

OFFICE OF THE SHERIFF

MICHAEL G. MASTRONARDY
SHERIFF

BRIAN J. KLIMAKOWSKI
UNDERSHERIFF

NILS R. BERGQUIST, JR.
UNDERSHERIFF



TELEPHONE
732-929-2044

FAX NUMBER
732-349-1909

WEBSITE
www.co.ocean.nj.us/OCsheriff

120 HOOPER AVENUE • P.O. BOX 2191 • TOMS RIVER, N. J. • 08754-2191

November 27, 2017

Ask NJ Media Co.

Good day,

The Ocean County Sheriff's Office received your Open Public Records Act (OPRA) request on or about November 20, 2017. The official Records Custodian, Lt. Joseph Greene, received your OPRA request on November 20, 2017. As such, the seven (7) business day deadline to respond to your request is November 29, 2017. This response to your request is being provided to you on the 6th business day after the custodian's receipt of said request.

The following records were requested:

1. "Copies of all OPRA requests from August 1, 2017 to November 20, 2017"

Your records are enclosed. Please note that the unlisted phone numbers of various requestors have been redacted in accordance with N.J.S.A. 47:1A-1.1(17)

17) Personal identifying information. Specifically:

- a. Social security numbers, *except that a social security number contained in a record required by law to be made, maintained or kept on file by a public agency shall be disclosed when access to the document or disclosure of that information is not otherwise prohibited by State or federal law, regulation or order or by State statute, resolution of either or both houses of the Legislature, Executive Order of the Governor, rule of court or regulation promulgated under the authority of any statute or executive order of the Governor.*
- b. Credit card numbers
- c. Unlisted telephone numbers
- d. Drivers' license numbers.

This response is being communicated to you via e-mail, at your request.

If your request for access to a government record has been denied or unfilled within the seven (7) business days required by law, you have a right to challenge the decision by the [insert name of agency] to deny access. At your option, you may either institute a proceeding in the Superior Court of New Jersey or file a complaint with the Government Records Council (GRC) by completing the Denial of Access Complaint Form. You may contact the GRC by toll-free telephone at 866-850-0511, by mail at P.O. Box 819, Trenton, NJ, 08625, by e-mail at grc@dca.state.nj.us, or at their web site at www.state.nj.us/grc. The GRC can also answer other



SPECIAL ASSISTANCE/ACCOMMODATIONS available, please call (732) 349-2010 (V/TTD).

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questions about the law. All questions regarding complaints filed in Superior Court should be directed to the Court Clerk in your County.

Sincerely,

A handwritten signature in blue ink, appearing to read 'Lt. Joseph H. Greene Jr.'.

Lieutenant Joseph H. Greene Jr.
Ocean County Sheriff's Office
jgreene@co.ocean.nj.us
(732)506-5138



SPECIAL ASSISTANCE/ACCOMMODATIONS available, please call (732) 349-2010 (V/TTD).

Greene, Joseph

From: ASK NJ Media Co. <opra+request-321-3b65d9ce@requests.opramachine.com>
Sent: Monday, November 20, 2017 6:58 PM
To: Greene, Joseph
Subject: Open Public Records Act request - OPRA Requests

Dear Ocean County Sheriff's Department,

This is a request for public records made under OPRA and the common law right of access. I certify under penalty of NJSA 2C:28-3 that I have not been convicted of an indictable offense. Please acknowledge receipt of this message.

Records requested:

I'm requesting copies of all OPRA requests from August 1, 2017 to November 20, 2017.

Yours faithfully,

ASK NJ Media Co.

Please use this email address for all replies to this request:
opra+request-321-3b65d9ce@requests.opramachine.com

Is JGreene@co.ocean.nj.us the wrong address for Open Public Records Act requests to Ocean County Sheriff's Department? If so, please contact us using this form:
https://opramachine.com/change_request/new?body=ocean_county_sheriffs_department

Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:
<https://opramachine.com/help/officers>

If you find this service useful as an OPRA officer, please ask your web manager to link to us from your organisation's OPRA page.

