DEPTFORD POLICE NJ

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

DEPTFORD POLICE DEPT 2017 NOV 17 AM 9:

DEPTFORD TOWNSHIP GLOUCESTER CO. N.J. INCORPORATED 1886

Requestor Information – Please Print

First Name Celso MI T Last Name Silva

E-mail Address [redacted]

Mailing Address 2906 Good Intent Rd

City Deptford State NJ Zip 08096

Telephone [redacted] FAX

Preferred Delivery: Pick Up ✓ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature Celso Silva Date 11/17/17.

Payment Information

Maximum Authorization Cost $ .15

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Accident Report 11/9/17

2906 Good Intent Rd
Deptford, NJ 08096

.15

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.

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 and how it will be used: 11-17-17

Insurance purposes

#5982
11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP
CLERK'S OFFICE
2017 NOV 17 AM 8:48

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 848-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Maria MI Last Name Smith

E-mail Address [redacted]

Mailing Address 67 Knollwood Drive

City Deptford State NJ Zip 08096

Telephone [redacted] FAX

Preferred Delivery: Pick Up X US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature Maria Smith Date 11/17/17.

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Police Report for identity theft Oct. 28, 2017 - Report theft at Deptford Police Station

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.

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 and how it will be used:

My identify was stolen + applied to a credit card allowing individual access to my account + want charges

#0822 11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE

2017 NOV 27 PM 3:48

DEPTFORD TOWNSHIP POLICE DEPARTMENT

COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Noel MI A. Last Name Sequinot

E-mail Address [redacted]

Mailing Address 230 South Jackson St

City Woodbury State NJ Zip 08096

Telephone [redacted] FAX

Preferred Delivery: Pick Up ____ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature [signature] Date 11-27-2017

Payment Information

Maximum Authorization Cost $ .25

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Accident 11-18-2017 Deptford Center Road

17-41622

.25

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.

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 and how it will be used:

I.N.S.

H892

11/27/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE
2017 NOV 20 PM 1:20

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Barbara MI ____ Last Name Springer

E-mail Address ____

Mailing Address 1750 Deptford Center Rd

City Deptford State NJ Zip 08096

Telephone [redacted] FAX ____

Preferred Delivery: Pick Up X US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature B Springer Date 11/20/17

Payment Information

Maximum Authorization Cost $ 20

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Accident report
10/28/17
Corner of Almonesson/ Clements Bridge

17-038668

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.

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 and how it will be used: Insurance

Property damage

11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE

2017 NOV 15 AM 9:

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Michael MI ____ Last Name Rosania

E-mail Address [redacted]

Mailing Address 129 Valley Forge Way

City Deptford State NJ Zip 08096

Telephone [redacted] FAX ____

Preferred Delivery: Pick Up ✓ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature [signature] Date 11/15/17

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Harassment 11/10/17
129 Valley Forge Way
Margurite Rosania

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.

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 and how it will be used:

_____

_____

_____

_____

_____

_____

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE
2017 NOV 20 AM 10: 39

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Cheryl MI A Last Name Taylor

E-mail Address [redacted]

Mailing Address 140 Acorn Dr.

City Mt. Royal State NJ Zip 08061

Telephone [redacted] FAX

Preferred Delivery: Pick Up ✓ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature Cheryl Taylor Date 11/20/17

Payment Information

Maximum Authorization Cost $ .15

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Car accident report – John Taylor
10/22/17
Almosson Rd & Clements Bridge Rd.
Case# 17-37884

.15

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.

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Please set forth your interest in the subject matter contained in the requested material and how it will be used:
Insurance & Court.

11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

#3992
11/16/17

DEPTFORD TWP POLICE
2017 NOV 15 AM 11:58

DEPTFORD TOWNSHIP POLICE DEPARTMENT

COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-0564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name DENNIS MI D Last Name PKOLST

E-mail Address

Mailing Address 220 HAMPSHIRE

City DEPTFORD State NJ Zip 08096

Telephone [redacted] FAX

Preferred Delivery: Pick Up ____ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature [signature] Date 11/

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

ACCIDENT ON Delsie Drive 5:30 PM

10/12/17

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.

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Please set forth your interest in the subject matter contained in the requested material and how it will be used:

INSURANCE COMPANY

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE DT

2017 NOV 20 AM 9:46

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name MICHAEL MI ____ Last Name ORIENTE

E-mail Address ____

Mailing Address 100 POP MOYLAN BLD

City DEPTFORD State NJ Zip 08096

Telephone [redacted] FAX ____

Preferred Delivery: Pick Up ____ US Mail ✓ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature Michael Oriente Date 11-20-17

Payment Information

Maximum Authorization Cost $ .10

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

ACCIDENT #17-412-81
POP MOYLAN BLD
11-16-17

.10

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.

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Please set forth your interest in the subject matter contained in the requested material and how it will be used:

INS

#592 11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

PM

DEPTFORD TWP POLICE
2017 NOV 16 AM 10:3

DEPTFORD TOWNSHIP POLICE DEPARTMENT

COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Marshall MI W Last Name Johnson

E-mail Address [redacted]

Mailing Address 1020 Laurel Oak Rd.

City Voorhees State NJ Zip 08043

Telephone [redacted] FAX

Preferred Delivery: Pick Up ____ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature [signature] Date 11/16/17

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Police report pertaining to theft on my construction site. I need a copy for company records.

10-12-2017 17-036644

Victim

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.

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Please set forth your interest in the subject matter contained in the requested material and how it will be used:

It will be placed in a file for the house that the material was stolen from so that Ryan Homes will have the theft on record.

#6172
11/2017

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE
2017 NOV 20 PM 12:43

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Stacy MI L Last Name Isler

E-mail Address [redacted]

Mailing Address 1 Magnolia Court

City Sicklerville State N.J. Zip 08081

Telephone [redacted] FAX

Preferred Delivery: Pick Up ____ US Mail ____ EMAIL ✓

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature Stacy Isler Date 11/20/17

Payment Information

Maximum Authorization Cost: $ 0

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Theft Report
11/3/17
1295 Hurfville Rd. Deptford, N.J.
17-039634

victim – Ø

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.

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Please set forth your interest in the subject matter contained in the requested material and how it will be used:

Needed DMV, Bank

#582
11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

#8274
11/16/17

DEPTFORD TWP POLICE
2017 NOV 15 PM 2:23

DEPTFORD TOWNSHIP POLICE DEPARTMENT

COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name NELSON MI P Last Name HOUSTON

E-mail Address [redacted]

Mailing Address 968 Kings Highway, Apt. 5-03

City W. Deptford State NJ Zip 08086-9321

Telephone 609-502-7324 FAX

Preferred Delivery: Pick Up ✓ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature Nelson Houston Date 11/15/17

Payment Information

Maximum Authorization Cost $ 10

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Accident Report 11-10-17 Cooper Street
Case 17-040088

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.

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Please set forth your interest in the subject matter contained in the requested material and how it will be used:

INSURANCE

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP
POLICE

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Sara MI V Last Name DiRenzo

E-mail Address [redacted]

Mailing Address 2000 Clements Bridge Rd

City Deptford State NJ Zip 08096

Telephone [redacted] FAX

Preferred Delivery: Pick Up ✓ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature [signature] Date 11-20-17

Payment Information

Maximum Authorization Cost $ Ø

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

11-5-17
Shoplifting / theft by deception
DSW

Ø

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.

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 and how it will be used:

court

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE
2017 NOV 20 PM 3:16

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL.: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name GEORGE MI J Last Name GIESSNER JR

E-mail Address [redacted]

Mailing Address 603 HIDEN OAKS DR

City DEPTFORD State NJ Zip 08096

Telephone [redacted] FAX

Preferred Delivery: Pick Up ____ US Mail ✓ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature [signature] Date 11/20/17

Payment Information

Maximum Authorization Cost $ .15

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

ACCIDENT REPORT (CAR) CEMENTS - BRIDGEPORT 2
LOCUST GROVE BOULEVARD

17-039364 .15

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.

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 and how it will be used:
INSURANCE

[signature] 11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE D1

DEPTFORD TOWNSHIP POLICE DEPARTMENT

COMMON LAW REQUEST FOR INFORMATION FORM

2017 NOV 16 PM 2:54

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Jenna MI R Last Name Gayeski

E-mail Address [redacted]

Mailing Address 143 Fredline Drive

City Deptford State NJ Zip 08096

Telephone [redacted] FAX

Preferred Delivery: Pick Up ✓ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature Jenna Gayeski Date 11-16-17

Payment Information

Maximum Authorization Cost: $ .10

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Accident Report- 11/11/17
Walnut Ave Deptford NJ

case # 17-040089

.10

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, o directed by law to serve as a memorial and evidence of something written, said, or done, or a written memorial made by a public office 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 written memorial, that it be made by a public officer, and that the officer be authorized by law to make it.

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

Please set forth your interest in the subject matter contained in the requested material and how it will be used: 11-17-17 D

Insurance

$.05 C

11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Cou

DEPTFORD POLICE DEPT
2017 NOV 15 P 3:38

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Kwsind MI D Last Name Dean

E-mail Address [redacted]

Mailing Address ~~454 R~~ PO Box 454

City Woodbury State NJ Zip 08096

Telephone [redacted] FAX

Preferred Delivery: Pick Up ✓ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature Kwsind Dean Date 11-15-2017

Payment Information

Maximum Authorization Cost: $ .10

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Accident Report 11-10-17

Deptford Center Rd.

Case # 17-040535

DEPTFORD POLICE DEPT 2017 NOV 15 P 3:38

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.

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 and how it will be used: .10

Insurance #082

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE
2017 NOV 17 PM 2:21

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Sasha MI I Last Name Calen

E-mail Address [redacted]

Mailing Address 17 S 36th Street

City Camden State NJ Zip 08105

Telephone [redacted] FAX

Preferred Delivery: Pick Up ✓ US Mail ___ EMAIL ✓

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature Sasha Calen Date 11.16.17

Payment Information

Maximum Authorization Cost $ 10

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Car accident

Nov 9th, 2017

Delsea Drive
Deptford

17-40435 11-17-17 D1 10

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.

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 and how it will be used:

Insurance.

#0952 11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE
2017 NOV 20 AM 34

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Antoinette MI R Last Name CAPPS

E-mail Address [redacted]

Mailing Address 717 Cotswold Rd

City Somerdale State NJ Zip 08083

Telephone [redacted] FAX _____

Preferred Delivery: Pick Up _____ US Mail _____ EMAIL _____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature Antoinette Capps Date 11-20-17

Payment Information

Maximum Authorization Cost $ .10

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Need Accident Report 11/15
Clemens Bridge RD, Deptford NJ.

Case# 17-41129

.10

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.

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 and how it will be used:

For Insurance Company

11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE DT
2017 NOV 08 AM 10: 33

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name DAVID MI ____ Last Name Corn

E-mail Address [redacted]

Mailing Address 119 Trent AD

City Turnersville State NJ Zip 08012

Telephone [redacted] FAX ____

Preferred Delivery: Pick Up ✓ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature [signature] Date 11.20.17

Payment Information

Maximum Authorization Cost: $ .15

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Child custody David Corn
vs
Sharee Haff

11.10.17
Deptford mall parking lot
failure to drop kids off
at Sears

.15

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.

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 and how it will be used:

Court

[signature] 11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE

2017 NOV 20 PM 2:17

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Dania MI K Last Name Daniels

E-mail Address [redacted]

Mailing Address 204 Senate Court

City Camden State NJ Zip 08103

Telephone [redacted] FAX

Preferred Delivery: Pick Up ____ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature [signature] Date 11/20/17

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

I am requesting an Accident Report the date of incident was 11/14/17 on Almonesson Rd in Front of Pick's Department store. Case # 17-41059
Drivers Larry Daniels
1st Page

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.

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 and how it will be used: PM

INS

#052

11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE

DEPTFORD TWP POLICE

DEPTFORD TOWNSHIP POLICE DEPARTMENT

COMMON LAW REQUEST FOR INFORMATION FORM

2017 Chapel Street, Deptford, NJ 08096
TEL: (856) 686-2202 FAX: (856) 845-4564
policerecords@deptford-nj.org

2017 NOV 17 AM 11:13

Requestor Information – Please Print

First Name CARL MI W Last Name DAVIS

E-mail Address [redacted]

Mailing Address 183 N. MAIN ST.

City Mullica Hill State NJ Zip 08062

Telephone [redacted] FAX

Preferred Delivery: Pick Up ✓ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature Carl W. Davis Date 11/17/17

Payment Information

Maximum Authorization Cost $ .10

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

ACCIDENT REPORT FOR INCIDENT 10/24/17 INVOLVING SON JACOB DAVIS ON TANYARD RD. CASE ID 17-38169

10-17-17 .10

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.

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 and how it will be used:

INSURANCE REQUEST

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

2017 NOV 20 AM 8:49

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Gianna MI ____ Last Name Maida

E-mail Address [redacted]

Mailing Address 40 Turtle Creek Dr.

City Mullica Hill State NJ Zip 08062

Telephone [redacted] FAX ____

Preferred Delivery: Pick Up X US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature Gianna Maida Date 11/20/17.

Payment Information

Maximum Authorization Cost $ .10

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

1) Accident Report
2) 11/15/17
3) Almonesson Rd
4) 2017041212

.10

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.

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 and how it will be used:

IAIS

Gianna Maida 11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE
2017 NOV 20 PM 3:44

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Justin MI S Last Name Magers

E-mail Address [redacted]

Mailing Address 455 Deptford Ave Apt 610

City Westville State NJ Zip 08093

Telephone [redacted] FAX

Preferred Delivery: Pick Up ✓ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature Justin Magers Date 11-20-17

Payment Information

Maximum Authorization Cost $ 0

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Domestic

Nov. 12th 2017

455 Deptford Ave #610

victim $0

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.

