

Morris County Sheriff's Office

43 John Street • Morris Township, New Jersey 07960 • Phone 973-631-5174 • Fax 973-993-9653

James M. Gannon
Sheriff



Mark S. Spitzer
Undersheriff

Alan J. Robinson
Undersheriff

Edward K. Crooker
Chief



Christopher E. Klein
Warden

Richard A. Rose
Chief Warrant Officer

To: "Ask N.J. Media Co."
From: Officer Brian T. Rzucidlo
Date: November 27, 2017
Subject: OPRA Request

Dear "Ask N.J. Media Co." ,

The Morris County Sheriff's Office received your New Jersey Open Public Act ("OPRA") Request dated November 20, 2017 on November 22, 2017.

Your OPRA request seeks the following record:

- 1) Requesting copies of all OPRA requests from August 1, 2017 to November 20, 2017.

Please find the attached copies of the OPRA requests from August 1, 2017 to November 20, 2017.

Your OPRA request is now deemed answered and closed.

Officer Brian T. Rzucidlo

MORRIS COUNTY SHERIFF'S OFFICE

Morris County Sheriff's Office
Custodian of Records
P.O. Box 900
Morristown, NJ 07963-0900
(973) 285-6600

Request for Public Records Form

Please be sure you have read the preceding page for important information related to your rights concerning government records.

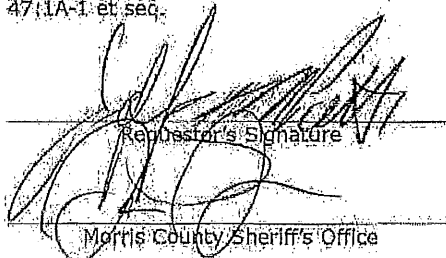
Requestor Information		Payment Information
Name of Requestor Jeffrey M. Patti, Esq.		Max. Authorized Cost: \$50
Street Address [REDACTED]	City, State, Zip [REDACTED]	Select Method of Payment: ☐ Cash ☒ Certified Check ☐ Money Order
Daytime Telephone Number [REDACTED]	E-Mail Address [REDACTED]	(Made payable to MCSO)
Record Request Information <i>To expedite your request, please be as specific as possible.</i> Complete classification and inmate file for inmate Teddy Dowse #17222		Fees: 5¢ per page Special Service Charge: Extraordinary service fees will be additional and are dependent upon request.

To Be Completed by the Custodian of Records					
Requested records will be ready on:		Estimated # of pages:		Estimated Cost:	
				Deposit:	

** Deposit may be required when the anticipated cost of reproduction will exceed \$25.00*

This completed form, when signed by a designated Morris County Sheriff's Office employee, shall constitute a receipt for the records request and any deposit made by the Requestor.

Under penalty of law, the Requestor hereby certifies that he/she has not been convicted of any indictable offense under the laws of New Jersey, any other state or the United States and is not seeking government records containing personal information pertaining to a victim or a victim's family as provided by N.J.S.A. 47:1A-1 et seq.


Requestor's Signature
Morris County Sheriff's Office

8/8/17
Date
8/14/17
Date

OFFICIAL USE ONLY		
Request Granted	Yes	No
Number of Pages		
Document Fee		
Delivery Fee		
Special Service Charge		
Total Fee		
Deposit		
Due Upon Completion		
Date Fulfilled		

You have a right to appeal the decision that the document or documents are not public records. You may take your appeal to the Public Records Council or to the New Jersey Superior Court as provided by N.J.S.A. 47:1A-6 and 7.

MORRIS COUNTY SHERIFF'S OFFICE

Morris County Sheriff's Office
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Morristown, NJ 07963-0900
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Requestor Information		Payment Information	
Name of Requestor Jeffrey M. Patti, Esq.		Max. Authorized Cost: \$ 50	
Street Address [REDACTED]	City, State, Zip [REDACTED]	Select Method of Payment ☐ Cash ☒ Certified Check ☐ Money Order	
Daytime Telephone Number [REDACTED]	E-Mail Address [REDACTED]	(Made payable to MCSO)	
Record Request Information To expedite your request, please be as specific as possible.			
Complete classification and inmate file for inmate Bruce Brown #1918817222		Fees: 5¢ per page	
		Special Service Charge: Extraordinary service fees will be additional and are dependent upon request.	

To Be Completed by the Custodian of Records							
Requested records will be ready on:		Estimated # of pages:		Estimated Cost:		Deposit:	

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Requestor's Signature: 
Date: 8/8/17
Morris County Sheriff's Office
Date: 8/14/17

OFFICIAL USE ONLY		
Request Granted	Yes	No
Number of Pages		
Document Fee		
Delivery Fee		
Special Service Charge		
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** MORRIS County SHERIFF'S OFFICE*
MORRIS Township State of New Jersey, N.J. 07960
original
OPRA

GOVERNMENT RECORDS REQUEST FORM
 101 South Broad Street, PO Box 819
 Trenton, NJ 08625-0819
 Phone: 866-850-0511 Fax: (609) 633-6337
 E-mail: grc@dca.state.nj.us Website: www.nj.gov/grc

