

Sent Aug 9, 17
Records Attached
DM

Donna Mull

From: Donna Mull
Sent: Wednesday, August 09, 2017 8:39 AM
To: 'Craig Mccarthy'
Subject: OPRA Request
Attachments: Untitled.pdf

Mr. McCarthy,

As promised attached it the remainder of your OPRA Request, 2007, 2008, 2009. There were no reports from 2008. If you should have any further questions or concerns, please do not hesitate to contact me.

Respectfully,

Donna Mull

Donna J. Mull
Administrator
Borough of Pemberton
50 Egbert Street
Pemberton, NJ 08068
609-894-8222 EXT - 5
609-894-9417 (FAX)
dmull@pemberton.comcastbiz.net

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USE OF FORCE REPORT

.. Incident Information

Date <u>01/09/07</u>	Time <u>1143</u>	Day of Week <u>Tuesday</u>	Location <u>203 HONOR ST (BURGER KING)</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call [Specify <u>DISURBANCE</u>] ☐ Other Dispute		Type of Person: ☒ Under the Influence (<u>BELIEVED</u>) ☐ 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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>Beauboeuf, Maxon</u>	<u>Y/N</u>	<u>SCIP</u>	<u>M</u>	<u>B</u>	<u>22</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[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	☒		
...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: ☒ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify: _____	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>FALLON, VICTORIA INEZ</u>	<u>1927</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>[Signature]</u>			Police Officer Assignment: <u>PATROL</u>		
Print Supervisor Name: <u>JOSEPH CONLIN</u>			Supervisor Signature: <u>J.C.</u>		

(6/2000)

USE OF FORCE REPORT

Incident Information

Date	10/19/09	Time	1033	Day of Week	Monday	Location	191 W. Hampton St.
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call Specify NVS ☐ 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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
Jonathan D. Sanchez	☒ Y ☐ N	2C: 29-1/29-29-2 M	M	Hisp	23	☒ Y ☐ N	☒ Y ☐ N	☒ Y ☐ N
	☐ Y ☐ N					☐ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N
	☐ Y ☐ N					☐ Y ☐ N	☐ Y ☐ N	☐ Y ☐ N

[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	☒		
...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: ☒ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify: _____	Firearms Discharge: ☐ Intentional ☐ Accidental N/A Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
PHJ. Hiras	1931	☒ Y ☐ N	☒ Y ☐ N	☒ Y ☐ N	☒ Y ☐ N
Signature: <i>PHJ. Hiras</i>			Police Officer Assignment: Patrol		
Print Supervisor Name: SGT. Fallon			Supervisor Signature: <i>[Signature]</i>		

(6/2000)

USE OF FORCE REPORT

Incident Information

Date <u>02/13/09</u>	Time <u>1951</u>	Day of Week <u>Fri</u>	Location <u>Station 190</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call ☐ Other Dispute [Specify _____]		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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>Johnson, Bonifa A.</u>	<u>Y/N</u>	<u>2C:12-1 2C:29-2</u> <u>2C:29-3 2C:29-1</u> <u>2A:10-1(c)</u>	<u>F</u>	<u>B</u>	<u>18</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[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	<u>✓</u>		
...physical threat/attack on Police Officer	<u>✓</u>		
...threatened/attacked Police Officer with blunt object	<u>—</u>		
...threatened/attacked Police Officer with knife/cutting object	<u>—</u>		
...threatened/attacked Police Officer with motor vehicle	<u>—</u>		
...threatened Police Officer with firearm	<u>—</u>		
...fired at Police Officer	<u>—</u>		
...Other [Specify _____]	<u>—</u>		

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

Type of Force Used: ☒ Compliance Hold ☒ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify: _____	Firearms Discharge: ☐ Intentional <u>N/A</u> ☐ Accidental Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>PH. Justine Hips</u>	<u>1430</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>PH. Justine Hips #31</u>			Police Officer Assignment: <u>Patrol</u>		
Print Supervisor Name: <u>Sgt. Fallon #1927</u>			Supervisor Signature: <u>[Signature] #1927</u>		

(6/2000)

USE OF FORCE REPORT

Incident Information

Date 10/20/07	Time 0009	Day of Week Sat.	Location Pine Meadows Apt 4I
Type of Incident: ☐ 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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
JAMES A. Perry III	(Y)N	2C:33-2(b) 2C:29-10 2C:29-2	M	W	39	Y/N	Y/N	Y/N
	Y/N					Y/N	Y/N	Y/N
	Y/N					Y/N	Y/N	Y/N

[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
James A. Perry III			
...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: ☒ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☒ Other Force. Specify: KNEE strikes (common peroneal) pressure point tactics (mandibular Angle)	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired ____ Number of Hits ____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
PTL. KEBLER, MARK R	1934	(Y)N	(Y)N	Y/N	Y/N
Signature: [Signature]			Police Officer Assignment: Patrol		
Print Supervisor Name: Sgt. David Woodworth			Supervisor Signature: [Signature]		

(6/2000)

USE OF FORCE REPORT

Incident Information

Date <u>11/22/09</u>	Time	Day of Week <u>SUN</u>	Location <u>7-W Hampton</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call (Specify <u> </u>) ☐ Other Dispute			Type of Person: ☐ Under the Influence ☐ Other Unusual Condition (Specify <u> </u>)

[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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>Sullivan, Francis, III</u>	<u>Y/N</u>	<u>2C:29-1/2C:29-2</u>	<u>M</u>	<u>W</u>	<u>38</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[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	<u>✓</u>		
...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 <u> </u>)			

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

Type of Force Used: ☒ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☒ Other Force. Specify: <u>Physically Taken to Ground</u>	Firearms Discharge: ☐ Intentional ☐ Accidental <u>N/A</u> Number of Shots Fired <u> </u> Number of Hits <u> </u> [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>PH. J. Hines</u>	<u>1931</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>PH J Hines</u>			Police Officer Assignment: <u>Patrol</u>		
Print Supervisor Name: <u>Det. V. Fallon # 1927</u>			Supervisor Signature: <u>[Signature]</u> <u>#1927</u>		

(6/2000)

USE OF FORCE REPORT

.. Incident Information

Date <u>05/23/09</u>	Time	Day of Week <u>SAT</u>	Location <u>38 W. Hampton</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic ☒ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call ☐ Other Dispute [Specify <u>Trespasser</u>]		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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>Weber-Hoffman, Edward</u>	<u>Y/N</u>	<u>26-33-1/26-29-1</u>	<u>M</u>	<u>W</u>	<u>21</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[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	<u>✓</u>		
...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 <u>Refused to listen to Officer Commands</u>]	<u>✓</u>		

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

Type of Force Used: ☒ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☒ Other Force. Specify: <u>Arm Bar</u>	Firearms Discharge: ☐ Intentional <u>N/A</u> ☐ Accidental Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>Off. J. Higos</u>	<u>1931</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>Off. J. Higos</u>			Police Officer Assignment: <u>Patrol</u>		
Print Supervisor Name: <u>SGT. VICTORIA MILLON</u>			Supervisor Signature: <u>[Signature]</u>		

Donna Mull

From: Craig McCarthy [CMCCARTHY@njadvancemedia.com]
Sent: Thursday, August 03, 2017 6:10 PM
To: Donna Mull
Cc: 'Edward Hunter'
Subject: Re: OPRA Request

Thank you donna

Craig McCarthy | NJ Advance Media

Reporter | Twitter: [@createcraig](https://twitter.com/createcraig)

Cell: 732-372-2078 | Fax: 732-243-2840

Email: CMcCarthy@NJAdvanceMedia.com



PROVIDING SERVICES FOR

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Star-

From: Donna Mull <dmull@pemberton.comcastbiz.net>
Date: Thursday, August 3, 2017 at 2:47 PM
To: CRAIG MCCARTHY <CMCCARTHY@njadvancemedia.com>
Cc: 'Edward Hunter' <ehunter20@pembertonborough.us>
Subject: OPRA Request

Dear Mr. McCarthy,

Attached are 2010 through 2016 of the documents you requested per your OPRA request dated July 25, 2017. As stated in my previous email, we are in the process of pulling years 2007 through 2009 from our archives. I will have those documents to you early next week. If you should have questions or concerns, please do not hesitate to contact me.

Respectfully

Donna Mull

Donna J. Mull
Administrator
Borough of Pemberton
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Pemberton, NJ 08068

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Donna Mull

From: Craig McCarthy [CMCCARTHY@njadvancemedia.com]
Sent: Thursday, August 03, 2017 6:12 PM
To: Donna Mull
Cc: 'Edward Hunter'
Subject: Re: OPRA Request

Thank you and approved ext on 2007-09

Craig McCarthy | NJ Advance Media

Reporter | Twitter: [@createcraig](#)

Cell: 732-372-2078 | **Fax:** 732-243-2840

Email: CMcCarthy@NJAdvanceMedia.com



PROVIDING SERVICES FOR

nj.com

Star-

From: Donna Mull <dmull@pemberton.comcastbiz.net>
Date: Thursday, August 3, 2017 at 2:47 PM
To: CRAIG MCCARTHY <CMCCARTHY@njadvancemedia.com>
Cc: 'Edward Hunter' <ehunter20@pembertonborough.us>
Subject: OPRA Request

Dear Mr. McCarthy,

Attached are 2010 through 2016 of the documents you requested per your OPRA request dated July 25, 2017. As stated in my previous email, we are in the process of pulling years 2007 through 2009 from our archives. I will have those documents to you early next week. If you should have questions or concerns, please do not hesitate to contact me.

Respectfully

Donna Mull

Donna J. Mull
Administrator
Borough of Pemberton
50 Egbert Street
Pemberton, NJ 08068

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Donna Mull

From: Donna Mull
Sent: Thursday, August 03, 2017 2:15 PM
To: 'Craig Mccarthy'
Cc: 'Edward Hunter'
Subject: OPRA Request
Attachments: Untitled.pdf

Dear Mr. McCarthy,

Attached are 2010 through 2016 of the documents you requested per your OPRA request dated July 25, 2017. As stated in my previous email, we are in the process of pulling years 2007 through 2009 from our archives. I will have those documents to you early next week. If you should have questions or concerns, please do not hesitate to contact me.