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 and how it will be used:

Victim

Justin Magers 11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

2017 NOV 17 PM 2:44

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Alaina MI M Last Name Mesmer

E-mail Address [redacted]

Mailing Address 238 saint Andrews Ct.

City Sewell State NJ Zip 08080

Telephone [redacted] FAX

Preferred Delivery: Pick Up ✓ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature AlainaMesmer Date 11/17/17

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

17-040573

accident Report
Intersection of Delsea Drive & Bankbridge Rd
accident on 11/10/17

Anthony Nucera

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.

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 and how it will be used: insurance

#282
11/20/17

11-21-17 - DT

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE D
2017 NOV 17 PM 3:

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Martha MI E Last Name Dickson

E-mail Address [redacted]

Mailing Address 1-C Hawthorne Woods

City Deptford State NJ Zip 08096

Telephone [redacted] FAX

Preferred Delivery: Pick Up ____ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature Martha Dickson Date 11/17/17

Payment Information

Maximum Authorization Cost $ 1.10

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Police Report from car accident.
11/9/17
Hawthorne Woods
Deptford NJ 08096

.10

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.

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 and how it will be used:

for insurance

PM 11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE

2017 NOV 20 PM 3:26

DEPTFORD TOWNSHIP POLICE DEPARTMENT

COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Denise MI — Last Name McCann

E-mail Address [redacted]

Mailing Address [redacted] View Dr. Apt B307

City Swedesboro State N.J. Zip 08085

Telephone [redacted] FAX —

Preferred Delivery: Pick Up X US Mail ___ EMAIL ___

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature Denise McCann Date 11/20/2017

Payment Information

Maximum Authorization Cost $ .10

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

1) accident report
2) 11/15/2017
3) Deptford
4) case # 2017041198

.10

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.

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 and how it will be used:

Insurance purposes

#0292 11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE
2017 NOV 20 AM 9:27

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Gerard MI J Last Name McGovern

E-mail Address [redacted]

Mailing Address 448 Geneva Court

City Wenonah State NJ Zip 08090

Telephone [redacted] FAX

Preferred Delivery: Pick Up ✓ US Mail ___ EMAIL ___

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature GJM Date 11/20/17

Payment Information

Maximum Authorization Cost $ 9

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

11-16-17

Incident Report

Case No. 17-041329

gjm919@comcast.net

e-mailed 11-28-17 - DI

Not available
DI
11-20
11-21
Not in
11-22-17
PM

by law to be kept, or necessary to be kept in the discharge of a duty imposed by law, or
of something written, said, or done, or a written memorial made by a public officer
n a public office. The elements essential to constitute a public record are that it be a
that the officer be authorized by law to make it.

common law and the requestor has a legally recognized interest in the subject matter
isclosed if the individual's right of access outweighs the State's interest in preventing

ned in the requested material and how it will be used:
was posted online without the permission of
The photo was somehow stolen online.

11/29/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

#0992
11/16/17

DEPTFORD TWP POLICE D
2017 NOV 15 AM 11:02

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name R Izabela MI L Last Name Bralinska

E-mail Address [redacted]

Mailing Address 122 Blue Ridge RD

City Voorhees State NJ Zip 08043

Telephone [redacted] FAX

Preferred Delivery: Pick Up ✓ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature [signature] Date 11-15-17

Payment Information

Maximum Authorization Cost $ victim ¢

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Wednesday night at club in deptford. keys were taken and went through my care looking at my personal information. back up carma was damaged and radio was damaged. looked every where for key could not found them, went home to find spare key could not found it then went back to the ~~care~~ car, and the keys were on the tree hanging right next to my care, feel as if it was personal and need to know who did it.

theft report 17-[illegible] Adelphia 11-2-17 17-039433

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.

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 and how it will be used:

want to know who took my keys and want to put charges on whom it was, and want to know why / missed school and need to know why.

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TOWNSHIP POLICE DEPARTMENT

COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Theresa MI ____ Last Name Buckley

E-mail Address ____

Mailing Address 604 10th St.

City National Pk. State NJ Zip 08063

Telephone [redacted] FAX ____

Preferred Delivery: Pick Up X US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature [signature] Date 11-16-17

Payment Information

Maximum Authorization Cost $ 20

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Accident 11-13-17 Clements Bridge Rd.

Case # 17-040854

, 20

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.

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 and how it will be used:

insurance

[signature] 11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

11-11-17

DEPTFORD TWP POLICE

2017 NOV 16 AM 11:46

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Richard MI L Last Name ABRAMS

E-mail Address [redacted]

Mailing Address 606 Lynda Ave

City Blackwood State NJ Zip 08012-2832

Telephone [redacted] FAX

Preferred Delivery: Pick Up X US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature Richard L. Abrams Date NOV 16 2017

Payment Information

Maximum Authorization Cost $ .10

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Accident - 11:15 2017 cooper st. 17-41174

.10

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.

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 and how it will be used: FOR INS.

#0972
11/2017

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP
POLICE
2017 NOV 30 AM 11:35

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name: Carole MI: ____ Last Name: Brodkin

E-mail Address: [redacted]

Mailing Address: 339 Heritage Loop

City: Glassboro State: NJ Zip: 08028

Telephone: [redacted] FAX: ____

Preferred Delivery: Pick Up ____ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature: Carole Brodkin Date: 11-20-17

Payment Information

Maximum Authorization Cost: $ .20

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Accident - 17-40884, date ~~11-17~~ 11-13-17,
Clements-Bridge Rd.,

.20

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.

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 and how it will be used:

Insurance

HSG 11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

RM

DEPTFORD TWP POLICE 2017 NOV 15 PM

DEPTFORD TOWNSHIP GLOUCESTER CO. N.J. INCORPORATED 1695

DEPTFORD POLICE NJ

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name: Chelsy MI: A Last Name: miller

E-mail Address: [redacted]

Mailing Address: ~~225~~ Warren Street

City: Gloucester City State: NJ Zip: 08030

Telephone: [redacted] FAX: ____

Preferred Delivery: Pick Up ✓ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature: Chelsy miller Date: 11-16-17

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

accident 11-12-17

Delsea

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.

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 and how it will be used:

for insurance.

#1092
11/29/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE D

2017 NOV 15 AM 11:47

DEPTFORD TOWNSHIP POLICE DEPARTMENT

COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Rakia MI S Last Name Morgan

E-mail Address [redacted]

Mailing Address 1480 Clements Bridge Rd

City Deptford State NJ Zip 08096

Telephone [redacted] FAX

Preferred Delivery: Pick Up ✓ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature [signature] Date 11-15-2017

Payment Information

Maximum Authorization Cost $ 0

Lowes

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Shoplifting Report – 17-039121

for dates

10/26/2017

10/28/2017

10/29/2017

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.

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 and how it will be used:

For Lowes Store Shoplifting

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD POLICE NJ

DEPTFORD TOWNSHIP POLICE DEPARTMENT

COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

DEPTFORD POLICE NJ
2017 NOV 20

DEPTFORD TOWNSHIP GLOUCESTER CO. N.J. P.D. INCORPORATED 1958

MD

Requestor Information – Please Print

First Name Donna Reim MI M Last Name Reim

E-mail Address

Mailing Address 318 South Evergreen Ave

City Woodbury State NJ Zip 08096

Telephone [redacted] FAX

Preferred Delivery: Pick Up ____ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature Donna Reim Date 11-20-17.

Payment Information

Maximum Authorization Cost $ .15

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

17-041476

Acct Report
tanyard Road 11-17-17

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.

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 and how it will be used:

Ins. Needs Copy

$5.15
11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE
DEC 20 AM 11:27

DEPTFORD TOWNSHIP POLICE DEPARTMENT
COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Janet MI L Last Name Robertshaw
E-mail Address jlr3298@verizon.net
Mailing Address 162 Carson Ct.
City Woodbury State NJ Zip 08096
Telephone [redacted] FAX
Preferred Delivery: Pick Up ✓ US Mail ___ EMAIL ___

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature Janet Robertshaw Date 11/20/17

Payment Information

Maximum Authorization Cost $ 9

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

1) accident report
2) thurs 11/16/17
3) Woodbury – at home

9

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.

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 and how it will be used:

Need for car insurance 17-041261
victim 11-20-17-DV
#11592
11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP
POLICE

DT

DEPTFORD TOWNSHIP POLICE DEPARTMENT

COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

Requestor Information – Please Print

First Name Justin MI D Last Name Rogers

E-mail Address Justin R 215 @ hotmail.com

Mailing Address 428 Seneca St

City Essington State PA Zip 19029

Telephone [redacted] FAX

Preferred Delivery: Pick Up ____ US Mail ____ EMAIL ✓

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature [signature] Date 11/20/2017

Payment Information

Maximum Authorization Cost $ .05

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

theft report Deptford mall 12/2007 - 12/3/2007
Sears

Case # 07-39876

.05

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, directed by law to serve as a memorial and evidence of something written, said, or done, or a written memorial made by a public offi 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 written memorial, that it be made by a public officer, and that the officer be authorized by law to make it.

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

Please set forth your interest in the subject matter contained in the requested material and how it will be used:
Clearance for Sub background investigation

11/20

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior C

DEPTFORD TOWNSHIP POLICE DEPARTMENT

COMMON LAW REQUEST FOR INFORMATION FORM

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

DT DEPTFORD POLICE DEPT
2017 NOV 20 PM 12:

Requestor Information – Please Print

First Name JOSE MI ____ Last Name REGINOS

E-mail Address ____

Mailing Address ____

City Bensalem State PA Zip 19020

Telephone [redacted] FAX ____

Preferred Delivery: Pick Up ____ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature JOSE A [illegible] Date 10.20.

Payment Information

Maximum Authorization Cost: $ .10

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

Accident Report
11-13-17
A-Lamoreaux Rd
17-041839

.10

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.

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 and how it will be used:

Ins

11/20/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE

#0192 11/16/17

DEPTFORD TOWNSHIP POLICE DEPARTMENT

COMMON LAW REQUEST FOR INFORMATION FORM

2017 NOV 15 PM 1:14

1011 Cooper Street, Deptford, NJ 08096
TEL: (856) 686-2202 / FAX: (856) 845-4564
policerecords@deptford-nj.org

PDM Done

Requestor Information – Please Print

First Name Marqurite MI ____ Last Name Rosania

E-mail Address [redacted]

Mailing Address 129 Valley Forge way / 127 Valley Forge way

City Deptford State NJ Zip 08096

Telephone [redacted] FAX ____

Preferred Delivery: Pick Up ✓ US Mail ____ EMAIL ____

If you are requesting records containing personal information, please read: Under penalty of N.J.S.A. 2C:28-3, I certify that I will not be using this information to facilitate an offense against the person I am asking information about.

Signature [signature] Date 11/15/17

Payment Information

Maximum Authorization Cost $ (2)

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 department has the technological means and the integrity of the records will not be jeopardized by such method of delivery.

anything from 10/11/17 to 11/15/17 10/19/17
CAD Report — 129 Valley Forge way
127 Valley Forge way

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.

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 and how it will be used:

court hearing on 12/22/17

Note that any challenge to a denial of a request for records under the common law can be made by filing an action in Superior Court.

DEPTFORD TWP POLICE

2017 AUG 29 AM 11:19

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Michelle MI V Last Name Connaday

Company

Mailing Address 34 Linden Ave.

City Mount Ephraim State NJ Zip 08059 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ✓ US Mail On Site Inspect

Circle One: Under penalty of N.J.S.A. 2C:28-3, [redacted] onvicted of any indictable offense under the laws of New Jersey,

Signature Michelle V [redacted] 9/17

Payment Information

Maximum Authorization Cost $ 10

Select Payment Method

Cash ✓ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite [redacted] in describing the records being requested. Also, please include the type of access requested (copy[redacted]um requested.

1) Accident
2) 8/17/17
3) Deptford Center Rd and Almonesson Rd
4) [redacted]

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open
Denied - Closed
Filed - Closed
Partial - Closed

AGENCY USE ONLY

Tracking Information
Tracking # 17-029224
Rec'd Date
Ready Date
Total Pages

Final Cost
Total -.10
Deposit
Balance Due
Balance Paid -.10

Records Provided

Custodian Signature Date

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

DEPTFORD TWP POLICE
2017 AUG 24 AM 9:50

Important Notice

he reverse side of this form contains important information related to your rights concerning government records. Please read it carefully.

equestor Information – Please Print

st Name Michael MI ____ Last Name Rosania

mpany ____

illing Address ____

y Deptford

siness Hours Tele [redacted].com

160 Extension ____

eferred Delivery:

rcle One: Under pen
fictable offense under

n convicted of any

Ignature ____

24/7

This is all one he filed out 2 opras waiting for

Payment Information

Maximum Authorization Cost $ ____

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

ecord Request Inform
nclude the type of acces

n describing the records being requested. Also, please
n requested.