#44



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 VINCENT MI J. Last Name CONTE
 E-mail Address [REDACTED]
 Mailing Address [REDACTED]
 City [REDACTED] State [REDACTED] Zip [REDACTED]
 Telephone [REDACTED] FAX [REDACTED]
 Preferred Delivery: Pick Up ☐ US Mail ☒ On-Site Inspect ☐ Fax ☐ Email ☐
 If you are requesting records containing personal information, please select 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 Vincent J. Conte Date 8/9/17

Payment Information

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

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

CUSTODIAN OF RECORDS (MCCF)

PLEASE provide to me a copy of the 1150 logged entry on page 155 which shows that the razor was issued to me "By % SHANE SULLIVAN @ 'on 3/6/02 UNDER THE OPRA STATUTE N.J.S.A. 47:1A-3(a). I.E. @

AGENCY USE ONLY

AGENCY USE ONLY

AGENCY USE ONLY

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

Disposition Notes
 Custodian: If any part of request cannot be delivered in seven business days, detail reasons here.
 In Progress - Open _____
 Denied - Closed _____
 Filled - Closed _____
 Partial - Closed _____

Tracking Information
 Tracking # _____
 Rec'd Date _____
 Ready Date _____
 Total Pages _____
Final Cost
 Total _____
 Deposit _____
 Balance Due _____
 Balance Paid _____
 Records Provided _____
 Custodian Signature [Signature] Date 8-21-17

MORRIS COUNTY SHERIFF'S OFFICE

Morris County Sheriff's Office
Custodian of Records
P.O. Box 900
Morristown, NJ 07963-0900
(973) 285-6600

Request for Public Records Form

Please be sure you have read the preceding page for important information related to your rights concerning government records.

Requestor Information		Payment Information
Name of Requestor <u>Brian G. Dabow</u>		Max. Authorized Cost: \$_____
Street Address [REDACTED]	City, State, Zip [REDACTED]	Select Method of Payment ☐ Cash ☐ Certified Check ☐ Money Order (Made payable to MCSO)
Daytime Telephone Number [REDACTED]	E-Mail Address [REDACTED]	
Record Request Information <i>To expedite your request, please be as specific as possible.</i>		Fees: 5¢ per page
I am requesting all records pertaining to the release of Michael Hutchinson from the Morris County Correctional Facility. He resides at [REDACTED]. Please email all the documents to me in the above email.		Special Service Charge: Extraordinary service fees will be additional and are dependent upon request.

To Be Completed by the Custodian of Records			
Requested records will be ready on:	Estimated # of pages:	Estimated Cost:	Deposit:*

* Deposit may be required when the anticipated cost of reproduction will exceed \$25.00

This completed form, when signed by a designated Morris County Sheriff's Office employee, shall constitute a receipt for the records request and any deposit made by the Requestor.

Under penalty of law, the Requestor hereby certifies that he/she has not been convicted of any indictable offense under the laws of New Jersey, any other state or the United States and is not seeking government records containing personal information pertaining to a victim or a victim's family as provided by N.J.S.A. 47:1A-1 et seq.

[Signature]
Requestor's Signature

08/11/2017
Date

[Signature]
Morris County Sheriff's Office

8-14-17
Date

OFFICIAL USE ONLY		
Request Granted	Yes	No
Number of Pages		
Document Fee		
Delivery Fee		
Special Service Charge		
Total Fee		
Deposit		
Due Upon Completion		
Date Fulfilled		

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MORRIS COUNTY SHERIFF'S OFFICE, MORRIS TOWNSHIP, N.J. #44
State of New Jersey
Government Records Council
07960

GOVERNMENT RECORDS REQUEST FORM

101 South Broad Street, PO Box 819
Trenton, NJ 08625-0819
Phone: 866-850-0511 Fax: (609) 633-6337
E-mail: grc@dca.state.nj.us Website: www.nj.gov/grc



OPRA

REQUEST

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Requestor Information - Please Print

First Name VINCENT MI J. Last Name CONTE
E-mail Address [REDACTED]
Mailing Address [REDACTED]
City [REDACTED]
Telephone [REDACTED] FAX [REDACTED]
Preferred Delivery: Pick Up ☐ ☒ US Mail ☐ On-Site Inspect ☐ Fax ☐ Email ☐
If you are requesting records containing personal information, please select 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 Vincent J. Conte Date 8/27/17

Payment Information

Maximum Authorization Cost \$ 1.00
Select Payment Method
Cash ☐ Check ☒ Money Order ☐
Fees: Letter size 8/11/17 \$0.05 per page
Legal size \$0.07 per page
Other materials Actual cost (CD, DVD, etc.) of materials
Delivery: Delivery / postage fees additional depending upon delivery type.
Extras: Special service charge dependent upon request.

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

PLEASE PROVIDE TO ME SPECIFICALLY, THE LOGGED "INITIALED" ENTRY BY C/O SHANE SULLIVAN OF THE 1150 LOGGED ENTRY ON PAGE 155 WHICH SHOWS THAT A RAZOR WAS ISSUED TO ME BY C/O SHANE SULLIVAN ON 3/6/02 "29" FOR MY FILES UNDER THE OPRA STATUTE N.J.S.A. 47:1A-3(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.

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

AGENCY USE ONLY

Tracking Information		Final Cost	
Tracking #	_____	Total	_____
Rec'd Date	_____	Deposit	_____
Ready Date	_____	Balance Due	_____
Total Pages	_____	Balance Paid	_____
Records Provided		_____	
Custodian Signature		Date	