but myself and Ptl. Branco could not place his other hand behind his back. He resisted our control by pushing off the wall and trying to maneuver his way out of my control. During the dispute the occupants of the house were continually trying to rush toward Valencia and failed to disperse after multiple commands were given to leave the room. Bernal was standing just outside the wall of people, holding her 9 month old child. Bernal would not accept that Valencia was being placed under arrest. Bernal was holding her child and assaulting Ptl. Canica. She held the child as a shield of immunity from physically removing her from the room. Bernal was advised multiple times to exit the room and failed to comply. By acting in this manner she placed her child in an extremely hazardous and dangerous situation. Bernal finally handed her child to another occupant, and then became more aggressive by assaulting Ptl. Canica as he was holding back the individuals. Moments later, Bernal stated that she wanted her child back. Her actions of requesting her child back into a tumultuous and violent situation, only reinforces her actions of endangering her child. It wasn't until Greenbrook P.D. and Watchung P.D. arrived that we were able to restore some order in the room.

Myself and Ptl. Branco again attempted to place Valencia under arrest, but he began to resist at a more aggressive stance. Valencia would not place his arms behind his back, and began to resist myself, Sgt. Perrone, Greenbrook P.D., and Ptl. Branco. The dispute ended on the floor where he was successfully handcuffed behind the back. It was during this dispute that multiple officers were attacked again by occupants of the house. Bernal and Suly Lopez-Lopez rushed the room again and began to assault police officers who were attempting to handcuff Valencia. Bernal was actively kicking officers who attempted to arrest Valencia. Sgt. Perrone and Ptl. Romasz were holding back Bernal from attacking police officers, as she was resisting her arrest. I then handcuffed Bernal behind the back and held her against the wall where she continued to fight my control.

With the assistance of Greenbrook P.D. and Watchung P.D., we were able to safely exit the second floor bedroom. Bernal was placed in the rear seat of unit #5 and transported to police HQ. At police HQ I contacted A/P McLaughlin and advised him of the above listed incident. McLaughlin authorized the following charges against Valencia: Hindering Apprehension 2C:29-3 3rd degree, Resisting Arrest by Flight 4th degree, and 2C:29-2 Resisting Arrest 3rd degree. The following charges were then

RANK	SIGNATURE OF OFFICER SUBMITTING REPORT	COMMAND	BADGE NUMBER
P.O. MAZZA, JOSEPH			2024

authorized for Bernal: 2C: 24-4 Endangering the Welfare of a Child 2nd degree, 2C:29-3 Hindering the Apprehension of Another 3rd degree, and 2C:12-1B Aggravated Assault on a Police Officer 3rd degree. Bernal and Valencia were both fingerprinted and photographed and given copies of their notice of first appearance. Bernal and Valencia were transported to the Somerset County Jail.

RANK	SIGNATURE OF OFFICER SUBMITTING REPORT	COMMAND	BADGE NUMBER
P.O.	MAZZA, JOSEPH		2024

NORTH PLAINFIELD POLICE

SUPPLEMENTARY INVESTIGATION REPORT

1.Complaint Number	2. Mun. Code	3. Phone Number	4. UCR	21. Prosecutor's Case Number	22. Department Case Number
I-N2016-021320	1814	908-769-2937			

5.Crime/Incident	5A. New Crime/Incident if Changed	23. Victim(s) New Address if Changed
NOIS - NOISE COMPLAINT		

6A. New NJS	7. Date of Crime	23a. Victim(s) Name
	08/27/2016	

Additional Value Stolen Property	40A. Currency	41A. Jewelry	42A. Furs
	$0.00	$0.00	$0.00

46A. S.C.I.C	49A. Additional Technical Service-Agency	48A. Clothing	44A. Auto	Miscellaneous
		$0.00	$0.00	$0.00

48A. Additional Stolen Property Value	47A. Add'l Recovered Property Value
$0.00	$0.00

51A. B.C. Radio	52A. B.C. Radio Cancel	53A. N.C.I.C.

57. Vehicle	58. Year	59. Make	60. Body Type	61. Color	62. Registration Number & State	62A. Serial Number or Identification

List Name Only of Previous Accused. Complete Information on New Accused; Include Additional Perpetrators: Suspects: Record all Developments Since Last Report: Explain Any Crime Change; List Additional Interviews of Victims; Persons Contacted; Witnesses; Evidence; Technical Services, Stolen Property; Recovered Property; Court Action.

63. No. of Accused	63A. New Accused	64A. Adult	65A. Juvenile	66A. Status Crime	67A. Status Case	68A. UCR Status Month Yr.	69A. Date Cleared

70. Name	Address	71. Age	72. Sex	73. Race	74. DOB

********** PARTIES INVOLVED **********

ROLE: Arrested | NAME: BERNAL, STEPHANY | HOME ADDRESS: 401 RT22 WEST APT 22G, NORTH PLAINFIELD NJ 07060 | HOME PHONE: [redacted] | WORK ADDRESS: SUMMIT MEDICAL GROUP - 1 DIAMOND HILL ROAD, BERKELEY HEIGHTS NJ 07922 | WORK PHONE: [redacted] | SEX: F | DOB: 01/06/1992 | AGE: 24 | SSN: [redacted] | RACE: WHITE | HAIR COLOR: BROWN | COMPLEXION: FAIR | HEIGHT: 5' 3" | WEIGHT: 154 | DL#: [redacted] | DL EXP: 03/13/2017 | DL STATE: NJ

ROLE: Arrested | NAME: LOPEZ-LOPEZ, SULY | HOME ADDRESS: 301 MAPLE AVENUE APT 263, NORTH PLAINFIELD NJ 07060 | HOME PHONE: [redacted] | HOME ALT. PHONE: [redacted] | SEX: F | DOB: 05/14/1983 | AGE: 33 | RACE: WHITE | HAIR COLOR: BROWN | COMPLEXION: FAIR | HEIGHT: 5' 2" | WEIGHT: 140 | BUILD: MEDIUM