Neighbor c
8/14/17
129 Valley Forge Lndg.
Mike @ Rosaniagroup.com
17-029107

Port - destruction of property
need
#17-30659

done given
CADs were
sent
waitons
on 17-29107
17-29107

[redacted]

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

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 ____

AGENCY USE ONLY

Tracking Information
Tracking # 17-29107
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total ____
Deposit ____
Balance Due ____
Balance Paid ____

Records Provided

Custodian Signature ____ Date ____

DEPTFORD TWP POLICE
2017 AUG 18 AM 10:49

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Nancy MI ____ Last Name Riding

Company ____

Mailing Address 3 Briarwood Lane

City Sewell State NJ Zip 08080 Email [redacted]

Business Hours Telephone: Area Code ____ Number ____ Extension ____

Preferred Delivery: Pick Up ____ US Mail ____ On Site Inspect ____

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 Nancy E. Riding Date 8/18/2017

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Theft report parking lot of AC Moore:
2. Date: August 16, 2017
3. ~~17-29140~~ 17-29104
4. E-mail: [redacted]@[redacted]

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

emailed

In Progress - Open ____
Denied - Closed ____
~~Filled~~ - Closed 08-21-17
Partial - Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total 0
Deposit ____
Balance Due ____
Balance Paid 0

Records Provided

Custodian Signature

Date

DEPTFORD TWP POLICE

2017 AUG 22 PM 3:06

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Mark MI A Last Name Rizzi

Company

Mailing Address 634 Central Ave

City Westville State NJ Zip 08093 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up _____ US Mail _____ On Site Inspect _____

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 Mark A. Rizzi Date 8-22-17

Payment Information

Maximum Authorization Cost $ 10

Select Payment Method

Cash X Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Incident report
8-11-17
at above address

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

DJ

In Progress - Open
Denied - Closed
Filed - Closed 8-22-17
Partial - Closed

AGENCY USE ONLY

Tracking Information
Tracking # 17-028452
Rec'd Date
Ready Date
Total Pages

Final Cost
Total 10
Deposit
Balance Due
Balance Paid 10

Records Provided

AUG 30 2017

Custodian Signature Date

DEPTFORD TWP POLICE

2017 AUG 24 AM 10:51

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Jasmine MI A Last Name Rodriguez

Company

Mailing Address 54 Pedrick Ave

City Williamstown State NJ Zip 08094 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up X US Mail On Site Inspect

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 Jasmine Rodriguez Date 08/24/17

Payment Information

Maximum Authorization Cost $ ϕ

Select Payment Method

Cash Check Money Order

Fees: Letter Size @$0.05 Page or Smaller
Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Assult & Harrasment
2. 8-4-17
3. Adelphia's
4. 17-027479
4. [redacted]

AGENCY USE ONLY

Est. Document Cost
~~Est. Delivery Cost~~
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance
Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

DV

In Progress - Open
Denied - Closed
(Filed) - Closed 08-24-17
Partial - Closed

AGENCY USE ONLY

Tracking Information
Tracking # 17-027479
Rec'd Date
Ready Date
Total Pages

Final Cost
Total ϕ
Deposit
Balance Due
Balance Paid ϕ

Records Provided

Custodian Signature Date

DEPTFORD TWP POLICE 2017 AUG 24 AM 11:29

DEPTFORD POLICE 2017 AUG 24 AM

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Todd MI ____ Last Name Rapczynski

Company Inspira Health Network

Mailing Address 238 South Evergreen Ave

City Woodbury State NJ Zip 08096 Email IHN.org

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension ____

Preferred Delivery: Pick Up X US Mail ____ On Site Inspect ____

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 [signature] Date 8.24.17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Copy of Accident Form for Paramedic Unit

DOI. 8.16.17

Glassboro Road → Drivers Name = Sarah Sabella

17-029069

AGENCY USE ONLY

Est. Document Cost ____
~~Est. Delivery Cost~~ ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

DI

In Progress – Open ____
Denied – Closed ____
Filled – Closed 08-24-17
Partial – Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # 17-029069
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total $ 0
Deposit ____
Balance Due ____
Balance Paid $ 0

Records Provided

Custodian Signature [signature] Date

PM

State of New Jersey DEPTFORD TWP POLICE
Deptford Township
GOVERNMENT RECORDS REQUEST FORM
2017 AUG 30 AM 8:38

Important Notice

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

Requestor Information -- Please Print

First Name Michele MI ____ Last Name Rhyn

Company ____

Mailing Address 127 Valley Forge Way

City Deptford State NJ Zip 08096 Email [redacted]

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension ____

Preferred Delivery: Pick Up ____ US Mail ____ On Site Inspect ____

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 Michelle Rhyne Date 8/30/17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

[redacted]@[redacted]

① All records for neighbor complaints
5/1/17 to present
Michael & Marguerite Rosania
129 Valley Forge Way
Deptford 08096

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

PM

In Progress - Open ____
Denied - Closed ____
Filled - Closed 8/30
Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost

Total 0
Deposit ____
Balance Due ____
Balance Paid ____

Records Provided

Custodian Signature ____ Date ____

DEPTFORD TWP POLICE

2017 AUG 29 AM 10:37

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Cara MI M Last Name Ricciotti

Company

Mailing Address 209 Clump Rd.

City Greenlane State PA Zip 18054 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ____ US Mail ____ On Site Inspect ____

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 Cara Ricciotti Date 8/29/17

Payment Information

Maximum Authorization Cost $ 10.05

Select Payment Method

Cash X Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Shoplifting BOSCOVS
3/24/08
08-00010216

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

DJ

In Progress - Open ____
Denied - Closed ____
(Filled) - (Closed) 08-29-17
Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # 08-00010216
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost

Total .05
Deposit ____
Balance Due ____
Balance Paid .05

Records Provided

Custodian Signature

Date

PM

Done
Skal
Emailed

Patricia A. Mitchell

From: [redacted]
Sent: Tuesday, August 29, 2017 9:36 AM
To: Police Records
Subject: OPRA

Accident
8-21-17
Rt. 47
17-029658

Sarah McGough

DEPTFORD TWP POLICE
2017 AUG 29 PM 1:28

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Ashley MI ____ Last Name Rose

Company ____

Mailing Address 339 Duff Ave

City Wenonah State NJ Zip 08090 Email ____

Business Hours Telephone: Area Code ____ Number ____ Extension ____

Preferred Delivery: Pick Up ✓ US Mail ____ On Site Inspect ____

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 Ashley Rose Date 8-29-17

Payment Information

Maximum Authorization Cost $ (X)

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05; Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Harrassment
2. 10-31-16
3. Above address
4. [redacted]@[redacted]

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

AD

In Progress - Open ____
Denied - Closed ____
Filled - Closed 8/29/17
Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # ____ Total ____ Final Cost 0
Rec'd Date ____ Deposit ____
Ready Date ____ Balance Due ____
Total Pages ____ Balance Paid 0

Records Provided

SEP - 5 2017

Custodian Signature ____ Date ____

DEPTFORD TWP POLICE
2017 AUG 24 PM 3:16

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name DILEK MI ____ Last Name REISOGLU

Company ____

Mailing Address 2004 Shetland Way

City Westville State NJ Zip 08093 Email [redacted]

Business Hours Telephone: Area Code ____ Number ____ Extension ____

Preferred Delivery: Pick Up ✓ US Mail ____ On Site Inspect ____

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 Dilek Reisoglu Date 08/24/17

Payment Information

Maximum Authorization Cost $ 10

Select Payment Method

Cash X Check ____ Money Order ____

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Accident
2. 08/20/17
3. Deptwood center Road
4.

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

D

In Progress – Open ____
Denied – Closed ____
Filled – Closed 8-29-17
Partial – Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # 12-029524
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total 10
Deposit ____
Balance Due ____
Balance Paid 10

Records Provided

Custodian Signature ____ Date ____

DEPTFORD TWP POLICE
2017 AUG 25 PM 1:24

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Michael MI S Last Name Rebok

Company

Mailing Address 183 E. Cohawkin Rd

City Clarksboro State NJ Zip 08020 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ✓ US Mail ____ On Site Inspect ____

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 Michael Rebok Date 8/25/17

Payment Information

Maximum Authorization Cost $ 10

Select Payment Method

Cash ✓ Check ____ Money Order ____

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

accident Report
Deptford Center Road
8/20/17

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

AD

In Progress - Open ____
Denied - Closed ____
Filed - Closed 8/25/17
Partial - Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # 17-29496
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total 10
Deposit ____
Balance Due ____
Balance Paid 10

Records Provided

SEP - 5 2017

Custodian Signature ____ Date ____

Patricia A. Mitchell

From: Michelle Rhyme <[redacted]
Sent: Wednesday, August 30, 2017 11:11 AM
To: Police Records
Subject: OPRA

Done
FM

Hello Pat,

I am requesting CADS Reports for;
127 and 129 Valley Forge Way
Deptford NJ 08096
Dates from 5/1/2017 - today

Thank you,
Michele Rhym
[redacted]

Sent from AOL Mobile Mail

DEPTFORD TWP POLICE
2017 AUG -7 PM 12:41

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Anna Maria MI ____ Last Name Petrina

Company ____

Mailing Address 120 Pop Moylan Blvd. Apt #104

City Deptford State NJ Zip 08096 Email ____

~~Business~~ Hours Telephone: Area Code [redacted] Number [redacted] Extension ____

Preferred Delivery: Pick Up ____ US Mail ____ On Site Inspect ____

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 Anna Marie Petrina Date 8-7-2017

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size @$0.05 Page or Smaller; Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Records of report from Tina Madden attacking me violently in my home. I'm D is walked with Chronic Pain & PTSD so since I was almost killed I feel I must file complaint and restraining order against her.
2. August 6th 2017 I was attacked.
3. 17-207802

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____
Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

DI

In Progress - Open ____
Denied - Closed ____
Filled - Closed 08-07-17
Partial - Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total $0
Deposit ____
Balance Due ____
Balance Paid $0

Records Provided

Custodian Signature ____ Date ____

State of New Jersey
Deptford Township

DEPTFORD TWP
POLICE

GOVERNMENT RECORDS REQUEST FORM

2017 AUG -8 PM 1:19

Important Notice

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

Requestor Information – Please Print

First Name Brenden MI M Last Name Potter

Company

Mailing Address 209 E Clements Bridge Road

City Runnemede State NJ Zip 08078 Email [redacted]

Business Hours Telephone: Area Code _____ Number _____ Extension _____

Preferred Delivery: Pick Up _____ US Mail _____ On Site Inspect _____

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 [signature] Date 8/1/17

Payment Information

Maximum Authorization Cost $ .10

Select Payment Method

Cash X Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

June 23rd Accident

Clements Bridge Road and almonesson Road.

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

D1

In Progress - Open _____
Denied - Closed _____
Filed - Closed 8-01-17
Partial - Closed _____

AGENCY USE ONLY

Tracking Information
Tracking # 17-022232
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost
Total .10
Deposit _____
Balance Due _____
Balance Paid .10

Records Provided

Custodian Signature

Date

DEPTFORD TWP POLICE

2017 AUG -8 PM 2:49

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Donna MI ____ Last Name Peters

Company Acme

Mailing Address 602 Atmoresson Rd

City Blackwood State NJ Zip 08024 Email [redacted]

Business Hours Telephone: Area Code ____ Number ____ Extension ____

Preferred Delivery: Pick Up ____ US Mail ____ On Site Inspect

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 Donna Peters Date 8/8/17

Payment Information

Maximum Authorization Cost $ .10

Select Payment Method

Cash V Check ___ Money Order ___

Fees: Letter Size @$0.05 Page or Smaller; Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Accident Report
6/29/17
Huffville Rd Deptford.

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

DY

In Progress – Open ____
Denied – Closed ____
Filled – Closed 08-08-
Partial – Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # 17-022877 Final Cost .10
Rec'd Date ____ Total ____
Deposit ____
Ready Date ____ Balance Due ____
Total Pages ____ Balance Paid -.10

Records Provided

Custodian Signature ____ Date ____

DEPTFORD TWP POLICE

2017 AUG -3 PM 2:10

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Anjaliben MI D Last Name Patel

Company

Mailing Address 59 east browning rd APT F526

City Bellmawr State NJ Zip 08031 Email [redacted]

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up X US Mail On Site Inspect

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 Anjali Patel Date 08/03/17

Payment Information

Maximum Authorization Cost $ 15

Select Payment Method

Cash X Check Money Order

Letter Size Page or Smaller @$0.05

Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

A car accident report

July 31 2017

Deptford

[redacted]

AGENCY USE ONLY

Est. Document Cost

Est. Delivery Cost

Est. Extras Cost

Total Est. Cost

Deposit Amount

Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes

Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

D

In Progress - Open

Denied - Closed

Filled - Closed 08-03-17

Partial - Closed

AGENCY USE ONLY

Tracking Information

Tracking # 17-00228-45

Rec'd Date

Ready Date

Total Pages

Final Cost

Total 15

Deposit

Balance Due

Balance Paid 15

Records Provided

Custodian Signature Date

DEPTFORD TWP POLICE

PM

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

2017 AUG -3 AM 11:42

Important Notice

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

Requestor Information -- Please Print

First Name Angela MI ____ Last Name Porto

Company ____

Mailing Address 1076 Paladin Place

City Sewell State NJ Zip 08080 Email [redacted]

Business Hours Telephone: Area Code ____ Number ____ Extension ____

Preferred Delivery: Pick Up ✓ US Mail ____ On Site Inspect ____

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 Angela Porto Date 8/3/17

Payment Information

Maximum Authorization Cost: $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Tenant passed bad check for rent - $1,000.00
2. 2/10/17
3. Rental Property is 705 Steepleclase Ct Deptford NJ 08096

+ Copy of original check please!

[redacted]

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

PM

In Progress - Open 1
Denied - Closed
Filed - Closed 8/3
Partial - Closed

AGENCY USE ONLY

Tracking Information
Tracking # 17-5361
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total ____
Deposit ____
Balance Due 0
Balance Paid ____

Records Provided

Custodian Signature ____ Date ____

DEPTFORD TWP POLICE DT

2017 AUG -4 AM 11:19

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information -- Please Print

First Name Naysa MI A Last Name Pue

Company Metro PCS (asmplanet)

Mailing Address 24 Clinton St.