Greene, Joseph

From: Gavin Rozzi <opra+request-587-ccb77fdb@requests.opramachine.com>
Sent: Wednesday, November 22, 2017 12:51 PM
To: Greene, Joseph
Subject: Open Public Records Act request - Ivanka Trump / Steven Mnuchin visit security costs

Dear Ocean County Sheriff's Department,

This is a request for public records made under OPRA and the common law right of access. I certify under penalty of NJSA 2C:28-3 that I have not been convicted of an indictable offense. Please acknowledge receipt of this message. Please respond via email only to this address and not via postal mail.

Records requested:

1 - A list of all police CAD responses (including abstract and summary reports) to the Bayville firehouse, 445 Atlantic City Blvd., Berkeley Township on the date of November 13th, 2017 (specifically with regard to the event with Ivanka Trump and Treasury Secretary Steven Mnuchin and Congressman Tom MacArthur at the firehouse regarding the tax plan.)

2 - Records that show the amounts of all overtime paid for the day of November 13th, 2017 (specifically for the event at the Bayville firehouse if available).

Yours faithfully,

Gavin Rozzi

Please use this email address for all replies to this request:
opra+request-587-ccb77fdb@requests.opramachine.com

Is JGreene@co.ocean.nj.us the wrong address for Open Public Records Act requests to Ocean County Sheriff's Department? If so, please contact us using this form:
https://opramachine.com/change_request/new?body=ocean_county_sheriffs_department

Disclaimer: This message and any reply that you make will be published on the internet. Our privacy and copyright policies:
<https://opramachine.com/help/officers>

If you find this service useful as an OPRA officer, please ask your web manager to link to us from your organisation's OPRA page.



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UNDERSHERIFF



TELEPHONE (732) 929-2044

EMAIL

OCSheriffOpraRequests@co.ocean.nj.us

FAX NUMBER

732-349-1909

OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, N.J. 08754 - 2191

REQUEST FOR ACCESS TO GOVERNMENT RECORDS

A REQUEST FOR ACCESS TO A GOVERNMENT RECORD SHALL BE IN WRITING AND HAND DELIVERED, MAILED, TRANSMITTED ELECTRONICALLY OR OTHERWISE CONVEYED TO THE APPROPRIATE CUSTODIAN.

REQUESTOR PLEASE COMPLETE INFORMATION BELOW.

See slide two for important information.

Name: Moshe Kuperwasser

(First Name)

(M)

(Last Name)

Address: 49 Canary Dr, Lakewood, NJ 08701

(Street, P.O.)

(Town/City)

(Zip Code)

Telephone Number

Work

()

Home

E-Mail Address: mkuperwasser@gmail.com

Brief description of Government Records you are

requesting: Recording of the Ocean County Sheriff sale for 10/24/2017

Circle One: Under the 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 of Requestor

10/25/2017

Date

Response Media Type

Circle One

- Copy on a CD (Windows 2000 or XP)
- Paperwork only

Nature of Data

- Date of incident: 10/24/2017
- Time of incident: 2:30 PM
- Address of incident: 101 Hooper Ave, Room 11
- Type of Call: (911 etc.)
- Call made from Home #

Work #

Cell #

For County Use Only

Request Approved

Request Denied

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available:

Fee \$

Paid by: Check

Cash:

Money Order:

Receipt #:

Record Custodian for Ocean County Sheriff

Date

2017 OCT 26 PM 7:19
OCEAN COUNTY
SHERIFF'S OFFICE

OFFICE OF THE SHERIFF

MICHAEL G. MASTRONARDY
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TELEPHONE (732) 929-2044
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OCSherriffOpraRequests@co.ocean.nj.us
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REQUESTOR PLEASE COMPLETE INFORMATION BELOW.

See side two for important information.

Name: Richard F Healy
(First Name) (MI) (Last Name)

Address: 1154 Sassaquin Ave New Bedford 02745
(Street, P.O.) (Town/City) (Zip Code)

Telephone Number: () Work Home

E-Mail Address: rhealy73@comcast.net

Brief description of Government Records you are

requesting: interrogation videos, any video in the following cases: Michael Lubrano Case # 07041227, Malik Washington case # 07041225, Richard Burnham case # 07041202, Anthony Palumbo case # 07041218

Circle One: Under the 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.