Respectfully

Donna Mull

Donna J. Mull
Administrator
Borough of Pemberton
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USE OF FORCE REPORT

Incident Information

Date <u>12/8/10</u>	Time <u>2029</u>	Day of Week <u>WEDNESDAY</u>	Location <u>HANOVER ST / RAILS + TRAILS</u>
Type of Incident: ☐ 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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
BELL, COURTNEY	☒ Y/N	HINDERING / OBST ASSAULT	M	B	26	Y/N	☒ Y/N	☒ Y/N
	Y/N					Y/N	Y/N	Y/N
	Y/N					Y/N	Y/N	Y/N

[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	☒		
...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: ☒ Compliance Hold ☐ Hands/Fists ☒ Chemical/Natural Agent ☐ Kicks/Feet ☒ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify: _____	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
KEUBLER, MARK	1934	☒ Y/N	☒ Y/N	☒ Y/N	☒ Y/N
Signature: <u>R. M. Keubler</u>			Police Officer Assignment: <u>PATROL</u>		
Print Supervisor Name: <u>ED HUNTER - CHIEF</u>			Supervisor Signature: <u>[Signature]</u>		

(6/2000)

USE OF FORCE REPORT

.. Incident Information

Date <u>4-23-10</u>	Time <u>11:40</u>	Day of Week <u>FRIDAY</u>	Location <u>BIRMINGHAM RO</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call [Specify <u>SHOPLIFTING</u>]			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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
MESSENGER, SIKKA, Zachary, JUN	<u>Y/N</u>	<u>20-20-11B(2)</u>	<u>M</u>	<u>W</u>	<u>34</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[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	<u>✓</u>		
...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: ☒ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify: _____	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
MROCK, Joseph	1935	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>PR</u>			Police Officer Assignment: <u>PB+RO</u>		
Print Supervisor Name: <u>CO ED HUNTER</u>			Supervisor Signature: <u>CO ED HUNTER</u>		

(6/2000)

USE OF FORCE REPORT

.. Incident Information

Date <u>04/23/2010</u> Time <u>1140</u> Day of Week <u>FRIDAY</u> Location <u>BIRMINGHAM ROAD</u>	
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call [Specify <u>SHORTCUTTING</u>] ☐ 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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>MESSENGER-SILKIEA, Z.</u>	<u>(Y)N</u>	<u>2C:20-110(2)</u>	<u>M</u>	<u>W</u>	<u>34</u>	<u>Y(N)</u>	<u>Y(N)</u>	<u>Y(N)</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[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	☒		
...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: ☒ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify: _____	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>DYE, MATTHEW L</u>	<u>1936</u>	<u>(Y)N</u>	<u>(Y)N</u>	<u>Y(N)</u>	<u>Y(N)</u>
Signature: <u>[Signature]</u>			Police Officer Assignment: <u>PATROL</u>		
Print Supervisor Name: <u>ED HUDER - CHIEF</u>			Supervisor Signature: <u>[Signature]</u>		

(6/2000)

USE OF FORCE REPORT

.. Incident Information

Date <u>5/7/11</u>	Time <u>1315</u>	Day of Week <u>Saturday</u>	Location <u>89 Jarvis St</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call [Specify <u>Invest Bodal</u>]			Type of Person: ☒ Under the Influence <u>Alcohol</u> ☐ 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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>Barron, Paul F.</u>	<u>Y/N</u>	<u>2C:29-1A</u>	<u>M</u>	<u>N</u>	<u>59</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>	<u>2C:29-2A(1)</u>				<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[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	<u>✓</u>		
...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: ☐ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☒ Other Force. Specify: <u>Straight arm bar takedown</u>	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>GRAHAM, DANIEL, E</u>	<u>1938</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>PTC [Signature] #1938</u>			Police Officer Assignment: <u>Patrol (Investigation)</u>		
Print Supervisor Name: <u>CPL. MATTHEW DYE #1936</u>			Supervisor Signature: <u>[Signature] #1936</u>		

USE OF FORCE REPORT

Incident Information

Date <u>2/13/11</u>	Time <u>2032</u>	Day of Week <u>FRIDAY</u>	Location <u>Kinsley Road</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call (Specify <u>Fight</u>) ☐ 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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>Robinson, Markees</u>	<u>Y/N</u>	<u>2C(29-2A(1)) 33-2A(1)</u> <u>32-15A(1) 17-3A(1)</u>	<u>M</u>	<u>B</u>	<u>16</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[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	☒		
...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: ☒ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify: _____	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>Hawes, Dennis M</u>	<u>1937</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>PBL D. Hawes</u>			Police Officer Assignment: <u>Patrol</u>		
Print Supervisor Name: <u>Edward Hunter - Chief</u>			Supervisor Signature: <u>[Signature]</u>		

INCIDENT 2011-3733 USE OF FORCE REPORT

Incident Information

Date <u>12/11/11</u>	Time <u>10:20</u>	Day of Week <u>SUNDAY</u>	Location <u>6 SAWMILL DRIVE PEMBROOKTON NJ 07051</u>
Type of Incident: ☐ 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 <u>Possible Physiological</u>]

[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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>Weeks Sarah</u>	<u>Y/N</u>	<u>Resisting Arrest</u>	<u>F</u>	<u>B</u>	<u>13</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>	<u>Disorderly, Simple Assault</u>				<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>	<u>Criminal Mischief</u>				<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

Thames Valley Frisco Officers

[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	<u>Sarah Weeks</u>		
...physical threat/attack on Police Officer	<u>Sarah Weeks</u>		
...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: ☒ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify: _____	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>MROJKA, JOSEPH</u>	<u>#1935</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>[Signature]</u>			Police Officer Assignment: <u>PATROL</u>		
Print Supervisor Name: <u>EDWARD HUNTER - CHIEF</u>			Supervisor Signature: <u>[Signature]</u>		

USE OF FORCE REPORT

Incident Information

Date <u>04/06/12</u>	Time <u>641</u>	Day of Week <u>FRIDAY</u>	Location <u>PBMCAD / ELIZABETH ST</u>
Type of Incident: ☐ 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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>MCCASKILL, LUTAVIUS, M</u>	<u>Y/N</u>	<u>12-18(5)(H), 33-2B</u> <u>29-2A(3)(A), 12-3A</u>	<u>M</u>	<u>B</u>	<u>20</u>	<u>Y(N)</u>	<u>Y(N)</u>	<u>Y(N)</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[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	☒		
...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: ☒ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☒ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify: _____	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>Haines, Dennis, M</u>	<u>1937</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>[Signature]</u>			Police Officer Assignment: <u>PATROL</u>		
Print Supervisor Name: <u>ED HUNTER</u>			Supervisor Signature: <u>[Signature]</u>		

USE OF FORCE REPORT

.. Incident Information

Date <u>4/6/16</u>	Time <u>16:40</u>	Day of Week <u>FRIDAY</u>	Location <u>PERMITS, ERMAS, MULL, RD</u>
Type of Incident: ☐ 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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>MCCASKILL, LATAVIOUS</u>	<u>(Y) N</u>	<u>2C:12-3A</u> <u>2C:12-105(A)</u> <u>2C:29-2A(3)</u>	<u>M</u>	<u>B</u>	<u>20</u>	<u>Y (N)</u>	<u>Y (N)</u>	<u>Y (N)</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[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	<u>MCCASKILL</u>		
...physical threat/attack on Police Officer	<u>MCCASKILL</u>		
...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: ☒ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify: _____	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>MROSCIA, JUSCELIN</u>	<u># 1535</u>	<u>(Y) N</u>	<u>(Y) N</u>	<u>Y (N)</u>	<u>Y (N)</u>
Signature: <u>PTC. [Signature]</u> #1535			Police Officer Assignment: <u>PATROL</u>		
Print Supervisor Name: <u>ED HUNTER - CHIEF</u>			Supervisor Signature: <u>[Signature]</u>		

USE OF FORCE REPORT

.. Incident Information

Date <u>4/6/10</u>	Time <u>16:40</u>	Day of Week <u>Friday</u>	Location <u>REMBERTON PARKS PARKS RD</u>
Type of Incident:	☐ 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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
MORRIS CHANDRA	Y (N)	28.21-24(30A) 28.12-16(1)	F	B	43	Y (N)	Y (N)	Y (N)
	Y/N					Y/N	Y/N	Y/N
	Y/N					Y/N	Y/N	Y/N

[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			
...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 <u>PULLING ON SHOULDER'S COAT - OUT/OUT</u> MORRIS]			

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

Type of Force Used: ☐ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☒ Other Force. Specify: <u>PUSHED MORRIS SEVERAL TIMES</u>	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired ____ Number of Hits ____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
MORRIS, JOSHUA	#1935	QIN	QIN	Y (N)	Y (N)
Signature: <u>PTL [Signature] #1935</u>			Police Officer Assignment: <u>PATROL</u>		
Print Supervisor Name: <u>ED HUNTER - CRIME</u>			Supervisor Signature: <u>[Signature]</u>		

(6/2000)

USE OF FORCE REPORT

.. Incident Information

Date 10/23/2012	Time 1823	Day of Week WEDNESDAY	Location 433 CORNWELL AVE. PEMBERTON, NJ 08068
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call [Specify ASSIST DIST] 18 ☐ Other Dispute			Type of Person: ☐ Under the Influence N/A ☐ 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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
TAYLOR, BRYANT, D	Y/N	RESISTING ARREST OBSTRUCTION	M	Black	33	Y/N	Y/N	Y/N
	Y/N					Y/N	Y/N	Y/N
	Y/N					Y/N	Y/N	Y/N