City Westville State NJ Zip 08093 Email N/A

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension N/A

Preferred Delivery: Pick Up X US Mail _____ On Site Inspect _____

Circle One: Under penalty of N.J.S.A. 2C:28-3, I certify that (*HAVE* / *HAVE NOT*) been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature Naysa A Pue Date 8/15/2017

Payment Information

Maximum Authorization Cost $ .20

Select Payment Method

Cash X Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Simple assult report
2. 7/23/17
3. 1099 Delsea DR Westville NJ 08093 (case# 17-025881)
4. N/A

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

DT

In Progress - Open _____
Denied - Closed _____
(Filled) - Closed 08-4-17
Partial - Closed _____

AGENCY USE ONLY

Tracking Information
Tracking # _____
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost
Total .20
Deposit _____
Balance Due _____
Balance Paid .20

Records Provided

Custodian Signature _____ Date _____

DEPTFORD TWP POLICE

2017 AUG 18 PM 3:26

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name John MI L Last Name Paccione

Company U.S. Probation

Mailing Address

City Camden State NJ Zip [redacted] Email

Business Hours Telephone: Area Code [redacted] Number Extension

Preferred Delivery: Pick Up ✓ US Mail On Site Inspect

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 [signature] Date 8/18/17

Payment Information

Maximum Authorization Cost $ ϕ

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Roshon Simpson Is Under Federal Supervision
Incident Report For 7/31/17.

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Cost

Rev
Sto.

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

U.S employee

In Progress - Open
Denied - Closed
Filled - Closed 08-18-17
Partial - Closed

AGENCY USE ONLY

Tracking Information
Tracking #
Rec'd Date
Ready Date
Total Pages

Final Cost
Total ϕ
Deposit
Balance Due
Balance Paid ϕ

Records Provided

Custodian Signature Date

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

DEPTFORD TWP POLICE
2017 AUG 21 PM 1:55

Important Notice

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

Requestor Information – Please Print

First Name Patricia MI M Last Name Perrone

Company

Mailing Address 104 Wentz Ave

City Woodbury Heights State NJ Zip 08097 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ✓ US Mail ____ On Site Inspect ____

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 Patricia Perrone Date 8/21/17

Payment Information

Maximum Authorization Cost $ .15

Select Payment Method

Cash ✓ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

CAR Accident
8/16/17
Woodbury - Glassboro Rd + Wentz Ave
17-29067
[redacted]

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

AP

In Progress - Open ____
Denied - Closed ____
Filled - Closed 8/21/17
Partial - Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # 17-29067
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total .15
Deposit ____
Balance Due ____
Balance Paid .15

Records Provided

Custodian Signature ____ Date ____

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

DEPTFORD TWP POLICE

2017 AUG 31 AM 9:04

Important Notice

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

Requestor Information – Please Print

First Name Rosalina MI A Last Name Placido

Company

Mailing Address 14 Stuart St

City Woodbury State NJ Zip 08096 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ✓ US Mail ____ On Site Inspect ____

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 [redacted] Date 8/31/17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size @$0.05 Page or Smaller
Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Accident 08/26/17 Cooper St

[redacted] & [redacted]

Gave 1st Pas

E Mail

ck 9/5/17 notified PM

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

PM

In Progress - Open ____
Denied - Closed ____
Filled - Closed ____
Partial - Closed ____

AGENCY USE ONLY

Tracking Information Final Cost

Tracking # 17-30310 Total ____
Rec'd Date ____ Deposit ____
Ready Date ____ Balance Due ____
Total Pages ____ Balance Paid ____

Records Provided

Custodian Signature ____ Date ____

State of New Jersey
Deptford Township

DEPTFORD TWP
POLICE

GOVERNMENT RECORDS REQUEST FORM

2017 AUG 30 PM 3:04

Important Notice

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

Requestor Information – Please Print

First Name Branden MI ____ Last Name Potter

Company ____

Mailing Address 209 E Clements bridge road

City Runnemede State NJ Zip 08078 Email ____

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension ____

Preferred Delivery: Pick Up ✓ US Mail ____ On Site Inspect ____

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 [signature] Date 8/30/17

Payment Information

Maximum Authorization Cost $ 10

Select Payment Method

Cash ✓ Check ____ Money Order ____

Fees: Letter Size @$0.05 Page or Smaller
Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1) Accident
2) June 23rd 2017
3) Almonesson and Clements bridge road

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

PM

In Progress - Open ____
Denied - Closed ____
Filed - Closed 8/30
Partial - Closed ____

AGENCY USE ONLY

Tracking Information Final Cost 10

Tracking # 17-22205-AO Total ____
Rec'd Date ____ Deposit ____
Ready Date ____ Balance Due ____
Total Pages ____ Balance Paid 10

Records Provided

[signature] 8/30/17

Custodian Signature Date

DEPTFORD TWP POLICE

2017 AUG 24 AM 10:37

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Teresa MI L Last Name NEFF

Company

Mailing Address 5402 Shetland Way

City Westville State NJ Zip 08093 Email [redacted]

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up X US Mail On Site Inspect

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 Teresa Neff Date 8.24.17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ✓ Check Money Order

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Police reports from two incidents involving the slashing of my car tire on August 6, 2017 and August 19, 2017.
I am requesting paper copies of both reports.
Location: 5402 Shetland Way parking lot
Case # 17-029349 and 17-027800

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance
Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

mailed

In Progress – Open
Denied – Closed
Filled – Closed 08-24-17
Partial – Closed

AGENCY USE ONLY

Tracking Information
Tracking #
Rec'd Date
Ready Date
Total Pages

Final Cost
Total 0
Deposit
Balance Due
Balance Paid 0

Records Provided

AUG 30 2017

Custodian Signature Date

PM

DEPTFORD TWP POLICE

2017 AUG -2 AM 9:57

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information -- Please Print

First Name Maire MI M Last Name O'Neill

Company

Mailing Address 435 Oak Ave

City Deptford State NJ Zip 08096 Email [redacted]

Business Hours Telephone: Area Code _____ Number [redacted] Extension _____

Preferred Delivery: Pick Up ✓ US Mail _____ On Site Inspect _____

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 Maire M O'Neill Date 8/2/17

Payment Information

Maximum Authorization Cost $ $ 15

Select Payment Method

Cash ✓ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Accident.
7-1-2017
Rt 41

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

PM

In Progress - Open
Denied - Closed
Filled - Closed 8/2
Partial - Closed

AGENCY USE ONLY

Tracking Information

Tracking # 17-23126 Total Final Cost 15
Rec'd Date Deposit
Ready Date Balance Due
Total Pages Balance Paid 15

Records Provided

Custodian Signature Date

DEPTFORD TWP POLICE
2017 AUG -4 AM 10:34

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Tara MI L Last Name Ott

Company

Mailing Address 114 Cherrywood

City Clementon State NJ Zip 08021 Email [redacted]

Business Hours Telephone: Area Code _____ Number _____ Extension _____

Preferred Delivery: Pick Up ✓ US Mail _____ On Site Inspect _____

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 Tara Ott Date 8/4/17

Payment Information

Maximum Authorization Cost $ ~~0~~

Select Payment Method

Cash __ Check __ Money Order __

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Motor Vehicle Accident Police Report
8/3/17
Hurffville Rd Deptford NJ
[redacted] @ [redacted]
Case # 17-027283
[redacted]

AGENCY USE ONLY

Est Document Cost _____
~~Est Delivery Cost~~ _____
Est Extras Cost _____
Total Est Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

e-mailed

In Progress - Open _____
Denied - Closed _____
Filed - Closed 08-16
Partial - Closed _____

AGENCY USE ONLY

Tracking Information
Tracking # _____
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost
Total ~~0~~
Deposit _____
Balance Due _____
Balance Paid ~~0~~

Records Provided

Custodian Signature Date

DEPTFORD TWP POLICE DV

2017 AUG 25 PM 12:30

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information -- Please Print

First Name Benitza MI ____ Last Name Offenberger

Company ____

Mailing Address 316 Chestnut St

City Gibbsboro State NJ Zip 08026 Email ____

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension ____

Preferred Delivery: Pick Up ✓ US Mail ____ On Site Inspect ____

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 Benitza Offenberger Date 8-26-17

Payment Information

Maximum Authorization Cost $ 10

Select Payment Method

Cash X Check ____ Money Order ____

Fees: Letter Size @$0.05 Page or Smaller; Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Accident Report
2. not sure
3. Wallmart Deptford, Sams Club location
4. 17-29090
5. [redacted]

AGENCY USE ONLY

Est. Document Cost ____

Est. Delivery Cost ____

Est. Extras Cost ____

Total Est. Cost ____

Deposit Amount ____

Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

DV

In Progress - Open ____

Denied - Closed ____

Filed - Closed 08-25-17

Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # ____

Rec'd Date ____

Ready Date ____

Total Pages ____

Final Cost

Total 10

Deposit ____

Balance Due ____

Balance Paid 10

Records Provided

Custodian Signature ____ Date ____

RM

State of New Jersey DEPTFORD TWP POLICE
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

2017 AUG 28 PM 12:31

Important Notice

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

Requestor Information – Please Print

First Name Joseph MI P Last Name Olimpo

Company

Mailing Address 11 Maplewood Ct

City W. Deptford State NJ Zip 08066 Email [redacted]

Business Hours Telephone: Area Code 609 Number 970-0065 Extension

Preferred Delivery: Pick Up ✓ US Mail ____ On Site Inspect ____

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 [signature] Date 8/28/17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Property Release Form

8/26/17 Accident Report MaryRose Olimpo

Hurffville Rd Deptford, NJ

17-030296

[redacted]

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

PM Emailed

In Progress - Open ____
Denied - Closed 8/29
Filled - Closed 8/29
Partial - Closed ____

AGENCY USE ONLY

Tracking Information Final Cost

Tracking # 17-30296 Total ____
Rec'd Date ____ Deposit 0
Ready Date ____ Balance Due ____
Total Pages ____ Balance Paid ____

Records Provided

[signature] 8/29/17
Custodian Signature Date

DEPTFORD TWP POLICE

2017 AUG -9 PM 2:06

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Patrick MI ____ Last Name McFadden

Company ____

Mailing Address 30 Covington Ct E

City Sewell State NJ Zip 08080 Email [redacted]

Business Hours Telephone: Area Code ____ Number ____ Extension ____

Preferred Delivery: Pick Up ____ US Mail ____ On Site Inspect ____

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 [signature] Date 8/9/17

Payment Information

Maximum Authorization Cost $ 15

Select Payment Method

Cash ✓ Check ____ Money Order ____

Fees: Letter Size @$0.05 Page or Smaller; Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Accident 17-027246 : Case #

8/3/17

Honeysuckle Dr + Jasmine

[redacted]

AGENCY USE ONLY

Est. Document Cost ____

Est. Delivery Cost ____

Est. Extras Cost ____

Total Est. Cost ____

Deposit Amount ____

Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

PM

In Progress - Open ____

Denied - Closed ____

Filled - Closed ____

Partial - Closed ____

AGENCY USE ONLY

Tracking Information 17-2726

Tracking # ____ Fee ____ Final Cost .15

Rec'd Date ____ Deposit ____

Ready Date ____ Balance Due ____

Total Pages ____ Balance Paid .15

Records Provided

Custodian Signature ____ Date 10

Police Records

From: Kelly [redacted]
Sent: Monday, August 14, 2017 10:11 AM
To: Police Records
Subject: OPRA Request

I, Kelly Maccaroni, request the report that occurred on Clements Bridge Road in Deptford on 8/5/2017, report number 17-27651.

08-14-17

DEPTFORD TWP POLICE
2017 AUG -3 PM 1:50

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Ann MI J Last Name Morrison

Company Sams club

Mailing Address 2000 Clements Bridge Rd.

City Deptford State NJ Zip 08096 Email

Business Hours Telephone: Area Code Number Extension

Preferred Delivery: Pick Up US Mail On Site Inspect

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 [signature] Date 8/3/17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash Check Money Order

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

~~Lost~~ Found a diamond ring in cafe 7/31/17 Sams club

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

RM

In Progress - Open
Denied - Closed
Filled - Closed 8/3
Partial - Closed

AGENCY USE ONLY

Tracking Information Final Cost

Tracking # 17-26753 Total
Rec'd Date Deposit
Ready Date Balance Due 0
Total Pages Balance Paid

Records Provided

Custodian Signature Date

DEPTFORD TWP POLICE
D1

2017 AUG -7 PM 2:58

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Cynthia ~~Marini~~ MI A Last Name Marini

Company

Mailing Address 110 Californik Ave.