ROLE: Arrested | NAME: VALENCIA, ANDRES C | HOME ADDRESS: 401 RT22 WEST APT 22G, NORTH PLAINFIELD NJ 07060 | HOME PHONE: [redacted] | WORK ADDRESS: UNEMPLOYED - | SEX: M | DOB: 05/09/1987 | AGE: 29 | SSN: [redacted] | RACE: WHITE | HAIR COLOR: BLACK | COMPLEXION: MEDIUM | HEIGHT: 6' 1" | WEIGHT: 220 | DL#: [redacted] | DL EXP: 06/13/2016 | DL STATE: NJ

On 8/27/16 at approximately 2332hrs I along with other units responded to 155 Delacy Avenue to assist Ptl. Mazza who was requesting back up on a noise complaint call.

Upon my arrival I entered the residence and observed numerous people throughout the house and Ptl. Mazza at the bottom of a staircase being blocked from going upstairs by numerous adults and juveniles. It should be noted that the individuals in the house were very loud and argumentative with Ptl. Mazza. At this time Ptl. Mazza advised me of what occurred and stated that the male who he was going to arrest fled upstairs. Numerous adults and juveniles occupied the staircase preventing us from going upstairs. We then began to order people to leave the party which some complied, which allowed some space for myself and Ptl. Mazza to make our way upstairs in an attempt to locate the male who fled, later identified as Andres C. Valencia.

We subsequently located Valencia hiding in a corner of a bedroom with the lights turned off. We approached Valencia and he was advised that he was under arrest. Valencia became very angry and refused to give us his hands so he could be handcuffed. While we had Valencia against the wall, the room filled up with people from the house who were screaming at us and interfering with the arrest. One of the...

75A. Name SGT. PERRONE, ENRICO 3707	78A. Date Report	79A. Reviewed By
Signature	08/27/2016	#3707

actors, Stephany Bernal was yelling at Ptl. Mazza and attempting to place herself in the middle of the arrest. It should be noted that Bernal was holding an infant and it was obvious she was using the infant to prevent us from removing her from the room. Ptl. Canioa, Branco, and Romask then entered the bedroom and were also assisting Ptl. Mazza with arresting Valencia but were unsuccessful. During this time we were backed into a corner of the bedroom facing approximately 15-20 adults and juveniles who were extremely angry and refusing to leave the room. At this time I advised dispatch to call Watchung Police for mutual aide as we were trapped in the corner of the bedroom.

While officers continued to attempt to handcuff Valencia, I spread my arms out and used my body to shield the officers due to the fact that their attention was on Valencia who refused to comply. During this time Green Brook PD and Watchung PD entered the room and assisted with removing people from the bedroom so we could make arrests. As Green Brook officers were attempting to handcuff Valencia, Bernal began to attack them at which time I grabbed her and held her back by her arms. Bernal then began kicking the Green Brook officers while their attention was still on Valencia. Once Bernal was handcuffed I then assisted the Green Brook officers who still were struggling with Valencia on the ground. I placed my knee on Valencia's lower back area in and attempt to keep him from moving while the other officers were attempting to handcuff him. Valencia continued to struggle and move around on the ground. I then placed my knee on his lower back area a second time and was able to get low enough that I grabbed his left wrist and assisted in handcuffing Valencia. I then exited the residence with all the other officers and responded back to HQ. It should be noted that I suffered minor injury/bruising to my left elbow area (see photo's of injuries).

76A. Name SGT. PERRONE, ENRICO	3707	76A. Date Report	76A. Reviewed By
Signature		08/27/2016	

NORTH PLAINFIELD POLICE

SUPPLEMENTARY INVESTIGATION REPORT

1.Complaint Number	2. Mun. Code	3. Phone Number	4. UCR	21. Prosecutor's Case Number	22. Department Case Number
I-N2016-021320	1814	908-769-2937			

5.Crime/Incident	5A. New Crime/Incident If Changed	23. Victim(s) New Address If Changed
NOIS - NOISE COMPLAINT	ENDANGERING WELFARE OF HINDERING APPREHENSION AGGRAVATED ASSAULT	263 SOMERSET STREET, NORTH PLAINFIELD NJ, 07060
		23a. Victim(s) Name STATE OF NEW JERSEY

6A. New NJS	7. Date of Crime	Additional Value Stolen Property	40A. Currency	41A. Jewelry	42A. Furs
2C:24-4 2C:29-3 2C:12-1B	08/27/2016		$0.00	$0.00	$0.00

43A. Clothing	44A. Auto	Miscellaneous
$0.00	$0.00	$0.00

46A. S.C.I.C	48A. Additional Technical Service-Agency	48A. Additional Stolen Property Value	47A. Addl Recoverd Property Value
		$0.00	$0.00

51A. B.C. Radio	52A. B.C. Radio Cancel	53A. N.C.I.C.

57. Vehicle	58. Year	59. Make	60. Body Type	61. Color	62. Registration Number & State	62A. Serial Number or Identification

List Name Only of Previous Accused. Complete Information on New Accused; Include Additional Perpetrators; Suspects; Record all Developments Since Last Report; Explain Any Crime Change; List Additional Interviews of Victims; Persons Contacted; Witnesses; Evidence; Technical Services, Stolen Property; Recovered Property; Court Action.