[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			
...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 REFUSED TO FOLLOW OFFICERS VERBAL COMMAND TO SHOW HIS HANDS AND EXIT GARAGE]	✓		

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

Type of Force Used: ☐ Compliance Hold ☐ Hands/Fists ☒ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify:	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired ____ Number of Hits ____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
CHIOLO, A. C.	41	Y/N	Y/N	Y/N	Y/N
Signature: PTL A. C. #41			Police Officer Assignment: PATROL		
Print Supervisor Name: EDUARDO HERRERA - Chief			Supervisor Signature: [Signature]		

(6/2000)

USE OF FORCE REPORT

Incident Information

Date <u>8-4-12</u>	Time <u>2045</u>	Day of Week <u>SAT</u>	Location <u>LAUNDRIES WILLINGBRO ER</u>
Type of Incident: ☐ Crime in Progress ☒ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call ☐ Other Dispute [Specify _____]			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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>AKKERMANN, ROY H</u>	<u>Y/N</u>	<u>2C 37-2 A(3)(a)</u> <u>12-3B(A2)</u>	<u>M</u>	<u>W</u>	<u>26</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
<u>—</u>	<u>Y/N</u>	<u>12-18(1)</u> <u>12-3B(A2)</u>				<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
<u>—</u>	<u>Y/N</u>	<u>33-9(3)</u>				<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[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	<u>✓</u>		
...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: ☒ Compliance Hold ☒ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☒ Other Force. Specify: <u>PULL HAND OFF POLICE OFFICERS ARM (1937)</u>	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>CALDARALE DANIEL J. PTL</u>	<u>1926</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>[Signature]</u>			Police Officer Assignment: <u>PTROL</u>		
Print Supervisor Name: <u>EDWARD H. WICK - CHIEF</u>			Supervisor Signature: <u>[Signature]</u>		

USE OF FORCE REPORT

Incident Information

Date 8/4/12	Time 1545	Day of Week SATURDAY	Location 7 W Hampden St Rm 111
Type of Incident: ☐ 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 <u>Altered mental status</u>] [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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
Alkerman, Roy, M	(Y) N	20: 2A-2A(3)(A) 12-3B(x2)	M	W	26	(Y) N	Y (N)	(Y) N
	Y/N	12-1B(1)				Y/N	Y/N	Y/N
	Y/N	17-3(B)(2) 33-43				Y/N	Y/N	Y/N

[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	✓		
...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: ☒ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☒ Other Force. Specify: <u>Physical Restraint, took resisting suspect to ground</u>	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
Haines, P. D.	#1937	(Y) N	(Y) N	Y (N)	Y (N)
Signature: <u>[Signature]</u> #1937			Police Officer Assignment: <u>[Signature]</u>		
Print Supervisor Name: <u>Edward Hume - Chief</u>			Supervisor Signature: <u>[Signature]</u>		

USE OF FORCE REPORT

Incident Information

Date <u>8/4/2017</u>	Time <u>7:00 AM</u>	Day of Week <u>Saturday</u>	Location <u>50 EIGHT Street Binghamton</u>
Type of Incident: ☐ Crime in Progress ☒ Domestic ☐ Suspicious Person ☐ Traffic Violation ☐ Other Type of Call ☐ Other Dispute [Specify _____]		Type of Person: ☐ Under the Influence ☒ Other Unusual Condition [Specify <u>Altered mental status</u>] [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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>AKKERMAN, Roy, H</u>	<u>Y/N</u>	<u>2C:29-2A(3)(A)</u> <u>12-3(B)(1)</u> <u>12-13(1)</u> <u>17-3(B)(2)</u>	<u>M</u>	<u>W</u>	<u>26</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>	<u>33-43</u>				<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[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	☒		
...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: ☒ Compliance Hold ☒ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify: _____	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>MAHONEY, Ptl.</u>	<u>#1937</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>[Signature]</u> <u>#1937</u>			Police Officer Assignment: <u>Patrol</u>		
Print Supervisor Name: <u>EDWARD HUNTER - CHIEF</u>			Supervisor Signature: <u>[Signature]</u>		

USE OF FORCE REPORT

Incident Information

Date <u>8-4-12</u>	Time <u>1745</u>	Day of Week <u>SATURDAY</u>	Location <u>50 EGBERT ST, REMBERTON</u>
Type of Incident: ☐ 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 <u>ALTERED MENTAL STATUS</u>] [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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
AKKERMAN, ROY, H	☒ Y/N	ZC: 24-2A(3)(A) ZC: 12-3B	M	W	26	☒ Y/N	Y/N	☒ Y/N
_____	Y/N	ZC: 12-1B(1)	—	—	—	Y/N	Y/N	Y/N
_____	Y/N	ZC: 17-2(1)(2) ZC: 37-4B	—	—	—	Y/N	Y/N	Y/N

[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	☒	_____	_____
...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: ☒ Compliance Hold ☒ Hands/Wrists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify: _____	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
COOK, Timothy, George	1943	☒ Y/N	☒ Y/N	Y/N	Y/N
Signature: _____			Police Officer Assignment: <u>PATROL</u>		
Print Supervisor Name: _____			Supervisor Signature: _____		

USE OF FORCE REPORT

.. Incident Information

Date <u>12/30/13</u>	Time <u>2214</u>	Day of Week <u>MONDAY</u>	Location <u>Service St</u>
Type of Incident: ☐ 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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>SIDALL, James C</u>	<u>Y/N</u>	<u>39:4-50/20:29-2</u>	<u>M</u>	<u>W</u>	<u>63</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
<u>-</u>	<u>Y/N</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
<u>-</u>	<u>Y/N</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[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	<u>X</u>		
...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: ☐ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☒ Other Force. Specify: <u>ARM BAR</u>	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired ____ Number of Hits ____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>Conner Karl N</u>	<u>1961</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>[Signature]</u>			Police Officer Assignment: <u>PATROL</u>		
Print Supervisor Name: <u>[Signature]</u>			Supervisor Signature: <u>[Signature]</u>		

(6/2000)

USE OF FORCE REPORT

Incident Information

Date 12/30/13	Time 2214	Day of Week MONDAY	Location JARVIS ST.
Type of Incident: ☐ 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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
SIDALL, JAMES C	(Y) N	39:4-50 / 20:29-2a	M	W	63	Y (N)	Y (N)	Y (N)
—	Y/N	—	—	—	—	Y/N	Y/N	Y/N
—	Y/N	—	—	—	—	Y/N	Y/N	Y/N

[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: ☐ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☒ Other Force. Specify: ARM BAR	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired ____ Number of Hits ____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
DYE, MATTHEW L	1936	(Y) N	(Y) N	Y (N)	Y (N)
Signature: SGT. [Signature]	#1936	Police Officer Assignment: DUI PATROL			
Print Supervisor Name: [Signature]	Supervisor Signature: [Signature]				

(6/2000)

USE OF FORCE REPORT

.. Incident Information

Date 05-03-13	Time 1729	Day of Week FRIDAY	Location ARNEY'S MT. ROAD.
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☒ Traffic Violation ☒ Other Type of Call [Specify DISORDERLY] ☐ 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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
KNOX, GAVIN D	Y/N	DISORDERLY	M	W	44	Y/N	Y/N	Y/N
	Y/N					Y/N	Y/N	Y/N
	Y/N					Y/N	Y/N	Y/N

[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: ☒ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify: _____	Firearms Discharge: ☐ Intentional ☐ Accidental Number of Shots Fired ____ Number of Hits ____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
DYE, MATTHEW L	1936	Y/N	Y/N	Y/N	Y/N
Signature: Sgt. [Signature] #1936			Police Officer Assignment: PATROL		
Print Supervisor Name: ED HUNTER			Supervisor Signature: [Signature]		

USE OF FORCE REPORT

.. Incident Information

Date <u>7-15-13</u>	Time <u>1900</u>	Day of Week <u>MONDAY</u>	Location <u>W. HAMPTON ST.</u>
Type of Incident: ☐ 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 <u>DIABETIC</u>)

[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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>WILSON, KENNETH, E</u> ^{2nd}	<u>Y/N</u>	<u>—</u>	<u>M</u>	<u>B</u>	<u>49</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
<u>—</u>	<u>Y/N</u>	<u>—</u>	<u>—</u>	<u>—</u>	<u>—</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
<u>—</u>	<u>Y/N</u>	<u>—</u>	<u>—</u>	<u>—</u>	<u>—</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[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	<u>✓</u>	<u>—</u>	<u>—</u>
...physical threat/attack on Police Officer	<u>—</u>	<u>—</u>	<u>—</u>
...threatened/attacked Police Officer with blunt object	<u>—</u>	<u>—</u>	<u>—</u>
...threatened/attacked Police Officer with knife/cutting object	<u>—</u>	<u>—</u>	<u>—</u>
...threatened/attacked Police Officer with motor vehicle	<u>—</u>	<u>—</u>	<u>—</u>
...threatened Police Officer with firearm	<u>—</u>	<u>—</u>	<u>—</u>
...fired at Police Officer	<u>—</u>	<u>—</u>	<u>—</u>
...Other (Specify _____)	<u>—</u>	<u>—</u>	<u>—</u>

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

Type of Force Used: ☒ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☒ Other Force. Specify: <u>PHYSICAL CONTROL TO GET SUBJECT HANDCUFFED.</u>	Firearms Discharge: ☐ Intentional <u>N/A</u> ☐ Accidental Number of Shots Fired <u>—</u> Number of Hits <u>—</u> [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>CORPORA, RONALD, F.</u>	<u>1948</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>[Signature]</u> #1948			Police Officer Assignment: <u>[Signature]</u>		
Print Supervisor Name: <u>SGT. MATTHEW DYE</u> #1936			Supervisor Signature: <u>[Signature]</u> #1936		

USE OF FORCE REPORT

Incident Information

Date <u>7/15/13</u>	Time <u>1900</u>	Day of Week <u>MONDAY</u>	Location
Type of Incident: ☐ 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 <u>DIABETIC EMERGA</u>]	

[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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>WILSON, KENNETH, E</u>	<u>Y(N)</u>	<u>N/A</u>	<u>M</u>	<u>BL</u>	<u>49</u>	<u>Y(N)</u>	<u>Y(N)</u>	<u>Y(N)</u>
_____	<u>Y/N</u>	_____	_____	_____	_____	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
_____	<u>Y/N</u>	_____	_____	_____	_____	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[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	<u>✓</u>	_____	_____
...physical threat/attack on Police Officer	X	X	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: ☒ Compliance Hold ☒ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☐ Other Force. Specify: _____	Firearms Discharge: ☐ Intentional ☐ Accidental <u>N/A</u> Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>CHIOLAN, ADAM, C</u>	<u>1941</u>	<u>Y(N)</u>	<u>Y(N)</u>	<u>Y(N)</u>	<u>Y(N)</u>
Signature: <u>Pr. A</u> #41			Police Officer Assignment: <u>PATROL</u>		
Print Supervisor Name: <u>SGT. MATTHEW DYE #1930</u>			Supervisor Signature: <u>[Signature]</u> #936		

A. Incident Information

B. Officer Information

C1 . Subject 1 (List only the person who was the subject of the use of force by the officer listed in Section B.)