City Williamstown State NJ Zip 08094 Email [redacted]

Business Hours Telephone: Area Code _____ Number _____ Extension _____

Preferred Delivery: Pick Up X US Mail _____ On Site Inspect _____

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 Cynthia Marini Date 8/7/17

Payment Information

Maximum Authorization Cost $ .10

Select Payment Method

Cash ✓ Check ___ Money Order ___

Fees: Letter Size @$0.05 Page or Smaller; Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Accident Report requested
location- Clemens bridge RD.
7/29/17 case # 17-026648

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

D1

In Progress - Open
Denied - Closed
Filed - Closed 08-07
Partial - Closed

AGENCY USE ONLY

Tracking Information
Tracking # 17-026648
Rec'd Date
Ready Date
Total Pages

Final Cost
Total .10
Deposit
Balance Due
Balance Paid .10

Records Provided

AUG 10 '17

Custodian Signature Date

DEPTFORD TWP POLICE
2017 AUG -3 PM 3:07

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Christine MI M Last Name Mulholland

Company

Mailing Address 12 io Hampshire Dr

City Deptford State NJ Zip 08096 Email [redacted]

Business Hours Telephone: Area Code _____ Number _____ Extension _____

Preferred Delivery: Pick Up ✓ US Mail _____ On Site Inspect _____

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 Christine Mulholland Date 8-3-2017

Payment Information

Maximum Authorization Cost $ .15

Select Payment Method

Cash ~~X~~ Check ___ Money Order ___

Fees: Letter Size @$0.05 Page or Smaller
Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

accident Report
7-28-2017
Delsea Drive
[redacted]

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

D'

In Progress - Open _____
Denied - Closed _____
Filed - Closed 08-03-17
Partial - Closed _____

AGENCY USE ONLY

Tracking Information
Tracking # 17-26524
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost
Total .15
Deposit _____
Balance Due _____
Balance Paid .15

Records Provided

AUG 10 2017

Custodian Signature D

DEPTFORD TWP POLICE

2017 AUG -8 PM 2:26

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Tina MI M Last Name Madden

Company

Mailing Address 591 Breakneck Rd

City Mullica Hill State NJ Zip 08062 Email [redacted]

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up V US Mail On Site Inspect

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 [signature] Date 8-8-17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash Check Money Order

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

requesting copy of police report filed on 8-6-17 @ Dept Park Apts

case # 17-27802

incident report

[redacted]

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

e-mailed

In Progress - Open
Denied - Closed
Filed - Closed 08-09-17
Partial - Closed

AGENCY USE ONLY

Tracking Information
Tracking #
Rec'd Date
Ready Date
Total Pages

Final Cost
Total 0
Deposit
Balance Due
Balance Paid 0

Records Provided

AUG 10 2017

[signature]
Custodian Signature

[signature]
Date

DEPTFORD TWP POLICE
2017 AUG -2 PM 12:47

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information -- Please Print

First Name Kevin MI S Last Name Moore

Company

Mailing Address 160 Pennsbury Lane

City Deptford State NJ Zip 08096 Email [redacted]

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ✓ US Mail ____ On Site Inspect ____

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 Kevin Moore Date 8/1/17

Payment Information

Maximum Authorization Cost $ 1.85

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

All records associated with myself, Shanelle Talley, and my home address - (160 Pennsbury Lane, Deptford, NJ 08096)

* Incident Reports and 911 dispatch calls *
Timeframe: 1/12 - 8/17

* Cad Reports * 8/8/17
Arrest Records

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

DI

In Progress - Open ____
Denied - Closed ____
Filled - Closed 08-09-17
Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total 1.85
Deposit ____
Balance Due 2.70
Balance Paid $4.55

Records Provided

AUG 10

Paid

Custodian Signature ____ Date ____

DEPTFORD TWP POLICE

2017 AUG -7 AM 9:13

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Melissa Martinez MI C Last Name Martinez

Company

Mailing Address 1515 Piccard Court Deptford

City Deptford State NJ Zip 08096 Email

Business Hours Telephone: Area Code Number Extension

Preferred Delivery: Pick Up US Mail On Site Inspect

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 melissa martinez Date 8/7/17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash Check Money Order

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Simple Assault

7/22/17

1515 Piccard Court Deptford, NJ 08096

[redacted]

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

victim

In Progress - Open
Denied - Closed
(Filled) - (Closed) 08-07-17
Partial - Closed

AGENCY USE ONLY

Tracking Information

Tracking #
Rec'd Date
Ready Date
Total Pages

Final Cost

Total 0
Deposit
Balance Due
Balance Paid 0

Records Provided

Custodian Signature Date

DEPTFORD TWP POLICE
2017 AUG -4 PM 1:11

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Jolene MI M Last Name Moran

Company

Mailing Address 122 Hampshire Dr.

City Deptford State NJ Zip 08096 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ✓ US Mail ____ On Site Inspect ____

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 Jolene Moran Date 8-4-17

Payment Information

Maximum Authorization Cost $ .15

Select Payment Method

Cash ✓ Check ___ Money Order ___

Fees: Letter Size @$0.05 Page or Smaller
Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Police report of accident on July 28, 2017 on Cooper & Almonesson Rd.

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

AD

In Progress - Open ____
Denied - Closed ____
Filled - Closed 8/4/17
Partial - Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # L-7-210524
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total .15
Deposit ____
Balance Due ____
Balance Paid .15

Records Provided

Custodian Signature ____ Date ____

DEPTFORD TWP POLICE

2017 AUG 11 AM 11:24

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Renee MI K Last Name Methnger

Company

Mailing Address 1921 Normandy Avenue

City Deptford State NJ Zip 08096 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ✓ US Mail ____ On Site Inspect ____

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 Renee K Methnger Date 8/11/2017

Payment Information

Maximum Authorization Cost $ 1.10

Select Payment Method

Cash ✓ Check ____ Money Order ____

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Accident Report
2. 7/31/2017
3. Deptford / Hurffville Rd

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

D1

In Progress - Open ____
Denied - Closed ____
Filled - Closed 08-11-17
Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # 17-026885
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost

Total 1.10
Deposit ____
Balance Due ____
Balance Paid 1.10

Records Provided

Custodian Signature ____ Date ____

DEPTFORD TWP POLICE

2017 AUG -7 PM 12:11

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information -- Please Print

First Name Rosa MI ____ Last Name Marsden

Company ____

Mailing Address 305 Lafayette ave

City Wenonah State NJ Zip 08090 Email ____

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension ____

Preferred Delivery: Pick Up ____ US Mail ____ On Site Inspect ____

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 X Rosa Marsden Date 8-7-17

Payment Information

Maximum Authorization Cost $ 15

Select Payment Method

Cash X Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Police Report for car accident which occured on evening of July 30, 2017 4:45 pm

Zaida Pfrommer and Rosa Marsden were in the Hyundai Sonata 2011 VIN 421A - Location of accident Tanyard Road in Deptford Township

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

D

In Progress - Open ____
Denied - Closed ____
(Filled) - Closed 08-14-17
Partial - Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # 17-026280
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total 15
Deposit ____
Balance Due ____
Balance Paid 15

Records Provided

Custodian Signature ____ Date ____

DEPTFORD TWP POLICE

2017 AUG 15 PM 12:06

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Lea MI S Last Name Mason

Company

Mailing Address P.O. Box 266

City Woodbury State NJ Zip 0809[illegible] Email [redacted]

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up _____ US Mail _____ On Site Inspect _____

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 Lea S Mason Date 8/15/17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Letter Size Page or Smaller @$0.05

Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

HARASSMENT REPORT
6/13/17
IN STATION

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

PM

In Progress - Open _____
Denied - Closed _____
(Filled) - Closed 8/15
Partial - Closed _____

AGENCY USE ONLY

Tracking Information 17-20995

Tracking # _____
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost

Total _____
Deposit 0
Balance Due _____
Balance Paid _____

Records Provided

Custodian Signature

Date

DEPTFORD TWP POLICE
2017 AUG -8 PM 2:04

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Timothy MI M Last Name Moore

Company

Mailing Address 601 Harbor Lane

City Bridgeville State NJ Zip 08087 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ✓ US Mail _____ On Site Inspect _____

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 [signature] Date 8-8-17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Accident Report
July 30th
1520 Almonesson
[redacted]

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

DI e-mailed

In Progress - Open
Denied - Closed
Filled - Closed 08-17-17
Partial - Closed

AGENCY USE ONLY

Tracking Information
Tracking # 17-02679
Rec'd Date
Ready Date
Total Pages

Final Cost
Total $0
Deposit
Balance Due
Balance Paid $0

Records Provided

Custodian Signature Date

State of New Jersey
DEPT FORD LWP
Department Township
POLICE

GOVERNMENT RECORDS REQUEST FORM

2017 AUG 28 PM 3:50

Important Notice

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

Requestor Information – Please Print

First Name Bonnie MI L Last Name McMillan

Company Starlight Pediatric

Mailing Address 312 Elm Street

City Moorestown State NJ Zip 08057 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ✓ US Mail On Site Inspect

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 [signature] Date 8/28/17

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information:

To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. ACCIDENT – AUTO
2. # 17-27246
3. 24 Honeysuckle Drive, Sewell

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress	-	Open
Denied	-	Closed
Filed	-	Closed
Partial	-	Closed

AGENCY USE ONLY

Tracking Information
Tracking #
Rec'd Date
Ready Date
Total Pages

Final Cost
Total
Deposit
Balance Due
Balance Paid

Records Provided

Custodian Signature [signature] Date

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

DEPTFORD TWP PD
POLICE
2017 AUG 22 PM 3:37

Important Notice

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

Requestor Information – Please Print

First Name Kelli MI M Last Name Millner

Company

Mailing Address 250 S Wimbledon Way

City Blackwood State NJ Zip 08012 Email [redacted]

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up X US Mail ____ On Site Inspect ____

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 Kelli Millner Date 8/22/17

Payment Information

Maximum Authorization Cost $ .15

Select Payment Method

Cash ✓ Check ___ Money Order ___

Fees: Letter Size @$0.05 Page or Smaller
Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1.) Accident
2.) 8-3-17
3.) Almonesson Rd.
4.) 17-027376
[redacted]

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

DI

In Progress - Open ____
Denied - Closed ____
Filled - Closed 08-22-17
Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost

Total .15
Deposit ____
Balance Due ____
Balance Paid .15

Records Provided

Custodian Signature ____ Date ____

DEPTFORD TWP POLICE

2017 AUG 21 AM 10:56

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Mark MI ____ Last Name Massallo

Company ____

Mailing Address 4046 O" St

City Philadelphia State P.A Zip 19124 Email [redacted]

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension ____

Preferred Delivery: Pick Up ____ US Mail ____ On Site Inspect ____

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 [signature] Date 8/21/17

Payment Information

Maximum Authorization Cost $ .15

Select Payment Method

Cash X Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Custody

Dept Ford Mall

8/17/2017 - 5:48pm — 8/9/17

[redacted]

AGENCY USE ONLY

Est. Document Cost ____

Est. Delivery Cost ____

Est. Extras Cost ____

Total Est. Cost ____

Deposit Amount ____

Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes

Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

DL

In Progress - Open ____

Denied - Closed ____

Filled - Closed 08-21-17

Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # 17-028172

Rec'd Date 17-029215

Ready Date ____

Total Pages ____

Final Cost

Total .15

Deposit ____

Balance Due ____

Balance Paid .15

Records Provided

Custodian Signature [signature] Date

Police Records

From: Stepen Mierkowski [redacted]
Sent: Tuesday, August 08, 2017 4:57 PM
To: Police Records
Subject: OBRA Request

I Stephen Mierkowski, request accident report for 8/7/2017, Deptford center Road, Case # 17-27908. Please e-mail to [redacted]

Thank You, Stephen Mierkowski

The Opra expires on Thurs. 8/17

PAT

Contacted officer reply pending

08-16-17

DEPTFORD TWP POLICE
2017 AUG -9 AM 10:21

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Kevin MI S Last Name Moore

Company

Mailing Address 160 Pennsbury Lane

City Deptford State NJ Zip 08096 Email [redacted]

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ✓ US Mail ____ On Site Inspect ____

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 Kevin Moore Date 8/9/17

Payment Information

Maximum Authorization Cost $ ϕ

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Child Custody Issue # 17-028065
2. 8/8/17
3. 160 Pennsbury Lane Deptford, NJ 08096 / Deptford Township Police Station
4. [redacted]

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

DI emailed

In Progress - Open ____
Denied - Closed ____
Filed - Closed 08-11-17
Partial - Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # 17-028065
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total ϕ
Deposit ____
Balance Due ____
Balance Paid ϕ

Records Provided

Custodian Signature

Date

P/U Brian MacLacklin

DEPTFORD TWP PD
POLICE
2017 AUG 16 PM 12:34

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Daniel MI E Last Name Morgan

Company

Mailing Address 70 Steinfeld Ave

City Pittsgrove State NJ Zip 08318 Email

Business Hours Telephone: Area Code Number Extension

Preferred Delivery: Pick Up ✓ US Mail On Site Inspect

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 [signature] Date 8-16-17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Traffic Stop
2. 8-7-16
3. Deptford Mall Parking lot
4. [redacted]

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

e-mailed
DT

In Progress - Open
Denied - Closed
(Filled) - Closed 08-16-17
Partial - Closed

AGENCY USE ONLY

Tracking Information
Tracking # 17-2792
Rec'd Date
Ready Date
Total Pages

Final Cost
Total 0
Deposit
Balance Due
Balance Paid 0

Records Provided

[signature]
Custodian Signature

Date

Patricia A. Mitchell

From: tom mclaughlin [redacted]
Sent: Tuesday, August 29, 2017 10:51 AM
To: Police Records
Subject: Fw: incident report Mclaughlin (OPRA request)

Tom

On Tuesday, August 29, 2017 9:16 AM, tom mclaughlin [redacted]

Hi, Tom McLaughlin here, uncle to Deptford police officer Matt Umba

approx. Aug. 15 or 16 of this year my mother, matt's grandmother, had an incident at 102 trellis ave near the senior center pictures show a scratch on her tail lens but homeowner is saying she totally damaged his mail box and wants $249 from her but has no evidence to turn over

Is it possible to get a copy of the police report so I can contact my mothers insurance company?