63. No. of Accused	63A. New Accused	64A. Adult	65A. Juvenile	66A. Status Crime	67A. Status Case	68A. UCR Status Month Yr.	69A. Date Cleared

70. Name	Address	71. Age	72. Sex	73. Race	74. DOB

********** PARTIES INVOLVED **********
ROLE: Arrested | NAME: BERNAL, STEPHANY | HOME ADDRESS: 401 RT22 WEST APT 22G, NORTH PLAINFIELD NJ 07060 | HOME PHONE: [redacted] | WORK ADDRESS: SUMMIT MEDICAL GROUP - 1 DIAMOND HILL ROAD, BERKELEY HEIGHTS NJ 07922 | WORK PHONE: [redacted] SEX: F | DOB: 01/06/1992 | AGE: 24 | SSN: [redacted] | RACE: WHITE | HAIR COLOR: BROWN | COMPLEXION: FAIR | HEIGHT: 5' 3" | WEIGHT: 154 | DL#: [redacted] DL EXP: 03/13/2017 | DL STATE: NJ

On Saturday, August 27, 2016, at approximately 11:30PM, multiple units responded to 155 Delacy Avenue for a noise complaint, which then turned into a large fight as party go-ers began to fight the officers on scene. The above listed arrestee, later identified as Stephany Bernal, was taken into custody for assisting in the assault of officers. While reviewing officer accounts, as well as body camera footage, it was deemed that Bernal used her nine (9) month old daughter, Valentina Valencia, as a shield to prevent officers from affecting the arrest of her husband, Andres Valencia. On the video, you can clearly see Bernal holding her daughter, while punching officers, and even using the arm she was holding the child with, to push officers away. The baby was clearly upset and distressed by the activity in the room. Bernal was told by multiple officers to remove the child from the room, as the number of people, and the volatility of the situation was not a safe place for a child to be. Eventually, the child was handed over to another attendee and was removed from the room. Bernal was subsequently arrested for Aggravated Assault of a Police Officer, Hindering Apprehension of Another, Endangering the Welfare of a Child.

DCP&P, screener Wendy Lopez (#1567) was notified and DCP&P workers Ferguson and Audu responded headquarters to speak with both parents. Bernal advised the child was left with her mother, Zoraida Ramos (153 Delacy Avenue North Plainfield, NJ).

75A. Name P.O. ROMASZ, SABRINA	9551	78A. Date Report	79A. Reviewed By
Signature S. Romasz		08/28/2016	#3707

NORTH PLAINFIELD POLICE — **SUPPLEMENTARY INVESTIGATION REPORT**

1.Complaint Number	2. Mun. Code	3. Phone Number	4. UCR	21. Prosecutor's Case Number	22. Department Case Number
I-M2016-021320	1814	908-769-2937			

5.Crime/Incident	5A. New Crime/Incident if Changed	23. Victim(s) New Address if Changed
NOIS - NOISE COMPLAINT	RESISTING ARREST HINDERING APPREHENSION	23a. Victim(s) Name

6A. New NJS	7. Date of Crime	Additional Value Stolen Property	40A. Currency	41A. Jewelry	42A. Furs
2C:29-2 2C:29-3	08/27/2016	43A. Clothing	44A. Auto	Miscellaneous	

46A. S.C.I.C	49A. Additional Technical Service-Agency	48A. Additional Stolen Property Value	47A. Add'l Recovered Property Value

51A. B.C. Radio	52A. B.C. Radio Cancel	53A. N.C.I.C.

57. Vehicle	58. Year	59. Make	60. Body Type	61. Color	62. Registration Number & State	62A. Serial Number or Identification

List Name Only of Previous Accused. Complete Information on New Accused; Include Additional Perpetrators; Suspects; Record all Developments Since Last Report: Explain Any Crime Change; List Additional Interviews of Victims; Persons Contacted; Witnesses; Evidence; Technical Services, Stolen Property; Recovered Property; Court Action.

63. No. of Accused	63A. New Accused	64A. Adult	65A. Juvenile	66A. Status Crime	67A. Status Case	68A. UCR Status Month Yr.	69A. Date Cleared

70. Name	Address	71. Age	72. Sex	73. Race	74. DOB

On August 27, 2016 at approximately 11:35 PM I responded to 155 Delacy Ave. to assist Ofc. Mazza who had called for back up. Upon arrival Ofc. Mazza, Ofc. Canica and Sgt. Perone were attempting to clear people out of the residence. I observed numerous people shouting and screaming at the officers and blocking their path from getting to a male, later identified as Andres Valencia, that Ofc. Mazza was attempting to place under arrest.

At this time I began asking all parties to leave the residence. As people began to move aside Ofc. Mazza and Sgt. Perone were able to get upstairs. At that time I heard screaming and yelling upstairs. I ran upstairs and observed Ofc. Mazza, Ofc. Canica and Sgt. Perrone attempting to place Valencia under arrest while other parties were interfering and attempting to prevent the arrest. Valencia was resisting with officers who were giving him clear commands that he was under arrest. I attempted to assist the officers with the arrest and at this time approximately 15-20 people again interfered and were preventing officers from making the arrest and cornering us.

Several people were grabbing, pulling and punching us. One of the women who was interfering in the arrest was Stephany Bernal, who was doing so while holding a 9 month old baby in her arms. Ms. Bernal was advised numerous times to take the baby out of the room but disregarded these commands and kept interfering with the arrest. At that time I asked dispatch to notify surrounding authorities for assistance. Multiple jurisdictions responded, including Watchung PD, Green Brook PD, Dunellen PD, Union County PD, Plainfield PD, Warren PD, and State Police.

Once the other jurisdictions arrived we were able remove people from the room. As we attempted to place Mr. Valencia under arrest people started to enter the room and interfere with the arrest again by fighting, pushing and shoving us. Two of the women who were interfering and fighting with us and refused to leave the room were Suly Lopez-Lopez and Stephany Bernal. Both were placed under arrest. At this time we were eventually able to place Mr. Valencia under arrest.

I sustained a minor scrape to my left elbow which was logged into evidence as JM-2

A Use of Force Report was filed with this case. A property report was also filed for the video from my Body Worn Camera. (See other Ofc.'s reports for more details).