C2. Subject 2 (List only the person who was the subject of the use of force by the officer listed in Section B.)

* if this officer used force against more than two subjects in this incident, attach additional USE OF FORCE REPORTS.

7/2001

A. Incident Information

B. Officer Information

C1 . Subject 1 (List only the person who was the subject of the use of force by the officer listed in Section B.)

C2. Subject 2 (List only the person who was the subject of the use of force by the officer listed in Section B.)

* if this officer used force against more than two subjects in this incident, attach additional USE OF FORCE REPORTS.

7/2001

USE OF FORCE REPORT

.. Incident Information

Date <u>6-5-15</u>	Time <u>1838 HRS</u>	Day of Week <u>FRIDAY</u>	Location <u>DEBORAH HOSPITAL PARKING LOT</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call [Specify <u>SUSPECT HURTING HIMSELF</u>]			Type of Person: ☐ Under the Influence ☒ Other Unusual Condition [Specify <u>SUSPECT NOT WANTING TO GO TO JAIL</u>]

[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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>MAKAGERAN, ALAN</u>	<u>Y/N</u>	<u>AGG. ASSAULT</u>	<u>M</u>	<u>A</u>	<u>53</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
<u>N/A</u>	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
<u>N/A</u>	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[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	☒		
...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 <u>THREATENED TO HARM HIMSELF</u>]	☒		

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

Type of Force Used: ☒ Compliance Hold ☐ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☒ Other Force. Specify: <u>PRESSURE POINTS</u>	Firearms Discharge: ☐ Intentional <u>N/A</u> ☐ Accidental Number of Shots Fired ____ Number of Hits ____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>COPPOLA, RONALD, F.</u>	<u>1948</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>[Signature]</u> Print Supervisor Name: <u>CHIEF EDWARD HUNTER</u>			Police Officer Assignment: <u>CORPORAL/PATROL</u> Supervisor Signature: <u>[Signature]</u>		

(6/2000)

USE OF FORCE REPORT

.. Incident Information

Date <u>7/5/2015</u>	Time <u>2045 HRS.</u>	Day of Week <u>SUNDAY</u>	Location <u>209 HANDOVER ST. PLYMOUTH BROWARD</u>
Type of Incident: ☒ Crime in Progress ☐ Suspicious Person ☐ Other Type of Call [Specify _____]		Type of Person: ☐ Under the Influence ☒ Other Unusual Condition [Specify <u>MENTAL ISSUES</u>]	
☐ Domestic ☐ Traffic Violation ☐ Other Dispute			

[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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>EDWARDS, JOHN, WILEY</u>	<u>Y/N</u>	<u>2C:29-1A, 2C:29-2A(1)</u>	<u>M</u>	<u>W</u>	<u>44</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>	<u>2C:35-10A(4)</u>				<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[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	<u>X</u>		
...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: ☐ Compliance Hold ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☒ Hands/Fists ☐ Kicks/Feet ☐ Canine ☒ Other Force. Specify: <u>SUSPECT FORCED PHYSICALLY TO PUT ARMS BEHIND BACK TO BE PLACED IN HANDCUFFS.</u>	Firearms Discharge: <u>N/A</u> ☐ Intentional ☐ Accidental Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]
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E. Officer Information

Name (Last, First, Middle)	Badge #	On-Duty?	Uniform?	Officer Injured?	Taken to Hospital?
<u>COROLA, RONALD, F.</u>	<u>1948</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>[Signature]</u>			Police Officer Assignment: <u>PATROL CORPORAL</u>		
Print Supervisor Name: <u>CHIEF EDWARD HUNTER</u>			Supervisor Signature: <u>[Signature]</u>		

USE OF FORCE REPORT

Incident Information

Date <u>8/16/15</u>	Time <u>2132 hrs</u>	Day of Week <u>SUNDAY</u>	Location <u>ELIZABETH ST.</u>
Type of Incident: ☐ Crime in Progress ☐ Domestic ☐ Suspicious Person ☐ Traffic Violation ☒ Other Type of Call [Specify <u>TRAFFIC STOP</u>]			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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>WYATT, BRIAN, EDWARD</u>	<u>YIN</u>	<u>T/O 94-18</u>	<u>M</u>	<u>B</u>	<u>20</u>	<u>YIN</u>	<u>YIN</u>	<u>Y(N)</u>
	<u>YIN</u>					<u>YIN</u>	<u>YIN</u>	<u>YIN</u>
	<u>YIN</u>					<u>YIN</u>	<u>YIN</u>	<u>YIN</u>

[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	<u>YES</u>		
...physical threat/attack on Police Officer	<u>—</u>		
...threatened/attacked Police Officer with blunt object	<u>—</u>		
...threatened/attacked Police Officer with knife/cutting object	<u>—</u>		
...threatened/attacked Police Officer with motor vehicle	<u>—</u>		
...threatened Police Officer with firearm	<u>—</u>		
...fired at Police Officer	<u>—</u>		
...Other [Specify <u>HIT OFFICER WHILE FLAING GUNNS.</u>]	<u>YES</u>		

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

Type of Force Used: ☒ Compliance Hold ☒ Hands/Fists ☐ Chemical/Natural Agent ☐ Kicks/Feet ☐ Strike/Use Baton or Other Object ☐ Canine ☒ Other Force. Specify: <u>LEG SWEEP TO TAKE SUSPECT TO GROUND.</u>	Firearms Discharge: ☐ Intentional <u>N/A</u> ☐ 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?
<u>COPPOLA, RONALD, F.</u>	<u>1948</u>	<u>YIN</u>	<u>YIN</u>	<u>YIN</u>	<u>Y(N)</u>
Signature: <u>[Signature]</u>			Police Officer Assignment: <u>PARADE</u>		
Print Supervisor Name: <u>CHIEF E. HUNTER</u>			Supervisor Signature: <u>[Signature]</u>		

Pemberton Borough POLICE DEPARTMENT
USE OF FORCE REPORT

A. Incident Information

Date <u>03/08/16</u>	Time <u>8:59 A.M.</u>	Day of Week <u>TUESDAY</u>	Location <u>W. Hampton St</u>	INCIDENT NUMBER <u>2016-1041</u>
Type of Incident ☐ Crime in progress ☐ Domestic ☐ Other dispute ☐ Suspicious person ☒ Traffic stop ☐ Other (specify)				

B. Officer Information

Name (Last, First, Middle) <u>Torbik, Matthew, J.</u>	Badge # <u>1954</u>	Sex <u>Male</u>	Race <u>Asian</u>	Age <u>24</u>	Injured <u>Y/N</u>	Killed <u>Y/N</u>
Rank <u>Patrolman</u>	Duty assignment <u>Patrol</u>	Years of service <u>1</u>	On-Duty <u>Y/N</u>	Uniform <u>Y/N</u>		

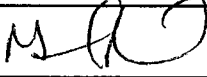
C1. Subject 1 (List only the person who was the subject of the use of force by the officer listed in Section B.)

Name (Last, First, Middle) <u>Holm, Jonathan, J.</u>	Sex <u>Male</u>	Race <u>White</u>	Age <u>36</u>	Weapon <u>Y/N</u>	Injured <u>Y/N</u>	Killed <u>Y/N</u>
☐ Under the influence ☐ Other unusual condition (specify)	Arrested <u>Y/N</u>	Charges <u>2C:29-2A(1)</u>				
Subject's actions (check all that apply) ☒ Resisted police officer control ☐ Physical threat/attack on officer or another ☐ Threatened/attacked officer or another with blunt object ☐ Threatened/attacked officer or another with knife/cutting object ☐ Threatened/attacked officer or another with motor vehicle ☐ Threatened officer or another with firearm ☐ Fired at officer or another ☐ Other (specify)		Officer's use of force toward this subject (check all that apply) ☒ Compliance hold Firearms Discharge ☐ Hands/fists ☐ Intentional ☐ Kicks/feet ☐ Accidental ☐ Chemical/natural agent ☐ Strike/use baton or other object Number of Shots Fired _____ ☐ Canine Number of Hits _____ ☐ Other (specify) [Use 'UNK' if unknown]				

C2. Subject 2 (List only the person who was the subject of the use of force by the officer listed in Section B.)