Janet McLaughlin
640 First Ave
Deptford NJ 08096

any questions, you have my email address and my cell is 856-628-2191
thank you very much

Tom McLaughlin

Done

Emailed

8/29/17

PM

PM

Patricia A. Mitchell

Done 8/30/17

From: Mary Morris <[redacted]>
Sent: Tuesday, August 29, 2017 11:15 AM
To: Police Records
Subject: opra

856 468 4214

Body- accident
Mary Morris
Date of accident 8/21/2017
Location Cattell Rd
Case # 17-029637

1st page sent 8/29/1 PM

1

Patricia A. Mitchell

From: Cunard, Mark [redacted]
Sent: Friday, August 25, 2017 9:47 AM
To: Police Records
Subject: Request for report 2017001522 CCPO 17-3354

Pat,

Thank you
Mark

PM
Done

Detective Mark Cunard #284
Trial Team
Camden County Prosecutor's Office
25 North Fifth Street
Camden, New Jersey 08102
Email: [redacted]
Phone: [redacted]
Fax: [redacted]

State of New Jersey
Deptford Township

DEPTFORD TWP POLICE

GOVERNMENT RECORDS REQUEST FORM

2017 AUG 25 AM 11:30

Important Notice

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

Requestor Information – Please Print

First Name Brendan MI R Last Name Mills

Company

Mailing Address 1809 Southside Ave

City Deptford State NJ Zip 08096 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ____ US Mail ____ On Site Inspect ____

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 [signature] Date 8/24/17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size @$0.05 Page or Smaller
Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Assult @ Home Depot
2. 8/20/17
3. Deptford Home Depot
4. No #

[redacted]

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

PM

In Progress - Open ____
Denied - Closed ____
Filled - Closed 8/28
Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # 17-29520
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost

Total ____
Deposit 0
Balance Due ____
Balance Paid ____

Records Provided

[signature] 8/28/17

Custodian Signature Date

PM

DEPTFORD TWP POLICE

2017 AUG 25 PM 3:23

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Michael MI G Last Name McDonnell JR

Company

Mailing Address 1107 Monmouth Road

City Deptford State NJ Zip 08096 Email [redacted]

Business Hours Telephone: Area Code _____ Number _____ Extension _____

Preferred Delivery: Pick Up _____ US Mail _____ On Site Inspect _____

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 [redacted] Date 8-25-17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Fraud report 8-25-17

Came in 17-030-129

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

PM

In Progress - Open _____
Denied - Closed _____
Filled - Closed 8/25
Partial - Closed _____

AGENCY USE ONLY

Tracking Information
Tracking # 17-30129
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost
Total _____
Deposit 0
Balance Due _____
Balance Paid _____

Records Provided

0

Custodian Signature _____ Date _____

PM

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

DEPTFORD TWP POLICE
2017 AUG 28 PM 1:54

Important Notice

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

Requestor Information – Please Print

First Name Stuart MI ____ Last Name Merrian

Company ____

Mailing Address 355 Tylers Mill Road

City Sewell State NJ Zip 08080 Email ____

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension ____

Preferred Delivery: Pick Up ✓ US Mail ____ On Site Inspect ____

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 [signature] Date 8/28/17

Payment Information

Maximum Authorization Cost $ 1.15

Select Payment Method

Cash ✓ Check ____ Money Order ____

Fees: Letter Size @$0.05 Page or Smaller
Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

accident 8/23/17 Cooper St.

AGENCY USE ONLY

Est. Document Cost ____
~~Est. Delivery Cost~~ ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

PM

In Progress - Open ____
Denied - Closed ____
Filed - Closed 8/28
Partial - Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # 17-2986
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total $ 1.15
Deposit ____
Balance Due ____
Balance Paid 1.15

Records Provided

[signature]

Custodian Signature Date

DEPTFORD TWP POLICE

2017 AUG 23 AM 9:42

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Shawn MI K Last Name McGovern

Company

Mailing Address 1183 Byrd

City DEPTFORD State NJ Zip 08096 Email [redacted]

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ____ US Mail ____ On Site Inspect ____

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 [redacted] Date 8/23/17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Assault

8/22/17

17-029-789

[redacted]

AGENCY USE ONLY

Est. Document Cost ____

Est. Delivery Cost ____

Est. Extras Cost ____

Total Est. Cost ____

Deposit Amount ____

Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

PM

In Progress - Open ____
Denied - Closed ____
Filed - Closed 9/6
Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # 17-29789

Rec'd Date ____

Ready Date ____

Total Pages ____

Final Cost

Total ____

Deposit 0

Balance Due ____

Balance Paid ____

Records Provided

Custodian Signature ____ Date ____

Deptford Township

DEPTFORD TWP POLICE

OPEN PUBLIC RECORDS ACT REQUEST FORM

Ph: 856-845-5300 Fax:

2017 AUG 28 AM 8:50

PUBLIC RECORDS

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 Jeffrey MI ____ Last Name Devlin

E-mail Address [redacted]

Mailing Address 2022 WASHINGTON BLVD

City ROBBINSVILLE State NJ Zip 08691

Telephone [redacted] FAX [redacted]

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

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 NOT*** been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature _____ Date 8/28/2017

Payment Information

Maximum Authorization Cost $14.75

Select Payment Method

Cash Check Money Order

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.

Motor vehicle accident reports for the dates listed below. Please email to data@legalplex.com if possible (or) fax to 609-961-6661.

Start Date 8/13/2017

End Date 8/26/2017

AGENCY USE ONLY

Est. Document Cost _____

Est. Delivery Cost _____

Est. Extras Cost _____

Total Est. Cost _____

Deposit Amount _____

Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes

Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

D1

In Progress - Open _____

Denied - Closed _____

Filled - Closed 09-08-17

Partial - Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____

Rec'd Date _____

Ready Date _____

Total Pages _____

Final Cost

Total _____

Deposit _____

Balance Due _____

Balance Paid 14.75

Records Provided

Custodian Signature _____ Date _____

DEPTFORD TWP POLICE
2017 AUG -8 PM 2:09

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information -- Please Print

First Name Marlee MI R Last Name Lakernick

Company

Mailing Address 67 S. Syracuse Dr

City Cherry Hill State NJ Zip 08034 Email [redacted]

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up _____ US Mail _____ On Site Inspect _____

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 Marlee Lakernick Date 8/8/17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

- Fraud Report
- 7/9/17
- theft in cherry hill, transactions all in Deptford
- [redacted]

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

AD

In Progress - Open _____
Denied - Closed _____
Filed - Closed _____
Partial - Closed _____

AGENCY USE ONLY

Tracking Information
Tracking # 7-21-17
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost
Total 0
Deposit _____
Balance Due _____
Balance Paid 0

Records Provided

Custodian Signature _____ Date _____

Patricia A. Mitchell

From: Michael D. Longfellow <[redacted]
Sent: Monday, August 28, 2017 1:33 PM
To: Police Records
Subject: Police Report

Pat,

Could I please get the police reports associated with case number 17-28453. Also in the CAD it says reference case number 17-28452. If there are any relevant reports with that case number could I also get them.

Thank you,

Det. M. Longfellow #10-160
Washington Township Police Department
1 McClure Drive
Sewell, NJ 08080
[redacted]

DEPTFORD TWP POLICE
2017 AUG 25 PM 1:07

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Lauren MI ____ Last Name Lee

Company ____

Mailing Address 42 Joseph Dr.

City Sewell State NJ Zip 08080 Email ____

Business Hours Telephone: Area Code ____ Number [redacted] Extension ____

Preferred Delivery: Pick Up ✓ US Mail ____ On Site Inspect ____

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 L. Lee Date 8-25-17

Payment Information

Maximum Authorization Cost $ .15

Select Payment Method

Cash ✓ Check ____ Money Order ____

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

- accident report
- August 12
- Deptford Twp. Clementon Bridge Rd

[redacted]

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

AD

In Progress - Open ____
Denied - Closed ____
Filed - Closed 8/25/17
Partial - Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # 17-2597
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total .15
Deposit ____
Balance Due ____
Balance Paid .15

Records Provided

Custodian Signature ____ Date ____

DEPTFORD TWP POLICE

2017 AUG -3 AM 10:39

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Stanley MI P Last Name Kraszewski

Company

Mailing Address 3706 Shetland Way

City Westville State NJ Zip 08093 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ✓ US Mail On Site Inspect

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 [redacted] Date 8-3-17

Payment Information

Maximum Authorization Cost $ .10

Select Payment Method

Cash X Check Money Order

Fees: Letter Size @$0.05 Page or Smaller
Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Theft of Motorcycle Report (Laura Semler)
2. 7-29-17
3. 3706 Shetland Way, Westville NJ 08093

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

DI

In Progress - Open
Denied - Closed
Filed - Closed 08-03
Partial - Closed

AGENCY USE ONLY

Tracking Information
Tracking # 17-026606
Rec'd Date
Ready Date
Total Pages

Final Cost
Total .10
Deposit
Balance Due
Balance Paid .10

Records Provided

Custodian Signature Date

State of New Jersey
Deptford Township

DEPTFORD TWP POLICE

GOVERNMENT RECORDS REQUEST FORM

2017 AUG -4 AM 10:45

Important Notice

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

Requestor Information – Please Print

First Name ROBERT MI E Last Name KAWALEC

Company

Mailing Address 431 TACOMA BLVD

City DEPTFORD State NJ Zip 08096 Email [redacted]com

Business Hours Telephone: Area Code _____ Number _____ Extension _____

Preferred Delivery: Pick Up _____ US Mail _____ On Site Inspect _____

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 Robert E Kawalec Date 8-4-17

Payment Information

Maximum Authorization Cost $ .10

Select Payment Method

Cash X Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

RECYCLE CAN THEFT

8-1-17

431 TACOMA BLVD

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

D1

In Progress - Open _____
Denied - Closed _____
Filled - Closed 08-04-17
Partial - Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost

Total .10
Deposit _____
Balance Due _____
Balance Paid .10

Records Provided

AUG 10 2017

Custodian Signature

Date

PM.

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name LaTisha MI ____ Last Name Knight

Company ____

Mailing Address 807 Saint Regis Ct

City West Deptford State NJ Zip 08051 Email ____

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension ____

Preferred Delivery: Pick Up X US Mail ____ On Site Inspect ____

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 [redacted] Date 8/30/17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05; Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Child custody
2. Sunday 8/27/17. and all reports dated 2014-2017 regarding Child custody
3. Deptford
4. [redacted] CADS reports

AGENCY USE ONLY

Est. Document Cost ____

Est. Delivery Cost ____

Est. Extras Cost ____

Total Est. Cost ____

Deposit Amount ____

Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

PM

In Progress - Open ____

Denied - Closed ____

Filled - Closed 8/30

Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # Walk-in Total ____ Final Cost

Rec'd Date ____ Deposit ____

Ready Date ____ Balance Due 0

Total Pages ____ Balance Paid ____

Records Provided

Custodian Signature ____ Date ____

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

DEPTFORD TWP POLICE
2017 AUG 28 AM 11:57

PM

Important Notice

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

Requestor Information – Please Print

First Name Thomas MI J Last Name Kasper

Company

Mailing Address 1191 Bennett Dr

City Deptford State NJ Zip 08096 Email [redacted]

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ✓ US Mail On Site Inspect

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 [redacted] Date 8-28-17

Payment Information

Maximum Authorization Cost $ 25

Select Payment Method

Cash Check Money Order

Fees: Letter Size @$0.05 Page or Smaller
Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

* Police escort on 8-25-17 to 633 Tacoma Blvd Westville NJ 08093

17-30121

* Phone called 8-24-17 for a police escort.

* May 10 CADS for Warrant 17-16750

[redacted]

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance
Deposit Date

AGENCY USE ONLY

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

AGENCY USE ONLY

Tracking Information
Tracking #
Rec'd Date
Ready Date
Total Pages

Final Cost
Total 25
Deposit
Balance Due
Balance Paid 25

Records Provided

SEP - 5 PM

Custodian Signature Date

DEPTFORD TWP PD
POLICE
2017 AUG 17 AM 10:10

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Jeffrey MI B Last Name Kerby

Company

Mailing Address 520 Crestmont Ave

City Woodbury Hts State NJ Zip 08097 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ✓ US Mail On Site Inspect

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 [signature] Date 8/17/17

Payment Information

Maximum Authorization Cost $ 4

Select Payment Method

Cash Check Money Order

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Accident Report
2. 8/16/17
3. Hurffville Rd, Home Depot & Roger Wilco
4. 17-029099

[redacted]

1st 2.95 sent 8-18-17 DJ

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

e-mailed

In Progress – Open
Denied – Closed
Filed – Closed 09-11-17
Partial – Closed

AGENCY USE ONLY

Tracking Information
Tracking #
Rec'd Date
Ready Date
Total Pages

Final Cost
Total Ø
Deposit
Balance Due
Balance Paid Ø

Records Provided

Custodian Signature Date

DEPTFORD TWP POLICE
2017 AUG 31 AM 9:38

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information -- Please Print

First Name Heather MI A Last Name Koski

Company

Mailing Address 534 Elm Ave

City Deptford State NJ Zip 08096 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ✓ US Mail On Site Inspect

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 Heather Koski Date 8/31/17

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

8/29/2017
4:22PM
Violent threat to harm a minor - Dylan Koski

[redacted] EMailed

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

PM

In Progress - Open
Denied - Closed
Filled - Closed 9/6/17
Partial - Closed

AGENCY USE ONLY

Tracking Information Final Cost

Tracking # 17-30660 Total
Rec'd Date Deposit
Ready Date Balance Due
Total Pages Balance Paid

Records Provided

✓

Custodian Signature Date

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

DEPTFORD TWP POLICE
2017 SEP 28 PM 2:52

Important Notice

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

Requestor Information – Please Print

First Name Rhonda MI R Last Name Hampton

Company

Mailing Address 805 Pinckney Ave

City Leesville State La Zip 71446 Email [redacted]

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ____ US Mail ✓ On Site Inspect ____

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 Rhonda R. Hampton Date 9/28/2017

Payment Information

Maximum Authorization Cost $ ____

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Report - Lost of Wallet - Officer Rodgers took report.
Theft
116 Winding Way, Westville, NJ

[redacted]

EMAIL when Done

AGENCY USE ONLY

Est. Document Cost ____
~~Est. Delivery Cost~~ ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

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 ____

AGENCY USE ONLY

Tracking Information

Tracking # 17-034760
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost

Total ____
Deposit ____
Balance Due ____
Balance Paid ____

Records Provided

Custodian Signature ____ Date ____

P/O Richard Rodgers.