76A. Name P.O. BRANCO, HENRY	0581	78A. Date Report	79A. Reviewed By
Signature		08/28/2016	3707

NORTH PLAINFIELD POLICE

ARREST REPORT

Identification Number

1. Complaint Number	2. Mun. Code	3. Phone Number	4. UCR	5. Prosecutor's Case Number	6. Criminal Case Number
I-N2016-021320	1814	908-769-2937			

7. Name Last	First	Middle	8. Phone	9. Alias-Nickname
VALENCIA	ANDRES	C	[redacted]	

10. Full Address: 401 RT22 WEST APT 22C, NORTH PLAINFIELD NJ 07060

11. Place of Birth: COLOMBIA

12. Date of Birth: 05/09/1987

13. Age	14. Sex	15. Race	15(A). Ethnicity	16. Height	17. Weight	18. Hair	19. Eyes	20. Complexion	21. Marital Status
29	M	WHITE	HISPANIC	6' 1"	220 lb	BLK	BRO	MED	Married

22. Other Descriptive Information: NONE

22-A. FBI #:

22-B. SBI #:

23. Driver's License Number: [redacted]

24. Employer / School: UNEMPLOYED

25. Occupation / Grade: UNEMPLOYED

26. Social Security Number: [redacted]

27. Employer / School Address:

28. Employer / School Phone:

DETAILS OF ARREST

29. Arrest Date	30. Time	31. Location of Arrest	32. Municipal Code	Warrant / Summons No.
8/27/2016	23:32	155 DELACY AVENUE, NORTH PLAINFIELD NJ 07060	1814	

33. Crime	34. N.J.S. Statute	35. Arresting Officer
RESISTING ARREST	2C:29-2	P.O. MAZZA, JOSEPH 2024

36. Complainant's Name and Address: P.O. Mazza, Joseph 263 SOMERSET STREET, NORTH PLAINFIELD NJ 07060

37. Phone Number: 908-769-2937

38. Crime Date	39. Time	40. Location of Crime	41. Municipal Code
8/27/2016	23:32	155 DELACY AVENUE, NORTH PLAINFIELD NJ 07060	1814

42. Arrest Type	43. Juvenile Status	44. Code	45. Constitutional Rights - By Whom	46. How Responded
ON P.C			N/A	N/A

47. Own	48. Multiple	49. Other	50. Printed	51. Photo	52. Prev. Rec.	53. UCR A.S.R. Reported Month, Yr.
		16-451	YES	B224		

54. Vehicle Information - VIN - Year - Make - Body Type - Color - Registration Number & State - Other Descriptive Information -

BAIL HEARING

55. Date	56. Court	57. Judge/Authorized Person
8/28/2016	SOMERSET COUNTY SUPERIOR COURT	

58. Bail Amount	59. Results of Hearing	60. Code	61. Place Committed/Detained
			NPPD CELL BLOCK A

FINAL RESULTS

62. Date	63. Court	64. Judge

65. Verdict	66. Code	67. Disposition	68. Date	69. Code
		TOT SOJ	8/28/2016	

JUVENILE INFORMATION

70. Parent/Guardian Contacted By	71. Date	72. Time	73. Released To:	Relationship

74. Full Address - Number - Street - City - State - Zip Code - Municipality

75. Date	76. Time	77. Phone Number

78. Parent/Guardian	79. Full Address - Number - Street - City - State - Zip Code - Municipality	80. Phone Number

81.-89. Narrative / Add'l Charges

Above individual was arrested for resisting arrest. Subject was handcuffed behind the back (double locked). Subject was transported in the rear seat of a Watchung P.D. unit..

Name:	91. Badge Number	92. Completed	93. Date of Report	94. Reviewed By
P.O. MAZZA, JOSEPH	2024		Aug 28, 2016	3707
90. Signature				

NORTH PLAINFIELD POLICE

ARREST REPORT

Identification Number

1. Complaint Number	2. Mun. Code	3. Phone Number	4. UCR	5. Prosecutor's Case Number	6. Criminal Case Number
I-N2016-021320	1814	908-769-2937			

7. Name Last	First	Middle	8. Phone	9. Alias-Nickname
BERNAL	STEPHANY		[redacted]	

10. Full Address: 401 RT22 WEST APT 22G, NORTH PLAINFIELD NJ 07060

11. Place of Birth: NEW YORK

12. Date of Birth: 01/06/1992

13. Age	14. Sex	15. Race	16(A). Ethnicity	16. Height	17. Weight	18. Hair	19. Eyes	20. Complexion	21. Marital Status
24	F	WHITE	HISPANIC	5' 3"	154 lb	BRO	BRO	FAR	Married

22. Other Descriptive Information: TATTOO LEFT SHOULDER

22-A. FBI #:

22-B. SBI #:

23. Driver's License Number: [redacted]

24. Employer / School: SUMMIT MEDICAL GROUP

25. Occupation / Grade: MEDICAL ASST

26. Social Security Number: [redacted]

27. Employer / School Address: 1 DIAMOND HILL ROAD , BERKELEY HEIGHTS, NJ 07922

28. Employer / School Phone: [redacted]

DETAILS OF ARREST

29. Arrest Date	30. Time	31. Location of Arrest	32. Municipal Code	Warrant / Summons No.
8/27/2016	23:32	155 DELACY AVENUE, NORTH PLAINFIELD NJ 07060	1814	

33. Crime	34. N.J.S. Statute	35. Arresting Officer
ENDANGERING WELFARE OF CHILDREN	2C:24-4	P.O. ROMASE, SABRINA 9551

36. Complainant's Name and Address: STATE OF NEW JERSEY 263 SOMERSET STREET, NORTH PLAINFIELD NJ 07060

37. Phone Number: 908-769-2937

38. Crime Date	39. Time	40. Location of Crime	41. Municipal Code
8/27/2016	23:32	155 DELACY AVENUE, NORTH PLAINFIELD NJ 07060	