Name (Last, First, Middle) <u>N/A</u>	Sex <u>N/A</u>	Race <u>N/A</u>	Age <u>N/A</u>	Weapon <u>Y/N</u>	Injured <u>Y/N</u>	Killed <u>Y/N</u>
☐ Under the influence ☐ Other unusual condition (specify)	Arrested <u>Y/N</u>	Charges				
Subject's actions (check all that apply) ☐ Resisted police officer control ☐ Physical threat/attack on officer or another ☐ Threatened/attacked officer or another with blunt object ☐ Threatened/attacked officer or another with knife/cutting object ☐ Threatened/attacked officer or another with motor vehicle ☐ Threatened officer or another with firearm ☐ Fired at officer or another ☐ Other (specify)		Officer's use of force toward this subject (check all that apply) ☐ Compliance hold Firearms Discharge ☐ Hands/fists ☐ Intentional ☐ Kicks/feet ☐ Accidental ☐ Chemical/natural agent ☐ Strike/use baton or other object Number of Shots Fired _____ ☐ Canine Number of Hits _____ ☐ Other (specify) [Use 'UNK' if unknown]				

➤ If this officer used force against more than two subjects in this incident, attach additional USE OF FORCE REPORTS.

Signature: 	Date: <u>3/8/16</u>
Print Supervisor Name: <u>PIR. RONALD CAMPBELL #1948</u>	Supervisor Signature:  #1948

USE OF FORCE REPORT

.. Incident Information

Date <u>3/16/16</u>	Time <u>2327</u>	Day of Week <u>Wednesday</u>	Location <u>31 West Hampton St.</u>
Type of Incident: ☐ 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?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital?
<u>LANCELL, MIRANDA, MRS</u>	<u>Y/N</u>	<u>2C-12-1A / 2C-29-3A</u>	<u>F</u>	<u>W</u>	<u>19</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
	<u>Y/N</u>					<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>

[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	<u>YES</u>		
...physical threat/attack on Police Officer	<u>NO</u>		
...threatened/attacked Police Officer with blunt object	<u>NO</u>		
...threatened/attacked Police Officer with knife/cutting object	<u>NO</u>		
...threatened/attacked Police Officer with motor vehicle	<u>NO</u>		
...threatened Police Officer with firearm	<u>NO</u>		
...fired at Police Officer	<u>N/A</u>		
...Other [Specify <u>PULLED AWAY / STRUGGLED</u>]	<u>YES</u>		

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

Type of Force Used: ☒ Compliance Hold <u>WRIST LOCK</u> ☐ Chemical/Natural Agent ☐ Strike/Use Baton or Other Object ☒ Other Force. Specify: <u>LEG SWEEP</u>	☐ Hands/Fists ☐ Kicks/Feet ☐ Canine	Firearms Discharge: ☐ Intentional ☒ Accidental <u>N/A</u>
		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?
<u>CEPPOLA, RONALD, F.</u>	<u>1998</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>	<u>Y/N</u>
Signature: <u>[Signature]</u>			Police Officer Assignment: <u>ADP</u>		
Print Supervisor Name: <u>PO HANTER - CHIEF</u>			Supervisor Signature: <u>[Signature]</u>		

A. Incident Information

B. Officer Information

C1 . Subject 1 (List only the person who was the subject of the use of force by the officer listed in Section B.)

C2. Subject 2 (List only the person who was the subject of the use of force by the officer listed in Section B.)

* if this officer used force against more than two subjects in this incident, attach additional USE OF FORCE REPORTS.

7/2001

PEMBERTON BOROUGH POLICE DEPARTMENT
USE OF FORCE REPORT

A. Incident Information

Date 8/16/2016	Time 2249 Hours	Day of Week Tuesday	Location Hanover Street / Mary Street	INCIDENT NUMBER 2016-3869
Type of Incident ☒ Crime in progress ☐ Domestic ☐ Other dispute ☐ Suspicious person ☐ Traffic stop ☐ Other (specify)				

B. Officer Information

Name (Last, First, Middle) Torbik, Matthew, J.	Badge# 1954	Sex Male	Race Asian	Age 25	Injured Y ☒ N ☐	Killed Y ☐ N ☒
Rank Patrolman	Duty assignment Patrol	Years of service 4	On-Duty Y ☒ N ☐	Uniform Y ☒ N ☐		

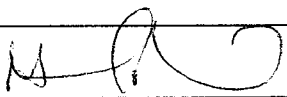
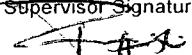
C1. Subject 1 (List only the person who was the subject of the use of force by the officer listed in Section B.)

Name (Last, First, Middle) Lane, Thomas, A.	Sex Male	Race White	Age 30	Weapon Y ☐ N ☒	Injured Y ☒ N ☐	Killed Y ☐ N ☒
☐ Under the influence ☐ Other unusual condition (specify)	Arrested Y ☒ N ☐	Charges 2C:29-2A(3)(A), 2C:29-1A				
Subject's actions (check all that apply) ☒ Resisted police officer control ☒ Physical threat/attack on officer or another ☐ Threatened/attacked officer or another with blunt object ☐ Threatened/attacked officer or another with knife/cutting object ☐ Threatened/attacked officer or another with motor vehicle ☐ Threatened officer or another with firearm ☐ Fired at officer or another ☐ Other (specify)			Officer's use of force toward this subjects actions (check all that apply) ☒ Compliance hold ☐ Hands/fists ☐ Kicks/feet ☒ Chemical/natural agent ☐ Strike/use baton or other object ☐ Canine ☐ Other (specify) Firearms Discharge ☐ Intentional ☐ Accidental Number of Shots Fired <u>0</u> Number of Hits _____ [Use 'UNK' if unknown]			

C2. Subject 2 (List only the person who was the subject of the use of force by the officer listed in Section B.)

Name (Last, First, Middle)	Sex	Race	Age	Weapon Y ☐ N ☐	Injured Y ☐ N ☐	Killed Y ☐ N ☐
☐ Under the influence ☐ Other unusual condition (specify)	Arrested Y ☐ N ☐	Charges				
Subject's actions (check all that apply) ☐ Resisted police officer control ☐ Physical threat/attack on officer or another ☐ Threatened/attacked officer or another with blunt object ☐ Threatened/attacked officer or another with knife/cutting object ☐ Threatened/attacked officer or another with motor vehicle ☐ Threatened officer or another with firearm ☐ Fired at officer or another ☐ Other (specify)			Officer's use of force toward this subjects actions (check all that apply) ☐ Compliance hold ☐ Hands/fists ☐ Kicks/feet ☐ Chemical/natural agent ☐ Strike/use baton or other object ☐ Canine ☐ Other (specify) Firearms Discharge ☐ Intentional ☐ Accidental Number of Shots Fired _____ Number of Hits _____ [Use 'UNK' if unknown]			

* if this officer used force against more than two subjects in this incident, attach additional USE OF FORCE REPORTS.

Signature 	Date 8/16/2016
Print Supervisor Name Ptl. T. Poss #50	Supervisor Signature 

A. Incident Information

B. Officer Information

C1 . Subject 1 (List only the person who was the subject of the use of force by the officer listed in Section B.)

C2. Subject 2 (List only the person who was the subject of the use of force by the officer listed in Section B.)

* if this officer used force against more than two subjects in this incident, attach additional USE OF FORCE REPORTS.

7/2001

OPRA

Donna Mull

From: Donna Mull
Sent: Wednesday, August 02, 2017 4:02 PM
To: 'CMCCARTHY@njadvancemedia.com'
Subject: OPRA
Attachments: OPRA UOF- local.pdf

Dear Mr. McCarthy;

I wanted to let you know we have been working diligently to fulfill the attached OPRA request. I will have all of 2010, 2011, 2012, 2013, 2014, 2015, and 2016 to you tomorrow and the remaining to you by the beginning of next week. If you should have any questions or concerns, please do not hesitate to contact me.

Respectfully,

Donna J. Mull
Administrator
Borough of Pemberton
50 Egbert Street
Pemberton, NJ 08068
609-894-8222 EXT - 5
609-894-9417 (FAX)
dmull@pemberton.comcastbiz.net

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PROVIDING SERVICES FOR

nj.com

Star-Ledger

CRAIG MCCARTHY, REPORTER

732-372-2078

cmccarthy@njadvancemedia.com

Woodbridge Corporate Plaza

485 Route 1 South, Building E, Suite 300

Iselin, NJ 08830-3009

7/25/2017

Dear Custodian,

Please consider this a formal OPRA request for the unredacted Use of Force reports for incidents occurring in the calendar years 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015 and 2016 from your municipality's police department.

We are entitled to these unredacted reports under N.J.S.A. 47:1A3(b) as a result of the state Supreme Court ruling on July 11, 2017, in the case North Jersey Media Group v. Lyndhurst.

The court wrote in its opinion, "The law calls for disclosure of 'the identity of the investigating and arresting personnel' and adds that the exception on which defendants rely 'shall be narrowly construed.'"

Under that ruling, the court also ruled that "OPRA's criminal investigatory records exception does not apply to records that are "required by law to be made, maintained or kept on file." N.J.S.A. 47:1A-1.1. As a result, the exemption does not cover Use of Force Reports, which the Attorney General requires officers to prepare after the use of deadly force."

Therefore, this request cannot be denied under the exemption of an "ongoing investigation" since they are required under the Attorney General's Use of Force Policy, which has "the force of law for police entities." (NJMG v. Lyndhurst)

If your agency chooses to deny, citing safety concerns, please provide a statement for each incident stating why officer or officers' names "will jeopardize the safety of any person . . . or any investigation in progress" or "would be harmful to a bona fide law enforcement purpose or the public safety." (NJMG v. Lyndhurst)

Please email scanned digital copies of the unredacted original Use Of Force forms as PDFs. If the file is too large, we will accept a CD with the requested documents mailed to the address above.

Under penalty of N.J.S.A. 2C:283, I certify that I have not been convicted of any indictable offense under the laws of New Jersey, or any other state, or in the United States.

Please note, this request clearly notes New Jersey's Open Public Record Act, therefore does not need to be on local OPRA forms.

We reserve the right to appeal your decision to withhold any information.

I look forward to your reply via email. We request all correspondence referencing this OPRA be via email.