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

DEPTFORD TWP POLICE
2017 SEP 29 PM 3:13

Important Notice

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

Requestor Information – Please Print

First Name Amber MI L Last Name Heslin

Company

Mailing Address 32 Junior Ave

City Bellmawr State NJ Zip 08031 Email

Business Hours Telephone: Area Code 08031 Number [redacted] Extension

Preferred Delivery: Pick Up ____ US Mail ____ On Site Inspect ____

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 [signature] Date 9.29.17

Payment Information

Maximum Authorization Cost $ ϕ

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size @$0.05 Page or Smaller
Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. simple assault
2. 9.26.17
3. 17034770
4. [redacted]

AGENCY USE ONLY

Est. Document Cost ____
~~Est. Delivery Cost~~ ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

written

In Progress - Open ____
Denied - Closed ____
Filled - Closed 09-29-17
Partial - Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total ϕ
Deposit ____
Balance Due ____
Balance Paid ϕ

Records Provided

[signature] [signature]
Custodian Signature Date

PM Done

Patricia A. Mitchell

From: Casey Jentsch [redacted]
Sent: Wednesday, September 20, 2017 1:49 PM
To: Police Records
Subject: Opra request

Casey Jentsch.
Car accident happened on September 8th, 2017 around 8:30pm on tamcoma blvd.

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

DEPTFORD TWP
POLICE

2017 SEP 19 PM 12:30

Important Notice

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

Requestor Information -- Please Print

First Name Edward MI P Last Name Jankowski

Company

Mailing Address 1628 Old Black Horse Pike

City Blackwood State NJ Zip 08012 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up X US Mail On Site Inspect

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 [signature] Date 9-19-2017

Payment Information

Maximum Authorization Cost $ 5.10

Select Payment Method

Cash X Check Money Order

Fees: Letter Size @$0.05 Page or Smaller
Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Accident Report
2. 8/15/2017
3. Deptford Twp Clements Br Rd & Hurffville Rd
4. 17-28979
5. [redacted]

AGENCY USE ONLY

Est. Document Cost
~~Est. Delivery Cost~~
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes

Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

PM

In Progress	- Open	
Denied	- Closed	
Filed	- Closed	9/19/17
Partial	- Closed	

AGENCY USE ONLY

Tracking Information

Tracking # 17-28979 Final Cost 5.10
Rec'd Date Total
Ready Date Deposit
Total Pages Balance Due
Balance Paid 5.10

Records Provided

Custodian Signature Date

State of New Jersey
Deptford Township

DEPTFORD TWP POLICE
2017 SEP 11 PM 12:38

GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Jennifer MI F Last Name Jones

Company

Mailing Address 1122 Tatum Street

City Woodbury State NJ Zip 08096 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up X US Mail On Site Inspect

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 Jennifer J Jones Date 9/11/17

Payment Information

Maximum Authorization Cost $ 10

Select Payment Method

Cash X Check Money Order

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

accident auto
9/7/17
grant & evergeen
[redacted]

AGENCY USE ONLY

Est. Document Cost
~~Est. Delivery Cost~~
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance
Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

D

In Progress - Open
Denied - Closed
(Filed) - Closed 9-11-17
Partial - Closed

AGENCY USE ONLY

Tracking Information
Tracking # 17-e031925
Rec'd Date
Ready Date
Total Pages

Final Cost
Total 10
Deposit
Balance Due
Balance Paid 10

Records Provided

SEP 20

Custodian Signature Date

Police Records

From: susette jones LAST_NAME[redacted]
Sent: Tuesday, September 12, 2017 4:20 PM
To: Police Records
Subject: OPRA - accident at Bed Bath & Beyond parking lot, 9/10/17, #17-32366

I am requesting a copy of the police report for accident that occurred at 12:30 pm at Bed Bath & Beyond parking lot in Deptford, NJ on Sunday, September 10, 2017. A policeman came and took the report. The report number is #17-32366. My car was struck by the other driver.

Thank you,

Susette Jones

Patricia A. Mitchell

From: susette jones LAST_NAME <ssabiojones@comcast.net>
Sent: Tuesday, September 12, 2017 4:20 PM
To: Police Records
Subject: OPRA - accident at Bed Bath & Beyond parking lot, 9/10/17, #17-32366

Categories: In Progress/ Printed

I am requesting a copy of the police report for accident that occurred at 12:30 pm at Bed Bath & Beyond parking lot in Deptford, NJ on Sunday, September 10, 2017. A policeman came and took the report. The report number is #17-32366. My car was struck by the other driver.

Thank you,

Susette Jones

PM

Patricia A. Mitchell

From: Jones, Dennis W CIV NNSY, NFPC C1424 [redacted]
Sent: Friday, September 22, 2017 9:53 AM
To: Police Records
Subject: opra

Pat,
Can I please have the report for accident 9/16/17 Clemens Bridge Road?

Dennis W. Jones
Business Office Manager
Naval Foundry and Propeller Center
4901 South 16th Street
Bldg. # 712, 1st floor
Philadelphia Pa. 19112-1403
Com: [redacted]
[redacted]
[redacted]
SMO: 001816

DEPTFORD TWP POLICE
D1
2017 SEP 28 PM 2:57

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name George MI ____ Last Name Johnson

Company Gloucester County Sheriff's Office

Mailing Address 2 South Broad St

City Woodbury State NJ Zip 08096 Email [redacted]

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension ____

Preferred Delivery: Pick Up ____ US Mail ____ On Site Inspect ____

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 George M Johnson Date 9/28/2017

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Copies: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Accident Report 17-034132

Clements Bridge Rd.

Santino Morina

AGENCY USE ONLY

Est. Document Cost ____
~~Est. Delivery Cost~~ ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

D1

In Progress - Open ____
Denied - Closed ____
Filled - Closed 09-28-17
Partial - Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total 0
Deposit ____
Balance Due ____
Balance Paid 0

Records Provided

Custodian Signature

Date

DEPTFORD TWP
POLICE
2017 SEP 29 PM 12:32

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Ryan MI A Last Name Jiles

Company

Mailing Address 201 Chancellor Dr

City Deptford State NJ Zip 08096 Email

Business Hours Telephone: Area Code Number Extension

Preferred Delivery: Pick Up US Mail On Site Inspect

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 Ryan Jiles Date Sept-29-17

Payment Information

Maximum Authorization Cost $ .20

Select Payment Method

Cash X Check Money Order

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Accident (Car)
2. November 9-16
3. Delsea Dr
4.

AGENCY USE ONLY

Est. Document Cost
~~Est. Delivery Cost~~
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

DV

In Progress - Open
Denied - Closed
Filled - Closed 09-29-17
Partial - Closed

AGENCY USE ONLY

Tracking Information
Tracking # 16042391
Rec'd Date
Ready Date
Total Pages

Final Cost
Total .20
Deposit
Balance Due
Balance Paid .20

Records Provided

Custodian Signature Date

DEPTFORD TWP POLICE

2017 AUG 21 PM 2:16

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Leah MI M Last Name Jenkins-Long

Company Deptford Midget Football

Mailing Address PO Box 5229

City Deptford State NJ Zip 08096 Email _____

Business Hours Telephone: Area Code _____ Number _____ Extension _____

Preferred Delivery: Pick Up X US Mail _____ On Site Inspect _____

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 Leah Jenkins-Long Date 8/21/17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size @$0.05 Page or Smaller; Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Burglary
8-18-17
Taylor Field Deptford
[redacted]

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

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 08-21-17
Partial - Closed _____

AGENCY USE ONLY

Tracking Information
Tracking # _____
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost
Total $ 0
Deposit _____
Balance Due _____
Balance Paid $ 0

Records Provided

Custodian Signature _____ Date _____

PM

Patricia A. Mitchell

From: Maria Jenkins [redacted]
Sent: Thursday, August 10, 2017 9:18 AM
To: Police Records
Subject: File No. 17-27814

Good morning. I would like to request an email copy of the above referenced police report. This case involves a small "fender bender" type accident in the Deptford Target store parking lot on Sunday, Aug 6th. I have been notified that it will be ready today. Thanks so much for your time and have a good day. Sincerely, Maria Jenkins

Sent from my iPhone

State of New Jersey
Deptford Township

DEPTFORD TWP POLICE

2017 AUG 32 AM 8:23

GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name William MI ____ Last Name JohnsSr

Company ____

Mailing Address PO Box 5212

City Deptford State NJ Zip 08096 Email ____

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension ____

Preferred Delivery: Pick Up ____ US Mail ____ On Site Inspect ____

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 [signature] Date 9/1/17

Payment Information

Maximum Authorization Cost $ 15

Select Payment Method

Cash ✓ Check ____ Money Order ____

Fees: Letter Size @$0.05 Page or Smaller; Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

8/29/17
RT 47
Accident

AGENCY USE ONLY

Est. Document Cost ____
~~Est. Delivery Cost~~ ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

PM

In Progress - Open
Denied - Closed
Filled - Closed 9/1/17
Partial - Closed ____

AGENCY USE ONLY

Tracking Information Final Cost

Tracking # 17-30755 Total 15
Rec'd Date ____ Deposit ____
Ready Date ____ Balance Due ____
Total Pages ____ Balance Paid 15

Records Provided

[signature]
Custodian Signature

[signature] 9/1/17
Date

DEPTFORD TWP POLICE

2017 AUG 22 PM 12:06

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Madison MI A Last Name Jones

Company

Mailing Address 32 South Roland Ave

City Runnemede State NJ Zip 08078 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up X US Mail On Site Inspect

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 [redacted] Date 6/22/17

Payment Information

Maximum Authorization Cost $ 15

Select Payment Method

Cash Check Money Order

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Accident

July 30 2017

17-026766

Parking lot Oldnavy Deptford NJ
Almonesson Rd.

[redacted]

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

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

AGENCY USE ONLY

Tracking Information

Tracking #
Rec'd Date
Ready Date
Total Pages

Final Cost

Total 15
Deposit
Balance Due
Balance Paid 15

Records Provided

Custodian Signature Date

Police Records

From: Jesse [redacted]
Sent: Tuesday, August 22, 2017 2:50 PM
To: Police Records
Subject: OPRA- burglary report

Kayla fletcher
1051 tanyard rd deptford nj 08096
8-17-17
Case number: 17-029199

08-23-17

Police Records

From: Jeffrey Hale - JCHALE.s05476 <[redacted]
Sent: Wednesday, August 02, 2017 9:52 AM
To: Police Records
Subject: Request for Case information for Wal-mart

Hello,

My name is Jeffrey Hale and I work for Wal-Mart Store # 5476. We recently filed a report against someone who is stealing merchandise through our Lawn and Garden area. The incident dates are July 4th and July 16th. I was wondering if any information was obtained so we can put them into our system and file charges against them.

Thank you,

Jeffrey Hale Asset Protection
Phone[redacted]
[redacted]

Wal-Mart Store 5476
820 Cooper Street
Woodbury, NJ 08096

Save Money, Live Better

Emailed back waiting for more info
PM 8/3

08-09-17 D.J.

DEPTFORD TWP POLICE

2017 AUG -8 AM 11:27

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Jacqueline MI K Last Name Hassel

Company

Mailing Address 1667 Miller Ave

City WestDeptford State NJ Zip 08086 Email [redacted]

Business Hours Telephone: Area Code ____ Number ____ Extension ____

Preferred Delivery: Pick Up ✓ US Mail ____ On Site Inspect ____

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 Jacqueline Hassel Date August 8 2017

Payment Information

Maximum Authorization Cost $ 15

Select Payment Method

Cash ✓ Check ___ Money Order ___

Fees: Letter Size @$0.05 Page or Smaller; Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Accident report
2. July 30th, 2017
3. clements bridge rd, Deptford, NJ
4. [redacted]

AGENCY USE ONLY

Est. Document Cost ____

Est. Delivery Cost ____

Est. Extras Cost ____

Total Est. Cost ____

Deposit Amount ____

Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes

Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

DL

In Progress - Open ____

Denied - Closed ____

Filled - Closed 08-8-17

Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # 17-02086S

Rec'd Date ____

Ready Date ____

Total Pages ____

Records Provided

Final Cost

Total 15

Deposit ____

Balance Due ____

Balance Paid 15

AUG 10 2017

Custodian Signature ____ Date ____

Police Records

From: Jeffrey Hale - JCHALE.s05476 [redacted]
Sent: Saturday, August 05, 2017 10:30 AM
To: Police Records
Subject: Re: Request for Case information for Wal-mart

Pat,

I filed one report on July 16, 2017 with an officer for a separate attempted push out. The July 4th incident has a license Plate of P18-GRE if that helps you

---

From: Police Records <policerecords@deptford-nj.org>
Sent: Thursday, August 3, 2017 9:53:37 AM
To: Jeffrey Hale - [redacted]
Subject: EXT: RE: Request for Case information for Wal-mart

Hi Jeffery, I am unable to find the reports you asked for do you have any further information that might help Pat

---

From: Jeffrey Hale - [redacted]
Sent: Wednesday, August 02, 2017 9:52 AM
To: Police Records
Subject: Request for Case information for Wal-mart

Hello,

My name is Jeffrey Hale and I work for Wal-Mart Store # 5476. We recently filed a report against someone who is stealing merchandise through our Lawn and Garden area. The incident dates are July 4th and July 16th. I was wondering if any information was obtained so we can put them into our system and file charges against them.