42. Arrest Type	43. Juvenile Status	44. Code	45. Constitutional Rights - By Whom	46. How Responded
On View			N/A	N/A

47. Own	48. Multiple	49. Other	50. Printed	51. Photo	52. Prev. Rec.	53. UCR A.S.R. Reported Month, Yr.
		16-463	YES	16-8223		

54. Vehicle Information - VIN - Year - Make - Body Type - Color - Registration Number & State - Other Descriptive Information

BAIL HEARING

55. Date	56. Court	57. Judge/Authorized Person
8/28/2016		AP MCLAUGHLIN

58. Bail Amount	59. Results of Hearing	60. Code	61. Place Committed/Detained
			NPPD ROOM 107

FINAL RESULTS

62. Date	63. Court	64. Judge
8/28/2016		AP MCLAUGHLIN

65. Verdict	66. Code	67. Disposition	68. Date	69. Code
		TOT SCJ	8/28/2016	

JUVENILE INFORMATION

70. Parent/Guardian Contacted By	71. Date	72. Time	73. Released To:	Relationship

74. Full Address - Number - Street - City - State - Zip Code - Municipality

75. Date	76. Time	77. Phone Number

78. Parent/Guardian	78. Full Address - Number - Street - City - State - Zip Code - Municipality	80. Phone Number

81.-89. Narrative / Addl Charges

Subject was handcuffed and transported in the rear of unit #5. Subject had her left hand cuffed to the bench for the duration of paperwork. Subject was also charged with Hindering Apprehension of Another (3rd Degree) 2C:29-3 and Aggravated Assault of a Police Officer (3rd Degree) 2C: 12-1b. The Child Endangerment charge was 2nd Degree offense. Defendant was given her NOFA and TOT SCJ.

90. Name: P.O. ROMASE, SABRINA Signature: S. Romase	91. Badge Number: 9551	92. Completed	93. Date of Report: Aug 28, 2016	94. Reviewed By: # 3707

NORTH PLAINFIELD POLICE

SUPPLEMENTARY INVESTIGATION REPORT

1. Complaint Number	2. Mun. Code	3. Phone Number	4. UCR	21. Prosecutor's Case Number	22. Department Case Number
I-N2016-021320	1814	908-769-2937			

5. Crime/Incident	5A. New Crime/Incident if Changed	23. Victim(s) New Address if Changed
5 - ASSAULT	OBSTRUCTION	263 SOMERSET STREET, NORTH PLAINFIELD NJ, 07060

6A. New NJS	7. Date of Crime	23a. Victim(s) Name			
2C:29-1	08/27/2016	STATE OF NJ			
		Additional Value Stolen Property	40A. Currency	41A. Jewelry	42A. Furs
			$0.00	$0.00	$0.00
		43A. Clothing	44A. Auto	Miscellaneous	
		$0.00	$0.00	$0.00	

45A. S.C.I.C.	49A. Additional Technical Service Agency	48A. Additional Stolen Property Value	47A. Addl Recovrd Property Value
		$0.00	$0.00

51A. B.C. Radio	52A. B.C. Radio Cancel	53A. N.C.I.C.

57. Vehicle	58. Year	59. Make	60. Body Type	61. Color	62. Registration Number & State	62A. Serial Number or Identification

List Name Only of Previous Accused. Complete Information on New Accused. Include Additional Perpetrators, Suspects. Record all Developments Since Last Report. Explain Any Crime Change; List Additional Interviews of Victims, Persons Contacted, Witnesses, Evidence, Technical Services, Stolen Property, Recovered Property, Court Action.

63. No. of Accused	63A. New Accused	64A. Adult	65A. Juvenile	66A. Status Crime	67A. Status Case	68A. UCR Status Month Yr	69A. Date Cleared

70. Name	Address	71. Age	72. Sex	73. Race	74. DOB

********** PARTIES INVOLVED **********

ROLE: Suspect | NAME: GUTIERREZ-FLORES, MANUEL F | HOME ADDRESS: 155 DELACY AVENUE, NORTH PLAINFIELD NJ 07060 | HOME PHONE: [redacted] | SEX: M | DOB: 11/22/1987 | AGE: 28 | RACE: WHITE | HAIR COLOR: BLACK | COMPLEXION: LIGHT | HEIGHT: 5' 8" | WEIGHT: 200 | BUILD: STOCKY

ROLE: Suspect | NAME: CANO, EDGAR | HOME ADDRESS: 401 RT22 WEST APT 48B, NORTH PLAINFIELD NJ 07060 | SEX: M | DOB: 12/18/1965 | AGE: 50 | SSN: [redacted] | RACE: WHITE | HAIR COLOR: BLACK | COMPLEXION: FAIR | HEIGHT: 5' 8" | WEIGHT: 200 | BUILD: LARGE | DL#: [redacted] | DL STATE: NJ

ROLE: Suspect | NAME: ZAMUDIO, BLANCA | HOME ADDRESS: 401 RT22 WEST BLDG 48B, NORTH PLAINFIELD NJ 07060 | SEX: F | DOB: 11/30/1959 | AGE: 56 | SSN: [redacted] | RACE: WHITE | HAIR COLOR: BLACK | COMPLEXION: LIGHT | HEIGHT: 5' 4" | WEIGHT: 140 | BUILD: MEDIUM | DL#: [redacted] | DL STATE: NJ

August 29, 2016, I was tasked with investigating this case.

According to the initial reports, Ptl Mazza was dispatched to 155 Delacy Ave on a report of a noise complaint. After arriving on the scene, Ptl Mazza attempted to obtain a form of identification from Andres Valencia, who claimed to be a resident of the house, so that he could issue Valencia a summons for the noise violation. Valencia walked away from Ptl Mazza and entered the residence. When Ptl Mazza asked Valencia to stop outside, Valencia stated, "I don't have to come outside." Ptl Mazza then entered the house after Valencia, at which point in time numerous party goers attempted to obstruct him from arresting Valencia. Other officers, including officers from surrounding jurisdictions were called in to help with the scene.