Thank you for your assistance.
CRAIG MCCARTHY

Sent 8/17/17
w/records attached
DM

Donna Mull

From: Donna Mull
Sent: Thursday, August 17, 2017 2:21 PM
To: 'James.O'Donnell@nbcuni.com'
Subject: OPRA Request 8/9/17
Attachments: Untitled.pdf

Dear Mr. O'Donnell,

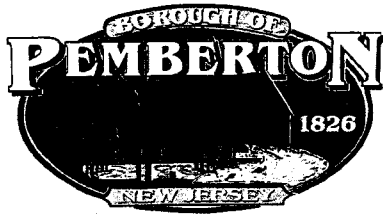
Attached is the record you requested. If you should need anything further, please do not hesitate to contact me. I will be on vacation from 8/21 – 8/24 and our offices are closed on Friday.

Thank you,

Donna Mull

Donna J. Mull
Administrator
Borough of Pemberton
50 Egbert Street
Pemberton, NJ 08068
609-894-8222 EXT - 5
609-894-9417 (FAX)
dmull@pemberton.comcastbiz.net

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BOROUGH OF PEMBERTON

POLICE DEPARTMENT

INCORPORATED 1826
50 Egbert Street
Pemberton, NJ 08068

Edward P. Hunter
Chief of Police

Phone 609-894-2632
Fax 609-894-9682

Part One Stolen Firearms

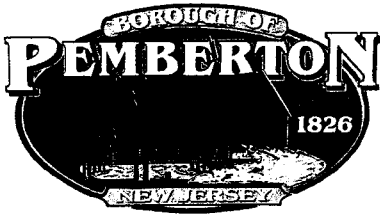
- (1) Serial #360-88192 (2) Serial # FAL1254
- Year 2016
- 8-24-2016
- Inc # 2016-4015
- Theft/Unlawful Possession of firearm
- Burglary
- Handguns (2)
- (1) Ruger (2) Walther
- (1) SR 229 (2) PPQ
- (1) 22 Caliber (2) .40 Caliber
- 2 Total Hand Guns

Part Two Seized Firearms

- (1) Seial # 617109
- 01-12-2012
- Shotgun
- Stoeger
- Turkey
- 12 Gauge Semi-automatic " Timber" Camo.

- (1) 4K 21892
- 05-08-2012
- BB Hand Gun
- Powerline
- 15XT Co2 BB
- Black CO2 Powdered

- (1) AZ424744
- 08-12-2012
- 12 Gauge Shotgun
- Harrington & Richardson Inc.
- 088- Single Shot 12 Gauge Painted silver, Mopaled: Shortened Stack & Barrel



BOROUGH OF PEMBERTON

POLICE DEPARTMENT

INCORPORATED 1826
50 Egbert Street
Pemberton, NJ 08068

Edward P. Hunter
Chief of Police

Phone 609-894-2632
Fax 609-894-9682

- (1) SNU 553
- 03-30-2013
- Glock Barrel
- Glock
- Glock 22
- Glock Barrel
- .40 Caliber

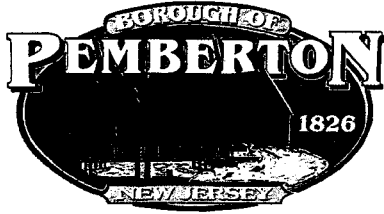
- 03-27-2015
- Pellet Gun (2)
- Marksman
- Black in color
- 22 caliber

- (1) 1025513
- 10-22-2015
- Handgun
- American Arms

- (1) N516276
- 03-13-2017
- Handgun
- Smith And Wesson
- .357

- (1) 259814
- 03-13-2017
- Handgun
- Titian
- .25 Caliber

- (1) 174758
- 03-13-2017
- Long Rifle
- Standard Model HD Military - .22 Caliber



BOROUGH OF PEMBERTON

POLICE DEPARTMENT

INCORPORATED 1826
50 Egbert Street
Pemberton, NJ 08068

Edward P. Hunter
Chief of Police

Phone 609-894-2632
Fax 609-894-9682

- (1) S130978
- 02-13-2016
- Camo Silver Barrel Black Scope
- Thompson
- Black Powder Muzzle Loader

- (1) G2444092
- 02-13-2016
- Black/Black Scope
- Winchester
- Model 70
- .300WSW

- (1) CLZ615US
- 02-13-2016
- Black
- Glock
- Model 30
- .45 Caliber

- (1) PAT:APR 20-1915
- 02-13-2016
- Black Barrel/ Wood Stock
- Riverside
- Double Barrel Black
- 12 Gauge

- (1) L605561
- 06-17-2017
- Revolver
- RG
- RG 14
- Revolver
- 22 Caliber

Sent 8-14-17
DM

Donna Mull

From: Donna Mull
Sent: Monday, August 14, 2017 7:52 AM
To: 'James.O'Donnell@nbcuni.com'
Cc: 'Edward Hunter'
Subject: OPRA Request dated August 9, 2017

Dear Mr. O'Donnell,

As the records custodian I acknowledge receipt of the information you have requested. Technically you have not requested records, however, the Borough as best as possible, without creating new records, will endeavor to provide you with as much information as possible. It is hoped that this information will be provided to you by August 17, 2017, as there is limited staff and the police department consists of 6 members. If this is not satisfactory, please contact me at your earliest convenience to discuss.

Respectfully,

Donna Mull

Donna J. Mull
Administrator
Borough of Pemberton
50 Egbert Street
Pemberton, NJ 08068
609-894-8222 EXT - 5
609-894-9417 (FAX)
dmull@pemberton.comcastbiz.net

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AGENCY NAME HERE
OPEN PUBLIC RECORDS ACT REQUEST FORM
Agency Address
Agency Telephone Number & Fax Number
Agency e-mail address
Name of Agency Custodian



Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Jim MI _____ Last Name O'Donnell
E-mail Address James.O'Donnell@nbcuni.com
Mailing Address 10 Monument Road
City Bala Cynwyd State PA Zip 19004
Telephone 215-913-0273 FAX 610-668-5649
Preferred Delivery: Pick Up _____ US Mail _____ On-Site _____ Inspect _____ Fax _____ E-mail ☒
If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I HAVE / ~~HAVE NOT~~ been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.
Signature James O'Donnell Date 08/09/2017

Payment Information

Maximum Authorization Cost \$ 1
Select Payment Method
Cash ☐ ☒ Check Money Order
Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) – actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.
Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Please see attached 3 pages

AGENCY USE ONLY

AGENCY USE ONLY

AGENCY USE ONLY

Est. Document Cost _____ Est. Delivery Cost _____ Est. Extras Cost _____ Total Est. Cost _____ Deposit Amount _____ Estimated Balance _____ Deposit Date _____	Disposition Notes Custodian: If any part of request cannot be delivered in seven business days, detail reasons here. In Progress - Open _____ Denied - Closed _____ Filled - Closed _____ Partial - Closed _____	<table border="1" style="width: 100%; border-collapse: collapse;"><thead><tr><th colspan="2" style="text-align: left;">Tracking Information</th><th colspan="2" style="text-align: left;">Final Cost</th></tr></thead><tbody><tr><td>Tracking #</td><td>_____</td><td>Total</td><td>_____</td></tr><tr><td>Rec'd Date</td><td>_____</td><td>Deposit</td><td>_____</td></tr><tr><td>Ready Date</td><td>_____</td><td>Balance Due</td><td>_____</td></tr><tr><td>Total Pages</td><td>_____</td><td>Balance Paid</td><td>_____</td></tr><tr><td colspan="4" style="text-align: center;">Records Provided</td></tr><tr><td colspan="2" style="text-align: center;">Custodian Signature _____</td><td colspan="2" style="text-align: center;">Date _____</td></tr></tbody></table>	Tracking Information		Final Cost		Tracking #	_____	Total	_____	Rec'd Date	_____	Deposit	_____	Ready Date	_____	Balance Due	_____	Total Pages	_____	Balance Paid	_____	Records Provided				Custodian Signature _____		Date _____	
Tracking Information		Final Cost																												
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DEPOSITS

The custodian may require a deposit against costs for reproducing documents sought through an anonymous request whenever the custodian anticipates that the documents requested will cost in excess of \$5 to reproduce.

Where a special service charge is warranted under OPRA, that amount will be communicated to you as required under the statute. You have the opportunity to review and object to the charge prior to it being incurred. If, however, you approve of the fact and amount of the special service charge, you may be required to pay a deposit or pay in full prior to reproduction of the documents.