Richard F. Healy 10/27/17
Signature of Requestor Date

Response Media Type

Circle One

- Copy on a CD (Windows 2000 or XP)
- Paperwork only

Nature of Data

- Date of incident: _____
- Time of incident: _____
- Address of incident: _____
- Type of Call: (911 etc.) _____
- Call made from Home # _____ Work # _____ Cell # _____

For County Use Only

Request Approved _____ Request Denied _____

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available: _____

Fee \$ _____
Paid by: Check _____ Cash: _____ Money Order: _____ Receipt #: _____

Record Custodian for Ocean County Sheriff _____ Date _____

MICHAEL G. MASTRONARDY
SHERIFF

BRIAN KLIMAKOWSKI
UNDERSHERIFF

NILS R. BERGQUIST, JR.
UNDERSHERIFF

OFFICE OF THE SHERIFF



TELEPHONE (732) 929-2044
EMAIL
OCSherriffOperaRequests@co.ocean.nj.us
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A REQUEST FOR ACCESS TO A GOVERNMENT RECORD SHALL BE IN WRITING AND HAND DELIVERED, MAILED, TRANSMITTED ELECTRONICALLY OR OTHERWISE CONVEYED TO THE APPROPRIATE CUSTODIAN.

REQUESTOR PLEASE COMPLETE INFORMATION BELOW.
See side two for important information.

Name: PAUL C WILLIAMS
(First Name) (MI) (Last Name)
Address: 120 HOOPER AVENUE TOMS RIVER NJ 08753
(Street, P.O.) (Town/City) (Zip Code)
Telephone Number: Work () Home
E-Mail Address: p.c.williams70@gmail.com

Brief description of Government Records you are requesting: 911 CALL FROM PHONE NUMBER 7329986707 OR ALL CALLS, RELATING TO MOTOR VEHICLE

ACCIDENT ON 10/30/17 IN THE AREA OF RT 37 AND WASHINGTON ST, TOMS RIVER NJ

I hereby 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 of Requestor

11/02/17
Date

Response Media Type

Circle One

- Copy on a CD (Windows 2000 or XP)
- Paperwork only

Nature of Data

- Date of Incident: 10/30/17
- Time of Incident: 2:00 (1400 HRS)
- Address of incident: RT 37 & WASHINGTON ST, TOMS RIVER
- Type of Call: (911 or other) 911
- Call made from Home # Work # Cell # 7329986707

For County Use Only

Request Approved

Request Denied

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available:

Fee \$

Paid by: Check Cash: Money Order: Receipt #:

Record Custodian for Ocean County Sheriff

Date



COUNTY OF OCEAN

REQUEST FOR GOVERNMENTAL RECORDS

This form should be completed and returned to the Custodian of Records in the Office of the Clerk of the Board of Chosen Freeholders, Ocean County Administration Building, 1 01 Hooper Avenue, Room 328, Toms River, New Jersey 08753.

Please complete the information below. See reverse side for important information.

NAME: Florence C Zoltanetzky
(First Name) (Initial) (Last Name)

ADDRESS: 25 Harbor Bay Circle Laurence Harbor NJ 08879
(Street, PO) (Town/City) (State) (Zip)

PHONE NUMBER: () (Work) () (Home)

EMAIL ADDRESS: fzoltanetz@optimum.net

Brief description of government record(s) you are requesting to copy X or inspect
(check one):

Purchase price on June-July-August Foreclosures

Surplus Funds

Foreclosure Lists for June-July-August

The Applicant hereby acknowledges receipt of a copy of this form with the date on which the information is expected to be available and the estimated cost. The Applicant hereby certifies that he or she has not been convicted of any indictable offense under the laws of this State, any other state or the United States and is not seeking government records containing personal information pertaining to the victim or the victim's family as provided by N.J.S.A. 47:1A-1 et seq.