By the end of the incident Stephany Bernal, Sully Lopez-Lopez and Andres Valencia were arrested and charged (see other officers' reports for details).

I spoke with Sgt Perrone and Ptl Mazza regarding this case. They advised me that there were other individuals that assisted in the obstruction of Valencia's arrest, but due to the volatility of the scene, they could not be arrest at the time. I reviewed the Body Worn Cameras that the officers' involved were wearing during the incident. The following is a summary of the additional suspects' actions during the incident:

Blanca Zamudio: In the beginning of the incident, I observed Zamudio trying to block Ptl Mazza's

75A. Name DET. VONSPRECKELSEN, MICHAEL	6955	78A. Date Report	79A. Reviewed By
Signature MV		08/29/2016	Flynn #2779

path towards Valencia by placing her hands out forward in an attempt to prevent Ptl Mazza from going through the house. I also observed on several occasions during the incident, Zamudio attempting to step the officers on the scene from arresting Valencia, by either grabbing onto or getting in the way of the officers on the scene. Prior to Valencia's arrest, Zamudio had to be physically removed from the room that Valencia was in.

Edgar Cano: From the beginning of the incident, Cano can be seen physically obstructing Ptl Mazza's path towards Valencia, by positioning himself between Ptl Mazza and Valencia. He can also be heard arguing with Ptl Mazza and other officers about the arrest.

Manual Gutierrez-Flores: As Ptl Mazza is trying to walk up the stairs after Valencia, Gutierrez-Flores can be seens standing in the way. He has his hands on the handrails and refused to move from Ptl Mazza's path. Prior to other officer's arrival, Ptl Mazza tried several times to move past Gutierrez-Flores on the stairs, but he refused to step aside preventing Ptl Mazza from gaining access to the second floor of the residence.

See the officers' Body Worn Camera videos for details.

After I printed still shot photos of the incident, Det Domizi and I responded to 155 Delacy Ave to speak with the residents. We were able to obtain the names of the suspects pictured. After confirming the identity of Zamudio and Cano through their NJMVC Driver's license photo, they were mailed complaint summonses for Obstruction (summons#: Zamudio: S2016-000286-1814 and Cano: S2016-000287-1814). Det Domizi and I met with Gutierrez-Flores in person. After his identity was confirmed, he was handed a complaint summons for Obstruction (Summons# S2016-000288-1814).

This case is closed.

78A. Name DET. VONSPRECKELSEN, MICHAEL	6955	78A. Date Report	78A. Reviewed By
Signature		08/29/2016	

CASE NUMBER 16-21320

USE OF FORCE REPORT

A. Incident Information

Date	Time	Day of Week	Location
8/27/16	23:32	Saturday	155 Delacy Avenue

Type of Incident:
- [X] Crime in Progress
- [ ] Suspicious Person
- [ ] Other Type of Call [Specify _____]
- [ ] Domestic
- [ ] Traffic Violation
- [ ] Other Dispute

Type of Person:
- [ ] Under the Influence
- [ ] Other Unusual Condition [Specify _____]

[Check only if unusual condition in person exists]

B. Suspect(s) Information (only those persons who were subjects of police use of force)

Name (Last, First, Middle)	Arrest?	Charges(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
Valensia, Andres C	Y	2C29-3 2C29-2	M	W	29	NO	NO	NO

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Suspect(s) Resistance (check all that apply)

Suspect...	Suspect # 1	Suspect # 2	Suspect # 3
...resisted Police Officer control	X		
...physical threat/attack on Police Officer	X		
...threatened/attacked Police Officer with blunt object			
...threatened/attacked Police Officer with knife/cutting object			
...threatened/attacked Police Officer with motor vehicle			
...threatened Police Officer with firearm			
...fired at Police Officer			
...Other [Specify _____]			

D. Type of Force Used (check all that apply)

Type of Force Used:
- [X] Compliance Hold
- [ ] Chemical/Natural Agent
- [ ] Strike/Use Baton or Other Object
- [ ] Hands/Fists
- [ ] Kicks/Feet
- [ ] Canine

Other Force [Specify _____]

Firearms Discharge:
- [ ] Intentional
- [ ] Accidental

Number of Shots Fired ____

Number of Hits ____ [Use 'UNK' if unknown]

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
Branco, Henry	0581	YES	YES	YES	NO

Signature:

Print Supervisor Name: Sgt. Perrone

Police Officer Assignment: PATROL

Supervisor Signature: # 3707

(6/2000)

CASE NUMBER 16-21320

USE OF FORCE REPORT

A. Incident Information

Date	Time	Day of Week	Location
8/2716	23:32	Saturday	155 Delroy Ave

Type of Incident: [X] Crime in Progress [ ] Domestic [ ] Suspicious Person [ ] Traffic Violation [ ] Other Type of Call [Specify ____] [ ] Other Dispute

Type of Person: [ ] Under the Influence [ ] Other Unusual Condition [Specify ____]

[Check only if unusual condition in person exists]

B. Suspect(s) Information (only those persons who were subjects of police use of force)

Name (Last, First, Middle)	Arrest?	Charges(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
Valencia, Andres C.	Y	2C:29-1 2C:29-2	M	W	29	NO	No	NO

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Suspect(s) Resistance (check all that apply)