YOUR REQUEST FOR RECORDS IS DENIED FOR THE FOLLOWING REASON(S):

(To be completed by the Custodian of Records – check the box of the numbered exemption(s) as they apply to the records requested. If multiple records are requested, be specific as to which exemption(s) apply to each record. **Response is due to requestor as soon as possible, but no later than seven business days.**)

N.J.S.A. 47:1A-1.1

- ☐ Inter-agency or intra-agency advisory, consultative or deliberative material
- ☐ Legislative records
- ☐ Law enforcement records:
 - ☐ Medical examiner photos
 - ☐ Criminal investigatory records (however, N.J.S.A. 47:1A-3.b. lists specific criminal investigatory information which must be disclosed)
 - ☐ Victims' records
- ☐ Trade secrets and proprietary commercial or financial information
- ☐ Any record within the attorney-client privilege
- ☐ Administrative or technical information regarding computer hardware, software and networks which, if disclosed would jeopardize computer security
- ☐ Emergency or security information or procedures for any buildings or facility which, if disclosed, would jeopardize security of the building or facility or persons therein
- ☐ Security measures and surveillance techniques which, if disclosed, would create a risk to the safety or persons, property, electronic data or software
- ☐ Information which, if disclosed, would give an advantage to competitors or bidders
- ☐ Information generated by or on behalf of public employers or public employees in connection with:
 - ☐ Any sexual harassment complaint filed with a public employer
 - ☐ Any grievance filed by or against an employee
 - ☐ Collective negotiations documents and statements of strategy or negotiating
- ☐ Information that is a communication between a public agency and its insurance carrier, administrative service organization or risk management office
- ☐ Information that is to be kept confidential pursuant to court order
- ☐ Certificate of honorable discharge issued by the United States government (Form DD-214) filed with a public agency
- ☐ Social security numbers
- ☐ Credit card numbers
- ☐ Unlisted telephone numbers
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- ☐ Certain records of higher education institutions:
 - ☐ Research records
 - ☐ Questions or scores for exam for employment or academics
 - ☐ Charitable contribution information
 - ☐ Rare book collections gifted for limited access
 - ☐ Admission applications
 - ☐ Student records, grievances or disciplinary proceedings revealing a students' identification
- ☐ Biotechnology trade secrets N.J.S.A. 47:1A-1.2
- ☐ Convicts requesting their victims' records N.J.S.A. 47:1A-2.2
- ☐ Ongoing investigations of non-law enforcement agencies (must prove disclosure is inimical to the public interest) N.J.S.A. 47:1A-3.a.
- ☐ Public defender records N.J.S.A. 47:1A-5.k.
- ☐ Upholds exemptions contained in other State or federal statutes and regulations, Executive Orders, Rules of Court, and privileges created by State Constitution, statute, court rule or judicial case law N.J.S.A. 47:1A-9
- ☐ Personnel and pension records (however, the following information must be disclosed:
 - An individual's name, title, position, salary, payroll record, length of service, date of separation and the reason for such separation, and the amount and type of any pension received
 - When required to be disclosed by another law, when disclosure is essential to the performance of official duties of a person duly authorized by this State or the US, or when authorized by an individual in interest
 - Data contained in information which disclose conformity with specific experiential, educational or medical qualifications required for government employment or for receipt of a public pension, but not including any detailed medical or psychological information N.J.S.A. 47:1A-10

N.J.S.A. 47:1A-1

- ☐ "a public agency has a responsibility and an obligation to safeguard from public access a citizen's personal information with which it has been entrusted when disclosure thereof would violate the citizen's reasonable expectation of privacy."

Burnett v. County of Bergen, 198 N.J. 408 (2009). Without ambiguity, the court held that the privacy provision "is neither a preface nor a preamble." Rather, "the very language expressed in the privacy clause reveals its substantive nature; it does not offer reasons why OPRA was adopted, as preambles typically do; instead, it focuses on the law's implementation." "Specifically, it imposes an obligation on public agencies to protect against disclosure of personal information which would run contrary to reasonable privacy interests."

Executive Order No. 21 (McGreevey 2002)

- ☐ Records where inspection, examination or copying would substantially interfere with the State's ability to protect and defend the State and its citizens against acts of sabotage or terrorism, or which, if disclosed, would materially increase the risk or consequences of potential acts of sabotage or terrorism.
- ☐ Records exempted from disclosure by State agencies' proposed rules.

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- ☐ Certain records maintained by the Office of the Governor
- ☐ Resumes, applications for employment or other information concerning job applicants while a recruitment search is ongoing
- ☐ Records of complaints and investigations undertaken pursuant to the Model Procedures for Internal Complaints Alleging Discrimination, Harassment or Hostile Environments
- ☐ Information relating to medical, psychiatric or psychological history, diagnosis, treatment or evaluation
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- ☐ Information describing a natural person's finances, income, assets, liabilities, net worth, bank balances, financial history or activities, or creditworthiness, except as otherwise required by law to be disclosed
- ☐ Test questions, scoring keys and other examination data pertaining to the administration of an examination for public employment or licensing
- ☐ Records in the possession of another department (including NJ Office of Information Technology or State Archives) when those records are made confidential by regulation or EO 9.

Other Exemption(s) contained in a State statute, resolution of either or both House of the Legislature, regulation, Executive Order, Rules of Court, any federal law, federal regulation or federal order pursuant to N.J.S.A. 47:1A-9.a.

(Please provide detailed information regarding the exemption from disclosure for which you are relying to deny access to government records. If multiple records are requested, be specific as to which exemption(s) apply to each record.)

REQUEST FOR RECORDS UNDER THE COMMON LAW

If, in addition to requesting records under OPRA, you are also requesting the government records under the common law, please check the box below.

A public record under the common law is one required by law to be kept, or necessary to be kept in the discharge of a duty imposed by law, or directed by law to serve as a memorial and evidence of something written, said, or done, or a written memorial made by a public officer authorized to perform that function, or a writing filed in a public office. The elements essential to constitute a public record are that it be a written memorial, that it be made by a public officer, and that the officer be authorized by law to make it.

☐ Yes, I am also requesting the documents under common law.

If the information requested is a "public record" under common law and the requestor has a legally recognized interest in the subject matter contained in the material, then the material must be disclosed if the individual's right of access outweighs the State's interest in preventing disclosure.

Please set forth your interest in the subject matter contained in the requested material:

Note that any challenge to a denial of a request for records under the common law cannot be made to the Government Records Council, as the Government Records Council only has jurisdiction to adjudicate challenges to denials of OPRA requests. A challenge to the denial of access under the common law can be made by filing an action in Superior Court.

1. All government records are subject to public access under the Open Public Records Act ("OPRA"), unless specifically exempt.
2. A request for access to a government record under OPRA must be in writing, hand-delivered, mailed, transmitted electronically, or otherwise conveyed to the appropriate custodian. N.J.S.A. 47:1A-5.g. The seven (7) business day response time does not commence until the records custodian receives the request form. If you submit the request form to any other officer or employee of the **Name of Agency**, that officer or employee must either forward the request to the appropriate custodian, or direct you to the appropriate custodian. N.J.S.A. 47:1A-5.h.
3. Requestors may submit requests anonymously. If you elect not to provide a name, address, or telephone number, or other means of contact, the custodian is not required to respond until you reappear before the custodian seeking a response to the original request.
4. The fees for duplication of a government record in printed form are listed on the front of this form. We will notify you of any special service charges or other additional charges authorized by State law or regulation before processing your request. Payment shall be made by cash, check or money order payable to the **Name of Agency**.
5. **You may be charged a 50% or other deposit when a request for copies exceeds \$25.** The **Name of Agency** custodian will contact you and advise you of any deposit requirements. You agree to pay the balance due upon delivery of the records. Anonymous requests in excess of \$5.00 require a deposit of 100% of estimated fees.
6. Under OPRA, a custodian must deny access to a person who has been convicted of an indictable offense in New Jersey, any other state, or the United States, and who is seeking government records containing personal information pertaining to the person's victim or the victim's family. This includes anonymous requests for said information.
7. By law, the **Name of Agency** must notify you that it grants or denies a request for access to government records within seven (7) business days after the agency custodian of records receives the request. If the record requested is not currently available or is in storage, the custodian will advise you within seven (7) business days after receipt of the request when the record can be made available and the estimated cost for reproduction.
8. You may be denied access to a government record if your request would substantially disrupt agency operations and the custodian is unable to reach a reasonable solution with you.
9. If the **Name of Agency** is unable to comply with your request for access to a government record, the custodian will indicate the reasons for denial on the request form or other written correspondence and send you a signed and dated copy.
10. Except as otherwise provided by law or by agreement with the requester, if the agency custodian of records fails to respond to you within seven (7) business days of receiving a request, the failure to respond is a deemed denial of your request.
11. If your request for access to a government record has been denied or unfilled within the seven (7) business days required by law, you have a right to challenge the decision by the **Name of Agency** to deny access. At your option, you may either institute a proceeding in the Superior Court of New Jersey or file a complaint with the Government Records Council ("GRC") by completing the Denial of Access Complaint Form. You may contact the GRC by toll-free telephone at 866-850-0511, by mail at PO Box 819, Trenton, NJ, 08625, by e-mail at grc@dca.state.nj.us, or at their web site at www.state.nj.us/grc. The Council can also answer other questions about the law. All questions regarding complaints filed in Superior Court should be directed to the Court Clerk in your County.
12. Information provided on this form may be subject to disclosure under the Open Public Records Act.



TRACE MEDIA, INC.
P.O. Box 4184,
New York, NY 10163

info@thetrace.org
thetrace.org

August 7, 2017

Dear Records Officer,

This is a joint request from Trace Media Inc. and NBC10 to your Police Department for certain information pertaining to stolen and seized firearms, information that we understand to be public under public records laws.

We request the following:

Part 1) The below listed information for each firearm reported stolen to your agency from January 1, 2012, to August 1, 2017:

- Serial Number
- Year
- Date
- Incident No
- Report Type
- Property Type – Description
- Property Gun Description
- Property Description
- Property Model
- Property Gun Caliber
- Property Count
- Any other columns available

Part 2) The below listed information for each firearm seized by your agency from January 1, 2012, to August 1, 2017:

- Serial Number
- Occur From Date
- Property Description
- Property Brand
- Property Model
- Property Gun Description
- Property Gun Caliber
- Incode Description
- Incode
- Any other columns available
- Crime Category Code

Part 3) Any and all available data dictionaries and/or code sheets so that we can ascertain the meaning of column headings, codes, abbreviations, and other information contained in the CDW BI.



TRACE MEDIA, INC.
P.O. Box 4184,
New York, NY 10163

info@thetrace.org
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As members of the news media, Trace Media and NBC10 will be making information obtained from this request available to the general public and are not requesting the records for commercial purposes.

The serial number is the most important piece of descriptive information for a firearm.

Serial numbers are assigned to specific firearms, not specific individuals, so any argument that releasing a serial number could identify, let alone endanger, a witness is without merit. Furthermore, because serial numbers serve as the identification markings for firearms, not people, any argument that gun owners have a right to privacy regarding the serial numbers of their weapons is equally flawed.