Thank you,

Jeffrey Hale Asset Protection
Phone: [redacted]
[redacted]

Wal-Mart Store 5476
820 Cooper Street
Woodbury, NJ 08096

Save Money, Live Better

A6

DEPTFORD TWP
POLICE
2017 AUG 16 PM 1:00

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Sydney MI ____ Last Name Harris

Company ____

Mailing Address TJ Maxx 1800 Clements Bridge Rd

City Deptford State NJ Zip 08096 Email ____

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension ____

Preferred Delivery: Pick Up ____ US Mail ____ On Site Inspect ____

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 Sydney Harris Date 8/16/2017

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05; Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Type of Report:
2. Date: 8/8/2017
3. Location: TJ Maxx, 1800 Clements Bridge Rd, Deptford, NJ, 08096; Loss Prevention Dept.
4. Report #: 17-028049

Email:

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____
Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

DV

In Progress – Open ____
Denied – Closed ____
Filled – Closed 8-8-16
Partial – Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost

Total 0
Deposit ____
Balance Due ____
Balance Paid 0

Records Provided

AUG 17 2017

Custodian Signature ____ Date ____

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

DEPTFORD TWP POLICE
2017 AUG 23 AM 11:09

Important Notice

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

Requestor Information – Please Print

First Name Jeffrey MI C Last Name Hale

Company Walmart

Mailing Address 820 cooper ST

City Woodbury State NJ Zip 08096 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ____ US Mail ____ On Site Inspect ____

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 Jeffrey Hale Date 8-23-17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Happened on 8-20-17 at 820 cooperst Walmart. Person shoplifted and ran on us. Loss Prevention Shoplifter 8-20-17

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

written

In Progress - Open ____
Denied - Closed ____
(Filled) - Closed 08-23-17
Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost

Total 0
Deposit ____
Balance Due ____
Balance Paid 0

Records Provided

Custodian Signature ____ Date ____

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

DEPTFORD TWP POLICE

2017 AUG 16 AM 9:06

Important Notice

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

Requestor Information – Please Print

First Name Nadine MI E Last Name Herrera

Company

Mailing Address 41 Arrowwood Court

City Deptford State NJ Zip 08096 Email [redacted]

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up _____ US Mail _____ On Site Inspect _____

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 Nadine Herrera Date 8-16-17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Harrassment 8-12, 8-14, 8-11, 8-10

[redacted]

Cell # [redacted]

Gave Reports None

Victim

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

RM

In Progress - Open
Denied - Closed
Filed - Closed 8/15
Partial - Closed

AGENCY USE ONLY

Tracking Information

Tracking #
Rec'd Date
Ready Date
Total Pages

Final Cost

Total
Deposit 0
Balance Due
Balance Paid

Records Provided

Custodian Signature

Date

State of New Jersey
Deptford Township

DEPTFORD TWP POLICE
2017 AUG 17 AM 9:04

GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information -- Please Print

First Name Kristie MI C Last Name Hennisey

Company

Mailing Address 308 Drexel Ave

City Wenonah State NJ Zip 08090 Email [redacted]

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up ✓ US Mail On Site Inspect

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 [signature] Date 8/17/17

Payment Information

Maximum Authorization Cost $ .10

Select Payment Method

Cash X Check ___ Money Order ___

Fees: Letter Size @$0.05 Page or Smaller; Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

I witnessed my neighbor pulling out of his driveway and backing his car into mine.

August 4th

7001-27454

308 Drexel Ave

AGENCY USE ONLY

Est. Document Cost
~~Est. Delivery Cost~~
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

DI

In Progress - Open
Denied - Closed
(Filled) - (Closed) 08-18-17
Partial - Closed

AGENCY USE ONLY

Tracking Information
Tracking #
Rec'd Date
Ready Date
Total Pages

Final Cost
Total .10
Deposit
Balance Due
Balance Paid -.10

Records Provided

AUG 30 2017

Custodian Signature

Date

DEPTFORD TWP
POLICE

2017 AUG 28 AM 10:46

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Taylor MI ____ Last Name Heaney

Company ____

Mailing Address 122 South Davis Street

City Woodbury State NJ Zip 08096 Email [redacted].com

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension ____

Preferred Delivery: Pick Up X US Mail ____ On Site Inspect ____

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 [signature] Date 08-28-17

Payment Information

Maximum Authorization Cost $ 1.15

Select Payment Method

Cash ✓ Check ____ Money Order ____

Fees: Letter Size @$0.05 Page or Smaller
Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Accident
2. 08/20/17
3. Woodbury: Glassboro Rd.
4. 17-029533

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

PM

In Progress - Open ____
Denied - Closed ____
(Filled) - Closed 8/28
Partial - Closed ____

AGENCY USE ONLY

Tracking Information

Tracking # 17-29533
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total 1.15
Deposit ____
Balance Due ____
Balance Paid 1.15

Records Provided

[signature]

Custodian Signature Date

DEPTFORD TWP POLICE

2017 AUG 29 AM 9:55

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Summur MI L Last Name Hurst

Company

Mailing Address 7 Stoney Bridge Rd

City Clementon State NJ Zip 08021 Email [redacted]

Business Hours Telephone: Area Code Number Extension

Preferred Delivery: Pick Up ✓ US Mail On Site Inspect

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 Summur Hurst Date 8/29/2017

Payment Information

Maximum Authorization Cost $ .10

Select Payment Method

Cash ✓ Check Money Order

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1). Car Accident
2). April 22, 2017
3). Deptford Centre & Hurffville Rd
4). N/A
5). [redacted]

AGENCY USE ONLY

Est. Document Cost
~~Est. Delivery Cost~~
~~Est. Extras Cost~~
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

D1

In Progress - Open
Denied - Closed
Filled - Closed 08-29-17
Partial - Closed

AGENCY USE ONLY

Tracking Information
Tracking # 17-00014317
Rec'd Date
Ready Date
Total Pages

Final Cost
Total .10
Deposit
Balance Due
Balance Paid .10

Records Provided

Custodian Signature Date

Police Records

From: Johnson, George M. [redacted]
Sent: Friday, August 04, 2017 12:05 PM
To: Police Records
Subject: Jonathon Malone Report

Good Afternoon, Jonathon Malone was to start with the Gloucester County Sheriff's Office this week but was arrested for D.W.I. last month in Deptford Township. I am requesting on behalf of the Sheriff's Office, a copy of all police reports in reference to his arrest for D.W.I. on Thursday, July 19th, 2017. Can you send the reports ASAP to my email at [redacted]

HAVE A GREAT WEEKEND, GJ

Chief Warrant Officer George M. Johnson
Gloucester County Sheriff's Office / S.I.U.
2 Broad Street, Woodbury, N.J., 08096
Office # [redacted]
Cell # [redacted]
Email: [redacted]

PM

State of New Jersey
Deptford Township

DEPTFORD TWP
POLICE

GOVERNMENT RECORDS REQUEST FORM

2017 AUG 28 AM 10:33

Important Notice

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

Requestor Information – Please Print

First Name Kenneth MI C Last Name Garland

Company

Mailing Address 375 E High ST APT-C 46

City Glassboro State N.J. Zip 08028 Email

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension

Preferred Delivery: Pick Up V US Mail On Site Inspect

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 Kenneth C Garland Date 8/28/17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash Check Money Order

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

I like a Police Report so I can send My paperwork off To Direct Express Fraud Server Dept. P.O. Box 245998 San Antonio 8/10
My card was stolen

Done

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian-If any part of request cannot be delivered in seven business days, detail reasons here.

In Progress - Open
Denied - Closed
Filed - Closed 8/28
Partial - Closed

AGENCY USE ONLY

Tracking Information

Tracking #
Rec'd Date
Ready Date
Total Pages

Final Cost

Total 0
Deposit
Balance Due
Balance Paid

Records Provided

SEP - 5 2017

Custodian Signature Date

DEPTFORD TWP
POLICE
2017 AUG 30 PM 1:52

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name WILLIAM MI ____ Last Name GLEDHILL

Company CAUSING AUTO SALES

Mailing Address 249-51 N. 63RD ST

City PHILA State PA Zip 19151 Email [redacted]

Business Hours Telephone: Area Code [redacted] Number [redacted] Extension ____

Preferred Delivery: Pick Up ✓ US Mail ____ On Site Inspect ____

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 [signature] Date 8-30-17

Payment Information

Maximum Authorization Cost $ .15

Select Payment Method

Cash ___ Check ___ Money Order ___

Fees: Letter Size @$0.05 Page or Smaller
Legal Size @$0.07 Page or Larger

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

ACCIDENT REPORT
8-11-17 DELSEA DR @ Fox Run Rd
DEPTFORD N.J.

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

AD

In Progress - Open ____
Denied - Closed ____
Filled - Closed 8/30/17
Partial - Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # 17-28404
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total .15
Deposit ____
Balance Due ____
Balance Paid .15

Records Provided

[signature]

Custodian Signature Date

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

DEPTFORD TWP POLICE
2017 AUG -7 PM 12:28

Important Notice

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

Requestor Information – Please Print

First Name Jordan MI ____ Last Name Greenawalt

Company ____

Mailing Address 126 Mantua Boulevard

City Mantua State NJ Zip 08051 Email ____

Business Hours Telephone: Area Code ____ Number ____ Extension ____

Preferred Delivery: Pick Up ____ US Mail ____ On Site Inspect ____

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 Jordan Greenawalt Date 08/07/17

Payment Information

Maximum Authorization Cost $ 10

Select Payment Method

Cash X Check ____ Money Order ____

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1. Accident Report
2. 07/31/2017
3. Glassboro Road

17-26869

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

D!

In Progress - Open ____
Denied - Closed ____
Filled - Closed 08-07
Partial - Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # ____
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total 10
Deposit ____
Balance Due ____
Balance Paid 10

Records Provided

AUG 10 2017

Custodian Signature ____ Date ____

DEPTFORD TWP POLICE

2017 AUG -4 AM 11:06

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name Alison MI M Last Name Gordon

Company

Mailing Address 302 Winding Way

City Westville State NJ Zip 08093 Email [redacted]

Business Hours Telephone: Area Code _____ Number _____ Extension _____

Preferred Delivery: Pick Up / US Mail / On Site Inspect _____

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 Alison Gordon Date 8/4/17

Payment Information

Maximum Authorization Cost $ 15

Select Payment Method

Cash / Check ___ Money Order ___

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

Pot Incident Report + Stolen phone 7/24/17
Walmart 820 Cooper St
17-025995

AGENCY USE ONLY

Est. Document Cost _____
Est. Delivery Cost _____
Est. Extras Cost _____
Total Est. Cost _____
Deposit Amount _____
Estimated Balance _____

Deposit Date _____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

D

In Progress - Open _____
Denied - Closed _____
Filled - Closed 08-04
Partial - Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # _____
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost

Total 15
Deposit _____
Balance Due _____
Balance Paid 15

Records Provided

Custodian Signature

Date

D1

DEPTFORD TWP
POLICE

2017 AUG 10 AM 10: 20

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

Important Notice

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

Requestor Information – Please Print

First Name William MI A. Last Name Gimbel JR

Company

Mailing Address 36 PINEHURST CT.

City BLACKWOOD State NJ Zip 08012 Email [redacted]

Business Hours Telephone: Area Code ____ Number ____ Extension ____

Preferred Delivery: Pick Up ✓ US Mail ____ On Site Inspect ____

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 [signature] Date 8/10/17

Payment Information

Maximum Authorization Cost $ .15

Select Payment Method

Cash X Check ____ Money Order ____

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1- ACCIDENT
2- 8-3-17
3- DEPTFORD CENTER ROAD.

AGENCY USE ONLY

Est. Document Cost ____
Est. Delivery Cost ____
Est. Extras Cost ____
Total Est. Cost ____
Deposit Amount ____
Estimated Balance ____

Deposit Date ____

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

D1

In Progress – Open ____
Denied – Closed ____
Filled – Closed 08-10-17
Partial – Closed ____

AGENCY USE ONLY

Tracking Information
Tracking # 17-027263
Rec'd Date ____
Ready Date ____
Total Pages ____

Final Cost
Total .15
Deposit ____
Balance Due ____
Balance Paid .15

Records Provided

[signature] 8/10/17
Custodian Signature Date

State of New Jersey
Deptford Township
GOVERNMENT RECORDS REQUEST FORM

DEPTFORD TWP POLICE
2017 AUG 17 PM 12:01

Important Notice

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

Requestor Information – Please Print

First Name Heather MI F Last Name Gabriele

Company

Mailing Address 1033 Moore Rd.

City Thorofare State NJ Zip 08086 Email

Business Hours Telephone: Area Code Number Extension

Preferred Delivery: Pick Up X US Mail On Site Inspect

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 Hgabriele Date 8/17/17

Payment Information

Maximum Authorization Cost $ 0

Select Payment Method

Cash Check Money Order

Fees: Letter Size Page or Smaller @$0.05
Legal Size Page or Larger @$0.07

Delivery: Delivery / postage fees additional depending upon delivery type.

Extras: Extraordinary service fees dependent upon request.

Record Request Information: To expedite the request, be as specific as possible in describing the records being requested. Also, please include the type of access requested (copying or inspection), and if data, the medium requested.

1) harassment report
2) 8/13/17
3) 17-028082

AGENCY USE ONLY

Est. Document Cost
Est. Delivery Cost
Est. Extras Cost
Total Est. Cost
Deposit Amount
Estimated Balance

Deposit Date

AGENCY USE ONLY

Disposition Notes
Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.

motion

In Progress - Open
Denied - Closed
Filed - Closed 08-17-17
Partial - Closed

AGENCY USE ONLY

Tracking Information
Tracking #
Rec'd Date
Ready Date
Total Pages

Final Cost
Total 0
Deposit
Balance Due
Balance Paid 0

Records Provided

Custodian Signature Date