Suspect...	Suspect # 1	Suspect # 2	Suspect # 3
...resisted Police Officer control	[X]	[ ]	[ ]
...physical threat/attack on Police Officer	[ ]	[ ]	[ ]
...threatened/attacked Police Officer with blunt object	[ ]	[ ]	[ ]
...threatened/attacked Police Officer with knife/cutting object	[ ]	[ ]	[ ]
...threatened/attacked Police Officer with motor vehicle	[ ]	[ ]	[ ]
...threatened Police Officer with firearm	[ ]	[ ]	[ ]
...fired at Police Officer	[ ]	[ ]	[ ]
...Other [Specify ____]	[ ]	[ ]	[ ]

D. Type of Force Used (check all that apply)

Type of Force Used: [X] Compliance Hold [ ] Hands/Fists [ ] Chemical/Natural Agent [ ] Kicks/Feet [ ] Strike/Use Baton or Other Object [ ] Canine

Other Force [Specify Placed my knee in his lower back area to hold him down]

Firearms Discharge: [ ] Intentional [ ] Accidental

Number of Shots Fired ____

Number of Hits ____ [Use 'UNK' if unknown]

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
Perrone, Enrico	3707	YES	YES	Yes	NO

Signature: [signature]

Police Officer Assignment: PATROL Sergeant

Print Supervisor Name: Enrico Perrone

Supervisor Signature: [signature] #3707

(6/2000)

CASE NUMBER 16-21320

USE OF FORCE REPORT

A. Incident Information

Date	Time	Day of Week	Location
08/27/2016	23:32	Saturday	155 Delacy Avenue

Type of Incident:
- [X] Crime in Progress
- [ ] Suspicious Person
- [X] Other Type of Call [Specify Loud party]
- [ ] Domestic
- [ ] Traffic Violation
- [ ] Other Dispute

Type of Person:
- [X] Under the Influence
- [ ] Other Unusual Condition [Specify]

[Check only if unusual condition in person exists]

B. Suspect(s) Information (only those persons who were subjects of police use of force)

Name (Last, First, Middle)	Arrest?	Charges(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
Andres Valencia	Y	Resisting Arrest	M	W	29	No	YES	NO
Stephanie Bernal	Y	Aggt. Assault on PO	F	W	24	NO	NO	NO

[Check yes only for injury/hospital resulting from police use of force]

C. Level of Suspect(s) Resistance (check all that apply)

Suspect...	Suspect # 1	Suspect # 2	Suspect # 3
...resisted Police Officer control	X	X	
...physical threat/attack on Police Officer		X	
...threatened/attacked Police Officer with blunt object			
...threatened/attacked Police Officer with knife/cutting object			
...threatened/attacked Police Officer with motor vehicle			
...threatened Police Officer with firearm			
...fired at Police Officer			
...Other [Specify]			

D. Type of Force Used (check all that apply)

Type of Force Used:
- [X] Compliance Hold
- [ ] Chemical/Natural Agent
- [ ] Strike/Use Baton or Other Object
- [ ] Hands/Fists
- [ ] Kicks/Feet
- [ ] Canine

Other Force [Specify]

Firearms Discharge:
- [ ] Intentional
- [ ] Accidental

Number of Shots Fired ____

Number of Hits ____ [Use 'UNK' if unknown]

E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
Mazza, Joseph Vincent	2024	YES	YES	YES	NO

Signature:

Police Officer Assignment: Patrol

Print Supervisor Name: SGT. PERRONE

Supervisor Signature: #3707

(6/2000)

GREEN BROOK POLICE
GREEN BROOK, NJ
Incident Report #16197837

Approved for Public View | Date/Time Printed Wed Sep 21 09:12:36 EDT 2016 By wedwards

Case Title	Location
ASSIST POLICE DEPT	155 DELACY AVE
Date/Time Reported	**Date/Time Occurred**
08/27/2016 23:49:29	08/27/2016 23:49:00 to 08/27/2016 23:49:00
Incident Type/Offense	
ASSIST - OTHER AGENCIES (GBP-09)	

Persons

	Role	Name	Sex	Race	Age	DOB	Phone	Address
1	INVOLVED PARTY	VALENCIA, ANDRES C	MALE	WHITE	29	05/09/1987	(home) (cell) [redacted]	401 RT 22 WEST NORTH PLAINFIELD , NJ
							(home) (cell)	

Offenders

	Status	Name	Sex	Race	Age	DOB	Phone	Address
							(home) (cell)	
							(home) (cell)	

Vehicles

Role	Type	Year	Make	Model	Color	Reg #	State

Stolen $	Rec Code	Date Rec	Rec $	Rec By

Property

	Class	Description	Make	Model	Serial #	Value

Narrative

On 08/27/2016 at approximate 2349 I was dispatched with all surrounding towns as well as the NJSP to the intersection of Summit and Delacy to assist North Plainfield police department. Dispatch relayed officer were pinned down in room within the house that had approximately 20 people actively fighting with them on the second floor. I then arrived on location, and entered the house. As I entered the second story room, I observed multiple individuals inside the room. The room was then cleared, and I attempted to help gain control of combatant Andres Valencia with North Plainfield PD. Valencia was actively resisting the police. Valencia then attempted to pull away from myself and other officers. While doing so Valencia was only

(Continued on next page)

Reporting Officer	Reviewing Officer	Approving Officer
OFC JONATHAN CAMP (8201) (08/28/2016 19:25:51)	SGT GREGORY VICTOR (92902) (08/31/2016 22:09:14)	LT HANS CASE (11448) (09/02/2016 12:38:43)

GREEN BROOK POLICE
GREEN BROOK, NJ
Incident Report #16197837

APPROVED FOR PUBLIC VIEW — Date/Time Printed: Wed Sep 21 09:12:36 EDT 2016 by WCOWARD

Case Title	Location
ASSIST POLICE DEPT	155 DELACY AVE
Date/Time Reported	**Date/Time Occurred**
08/27/2016 23:49:29	08/27/2016 23:49:00 to 08/27/2016 23:49:00
Incident Type/Offense	
ASSIST - OTHER AGENCIES (GBP-09)	

Narrative (Continued from page 1)

partially handcuffed with the cuffs attached to his right hand. We then attempted to take Valencia to the ground, and he continued to resist. I then conducted a strike with my expandable baton to the upper arm. Valencia then attempted to push off the bed. At this time I conducted leg strikes in attempt to bring Valencia to the ground. With the help of other officers we were able to bring Valencia to the ground, and gain positive control. Valencia was then handcuffed, and removed from the house. Valencia was then transferred to North Plainfield police department without incident.