Firearm serial numbers by themselves cannot be used to identify an individual or a witness. The U.S. federal government does not have a comprehensive firearm registry, and in even in states where registries do exist, the information contained therein is not open to the general public. Moreover, while serial numbers are designed to aid in the identification of specific firearms, their distinctiveness is not absolute. Under federal regulations, serial numbers may be duplicated by different manufacturers. For example, if Manufacturer A produces a handgun with serial number 12345, Manufacturer B can also produce a handgun with serial number 12345 and still be in compliance with the law.

The release of serial numbers would also not hinder a law enforcement investigation. To argue such would be akin to saying that serial numbers somehow open a window into a police investigative file, which they do not. Besides, serial numbers often appear in publicly accessible court documents, albeit without the centralization key for newsgathering and analysis.

This request is part of a national project exploring the use of stolen guns in crime, an issue of paramount import to the citizens of your community and the brave police officers who protect and serve them.

So far, more than 200 public law enforcement agencies around the country have released serial number information to us in response to public records requests for this project.

We hope that your agency takes our arguments into consideration when reviewing our records request.

We ask that the requested records be provided in a .xlsx, .xls, .csv, .txt, or another spreadsheet-compatible format. We also ask that you email the records to Jim.ODonnell@NBCUNI.com



TRACE MEDIA, INC.
P.O. Box 4184,
New York, NY 10163

info@thetrace.org
thetrace.org

When releasing the records, please be mindful that .xlsx and .xls file extensions may delete leading zeros from serial numbers – turning, for example, a serial number that is actually 012345 into 12345. This could skew our analysis. To ensure that this does not happen, please take care to download and import the serial number column in a “Text” number format.

If there are fees associated with this request, we would appreciate if you informed us of the estimated charges in advance.

If you have any questions or concerns, please do not hesitate to contact

Jim O'Donnell
Senior Investigative Producer
NBC10
215-913-0273

Sent 10/4/17
No Such Documents
DM

Donna Mull

From: Donna Mull
Sent: Wednesday, October 04, 2017 8:29 AM
To: Alexandra Seibert
Subject: RE: OPRA request- Borough of Pemberton - Burlington County

The property you are requesting information for is not in Pemberton Borough, more than likely it is in Pemberton Township.

Thank you,

Donna

Donna J. Mull
Administrator
Borough of Pemberton
50 Egbert Street
Pemberton, NJ 08068
609-894-8222 EXT - 5
609-894-9417 (FAX)
dmull@pemberton.comcastbiz.net

CONFIDENTIALITY NOTE: *This transmission is intended only for the addressee, and may contain privileged and/or confidential information from the Borough of Pemberton. If you have received this transmission in error, please notify us immediately by telephone, return this transmission, and delete or destroy any copies.*

From: Alexandra Seibert [<mailto:alexandra.seibert@redfin.com>]
Sent: Tuesday, October 03, 2017 4:22 PM
To: Donna Mull
Subject: OPRA request- Borough of Pemberton - Burlington County

Hello,

Please send all info to this email address.

Warm Regards,

ALEXANDRA SEIBERT | **REDFIN** | TRANSACTION COORDINATOR

alexandra.seibert@redfin.com | [Tel:856-649-4631](tel:856-649-4631) | License #:1537411



Rowan College at BURLINGTON COUNTY

OPEN PUBLIC RECORDS ACT REQUEST FORM

601 Pemberton Browns Mills Road
Pemberton, NJ 08068

Important Notice

The last page of this form contains important information related to your rights concerning government records. Please read it carefully.

Requestor Information – Please Print

First Name Alexandra MI Last Name seibert

E-mail Address Alexandra.seibert@redfin.com

Mailing Address 9 steeplechase dr.

City blackwood State NJ Zip 08012

Telephone 856 649 4631 FAX

Preferred Delivery: Pick Up US Mail On-Site Inspect Fax E-mail

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I **HAVE / HAVE NOT** been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature Alexandra seibert Date 10/3/17

Payment Information

Maximum Authorization Cost \$

Select Payment Method

Cash ☐ Check ☐ Money Order ☐

Fees: Letter size pages - \$0.05 per page
Legal size pages - \$0.07 per page
Other materials (CD, DVD, etc) – actual cost of material
Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Special service charge dependent upon request.

Record Request Information: Please be as specific as possible in describing the records being requested. Also, please note that your preferred method of delivery will only be accommodated if the custodian has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Requesting ALL permits both open and closed for construction, plumbing, and electrical for a transfer of sale.

Property- 17 Harvest Lane, Pemberton NJ 08068
Lot- 00006
Block-00812 03

AGENCY USE ONLY

AGENCY USE ONLY

AGENCY USE ONLY

Est. Document Cost _____ Est. Delivery Cost _____ Est. Extras Cost _____ Total Est. Cost _____ Deposit Amount _____ Estimated Balance _____ Deposit Date _____	Disposition Notes Custodian: If any part of request cannot be delivered in seven business days, detail reasons here. In Progress - Open _____ Denied - Closed _____ Filled - Closed _____ Partial - Closed _____	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th style="width:60%;">Tracking Information</th> <th style="width:40%;">Final Cost</th> </tr> <tr> <td>Tracking # _____</td> <td>Total _____</td> </tr> <tr> <td>Rec'd Date _____</td> <td>Deposit _____</td> </tr> <tr> <td>Ready Date _____</td> <td>Balance Due _____</td> </tr> <tr> <td>Total Pages _____</td> <td>Balance Paid _____</td> </tr> <tr> <td align="center" colspan="2">Records Provided _____</td> </tr> <tr> <td align="center" colspan="2">Custodian Signature _____</td> </tr> <tr> <td align="center" colspan="2">Date _____</td> </tr> </table>	Tracking Information	Final Cost	Tracking # _____	Total _____	Rec'd Date _____	Deposit _____	Ready Date _____	Balance Due _____	Total Pages _____	Balance Paid _____	Records Provided _____		Custodian Signature _____		Date _____	
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■ Ongoing investigations of non-law enforcement agencies (must prove disclosure is inimical to the public interest) N.J.S.A. 47:1A-3.a.
Public defender records N.J.S.A. 47:1A-5.k.

■ Upholds exemptions contained in other State or federal statutes and regulations, Executive Orders, Rules of Court, and privileges created by State Constitution, statute, court rule or judicial case law N.J.S.A. 47:1A-9

■ Personnel and pension records (however, the following information must be disclosed:

- An individual's name, title, position, salary, payroll record, length of service, date of separation and the reason for such separation, and the amount and type of any pension received
- When required to be disclosed by another law, when disclosure is essential to the performance of official duties of a person duly authorized by this State or the US, or when authorized by an individual in interest
- Data contained in information which disclose conformity with specific experiential, educational or medical qualifications required for government employment or for receipt of a public pension, but not including any detailed medical or psychological information N.J.S.A. 47:1A-10

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A public record under the common law is one required by law to be kept, or necessary to be kept in the discharge of a duty imposed by law, or directed by law to serve as a memorial and evidence of something written, said, or done, or a written memorial made by a public officer

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☐ Yes, I am also requesting the documents under common law.

If the information requested is a "public record" under common law and the requestor has a legally recognized interest in the subject matter contained in the material, then the material must be disclosed if the individual's right of access outweighs the State's interest in preventing disclosure.

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Note that any challenge to a denial of a request for records under the common law cannot be made to the Government Records Council, as the Government Records Council only has jurisdiction to adjudicate challenges to denials of OPRA requests. A challenge to the denial of access under the common law can be made by filing an action in Superior Court.

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5. **You may be charged a 50% or other deposit when a request for copies exceeds \$25.** The **Name of Agency** custodian will contact you and advise you of any deposit requirements. You agree to pay the balance due upon delivery of the records. Anonymous requests in excess of \$5.00 require a deposit of 100% of estimated fees.
6. Under OPRA, a custodian must deny access to a person who has been convicted of an indictable offense in New Jersey, any other state, or the United States, **and** who is seeking government records containing personal information pertaining to the person's victim or the victim's family. This includes anonymous requests for said information.
7. By law, the **Name of Agency** must notify you that it grants or denies a request for access to government records within seven (7) business days after the agency custodian of records receives the request. If the record requested is not currently available or is in storage, the custodian will advise you within seven (7) business days after receipt of the request when the record can be made available and the estimated cost for reproduction.
8. You may be denied access to a government record if your request would substantially disrupt agency operations and the custodian is unable to reach a reasonable solution with you.
9. If the **Name of Agency** is unable to comply with your request for access to a government record, the custodian will indicate the reasons for denial on the request form or other written correspondence and send you a signed and dated copy.
10. Except as otherwise provided by law or by agreement with the requester, if the agency custodian of records fails to respond to you within seven (7) business days of receiving a request, the failure to respond is a deemed denial of your request.
11. If your request for access to a government record has been denied or unfilled within the seven (7) business days required by law, you have a right to challenge the decision by the **Name of Agency** to deny access. At your option, you may either institute a proceeding in the Superior Court of New Jersey or file a complaint with the Government Records Council ("GRC") by completing the Denial of Access Complaint Form. You may contact the GRC by toll-free telephone at 866-850-0511, by mail at PO Box 819, Trenton, NJ, 08625, by e-mail at grc@dca.state.nj.us, or at their web site at www.state.nj.us/grc. The Council can also answer other questions about the law. All questions regarding complaints filed in Superior Court should be directed to the Court Clerk in your County.
12. Information provided on this form may be subject to disclosure under the Open Public Records Act.

Donna Mull

From: Alexandra Seibert [alexandra.seibert@redfin.com]
Sent: Tuesday, October 03, 2017 4:22 PM
To: Donna Mull
Subject: OPRA request- Borough of Pemberton - Burlington County
Attachments: 17 harvest OPRA Request Form Blank REV.doc

Hello,

Please send all info to this email address.

Warm Regards,

ALEXANDRA SEIBERT | REDFIN | TRANSACTION COORDINATOR
alexandra.seibert@redfin.com | [Tel:856-649-4631](tel:856-649-4631) | License #:1537411