Reporting Officer	Reviewing Officer	Approving Officer
OFC JONATHAN CAMP (8201) (08/28/2016 19:25:51)	SGT GREGORY VICTOR (92902) (08/31/2016 22:09:14)	LT HANS CASE (11448) (09/02/2016 12:38:43)

GREEN BROOK POLICE
GREEN BROOK, NJ
Supplementary Report #16197837/2

Approved For Public View | Date/Time Printed Wed Sep 21 09:13:07 EDT 2016 By: ajdowd

Case Title	Location
ASSIST POLICE DEPT	155 DELACY AVE
Date/Time Reported	**Date/Time Occurred**
08/27/2016 23:49:29	08/27/2016 23:49:00 to 08/27/2016 23:49:00
Incident Type/Offense	
ASSIST - OTHER AGENCIES (GBP-09)	

Persons

	Role	Name	Sex	Race	Age	DOB	Phone	Address
1.	INVOLVED PARTY	VALENCIA, ANDRES C	MALE	WHITE	29	05/09/1987	(home) (cell) [redacted]	401 RT 22 WEST NORTH PLAINFIELD , NJ
							(home) (cell)	

Offenders

	Status	Name	Sex	Race	Age	DOB	Phone	Address
							(home) (cell)	
							(home) (cell)	

Vehicles

Role	Type	Year	Make	Model	Color	Reg #	State

Stolen $	Rec Code	Date Rec	Rec $	Rec By

Property

	Class	Description	Make	Model	Serial #	Value

Narrative

On the above date and time, I Ofc. Stratton responded to 155 Delacy Ave in North Plainfield for mutual aid, along with all surrounding towns and State Police, for a large party with numerous individuals fighting officers on the second floor. I entered the house responded to the second floor and was handed a male individual now known to me as Andres C. Valencia to guide down the stairs who was being uncooperative. I expanded my expandable straight baton and performed a compliance hold utilizing the baton. I then guided Valencia down the stairs and out of the house where he was transferred into North Plainfield's custody.

Reporting Officer	Reviewing Officer	Approving Officer
OFC RANDY STRATTON (85999) (08/28/2016 19:33:25)	SGT GREGORY VICTOR (92902) (08/29/2016 02:42:21)	LT HANS CASE (11448) (08/29/2016 19:10:47)

GREEN BROOK POLICE
GREEN BROOK, NJ
Supplementary Report #16197837/3

Approved For Public View | Date/Time Printed: Wed Sep 21 08:13:25 EDT 2016 By: wcoward

Case Title	Location
ASSIST POLICE DEPT	155 DELACY AVE
Date/Time Reported	**Date/Time Occurred**
08/27/2016 23:49:29	08/27/2016 23:49:00 to 08/27/2016 23:49:00
Incident Type/Offense	
ASSIST - OTHER AGENCIES (GBP-09)	

Persons

	Role	Name	Sex	Race	Age	DOB	Phone	Address
1	INVOLVED PARTY	VALENCIA, ANDRES C	MALE	WHITE	29	05/09/1987	(home) (cell) [redacted]	401 RT 22 WEST NORTH PLAINFIELD , NJ
							(home) (cell)	

Offenders

	Status	Name	Sex	Race	Age	DOB	Phone	Address
							(home) (cell)	
							(home) (cell)	

Vehicles

Role	Type	Year	Make	Model	Color	Reg #	State

Stolen $	Rec Code	Date Rec	Rec $	Rec By

Property

Class	Description	Make	Model	Serial #	Value

Narrative

On 08/27/2016 at approximate 2349, I was dispatched with all surrounding towns as well as the state police to 155 Delacy Ave, North Plainfield NJ to assist North Plainfield police department. Dispatch relayed to all units that they had approximately 20 people in a house actively fighting with police on the second floor of the residence. I arrived on scene, and entered the residence. I responded to the second floor entered the room and observed multiple individuals inside the room. The room was then cleared by officers, and we attempted to help gain control of combatant Andres Valencia who was partially handcuffed to his right hand and actively resisting officers. Valencia was then taken to the ground while still resisting.

(Continued on next page)

Reporting Officer	Reviewing Officer	Approving Officer
OFC GARY MAURER (54303) (08/28/2016 22:47:58)	SGT GREGORY VICTOR (92902) (08/29/2016 02:41:16)	LT HANS CASE (11448) (08/29/2016 19:40:23)

GREEN BROOK POLICE
GREEN BROOK, NJ
Supplementary Report #16197837/3

Approved for Public View | Date/Time Printed: Wed Sep 21 09:12:25 EDT 2016 By: wcowan

Case Title	Location
ASSIST POLICE DEPT	155 DELACY AVE
Date/Time Reported	**Date/Time Occurred**
08/27/2016 23:49:29	08/27/2016 23:49:00 to 08/27/2016 23:49:00
Incident Type/Offense	
ASSIST - OTHER AGENCIES (GBP-09)	

Narrative (Continued from page 1)

While on the ground I struck Valencia with a closed fist to the upper body allowing officers to place him in handcuffs. Valencia was then transferred over to North Plainfield PD without incident.

Reporting Officer	Reviewing Officer	Approving Officer
OFC GARY MAURER (54303) (08/28/2016 22:47:58)	SGT GREGORY VICTOR (92902) (08/29/2016 02:41:16)	LT HANS CASE (11448) (08/29/2016 19:40:23)