Florence C. Zoltanetzky
Signature

11/17/17
Date



FOUNDATION

P.O. Box 32159
Newark, NJ 07102
Tel: 973-642-2086
Fax: 973-642-6523
info@aclu-nj.org
www.aclu-nj.org

Alexi Machek Velez
Staff Attorney
973-854-1728
avelez@aclu-nj.org

VIA E-MAIL

November 15, 2017

Sheriff Michael G. Mastronardy, OEM Coordinator
RJ Miller Air Park
PO Box 2191
120 Hooper Avenue
Toms River, NJ 08754-2191
mmastronardy@co.ocean.nj.us

Ocean County Custodian of Records
Ocean County Clerk of the Board
Administration Bldg., Rm. 328
P.O. Box 2191
Toms River, N.J. 08754-2191
OPRA@co.ocean.nj.us

RE: OPRA request for records regarding "Code Blue Program"

Dear OEM Coordinator Mastronardy and Ocean County Records Custodian:

On behalf of the American Civil Liberties Union of New Jersey, I write to inquire about Ocean County's response to its obligations under N.J.S.A. A:9-43.18, et seq. (hereinafter, "the Act"), requiring that the County establish a "Code Blue Program" for at-risk individuals experiencing homelessness, and to request information pursuant to the Open Public Records Act, N.J.S.A. 47:1A-1, et seq., and the common law right of citizens of the state to obtain access to public documents. South Jersey Publishing Co. v. New Jersey Expressway Auth., 124 N.J. 478, 487-89 (1991).

As you are no doubt aware, the Act requires the County Office of Emergency Management – or its appropriate equivalent – to "coordinate with municipal emergency management coordinators in municipalities with a documented homeless population of at least 10, as noted in the most recent Annual Point In Time Count, in developing consistent Code Blue alert plans . . . that provide for emergency warming centers during implementation of a Code Blue alert plan." N.J.S.A. A:9-43.19. The OEM Coordinator must issue a Code Blue Alert "within 24 to 48 hours" in advance of: (1) "temperatures [that] will reach 25 degrees Fahrenheit or lower without precipitation or 32 degrees Fahrenheit or lower with precipitation;" or (2) a "windchill temperature [of] zero degrees Fahrenheit or less for a period of two hours or more." N.J.S.A. A:9-43.20.

Given the strong likelihood that temperatures will drop below relevant thresholds in the coming weeks if not days, and 2017 data reflecting 224 persons currently experiencing homelessness in Ocean County,¹ we request the following information:

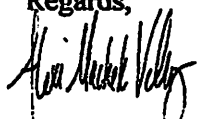
1. All records pertaining to the Code Blue Alert Plan currently in effect in Ocean County;
2. A list of all municipalities within Ocean County that are subject to the Act pursuant to such municipality's documented homeless population of ten (10) or more individuals, including, where possible, (a) the specific documented homeless population within such municipality; and (2) the name of such municipality's "municipal emergency management coordinator." N.J.S.A. A:9-43.19
3. Records reflecting the names of any organizations, groups, individuals, and/or entities with whom the County has arranged to provide emergency warming centers or shelter in the event of a future Code Blue Alert;
4. All records pertaining to agreements between the County and any "volunteer organizations," groups, individuals, and/or entities with whom the County has designated to implement the County's current Code Blue Alert Plan. N.J.S.A. A:9-43.19;
5. Any materials published, produced, or presented by the County and/or its representatives that describe or are used in implementing the County's *current* Code Blue Alert Plan; and
6. All records pertaining to the County's *current* Code Blue Alert Plan detailing the planned provision of transportation to deliver at-risk individuals to local shelters and/or emergency warming centers in the event of a Code Blue Alert.

If you determine that any portion of the above-requested records are exempt from release, we request that you redact the portion that you believe exempt and provide us with copies of the remaining, non-exempt portions. If any or part of this request is denied, please send letter describing the material and listing the specific exemption(s) on which you rely.

If the cost of copies for this request does not exceed \$10, proceed without further approval and send me an invoice with the records. Otherwise, please advise me of the costs before filling the request so that we can discuss arrangements.

Thank you for your attention to this matter and for your assistance. Please contact me with any questions or concerns at (973) 854-1728.

Regards,



Alexi Machek Velez, Esq.

¹ The 2017 Point in Time Count identified 224 persons, in 148 households, experiencing homelessness in Ocean County. See, Monarch Housing Associates, Ocean County's 2017 Point in Time Count of the Homeless (Jan. 24, 2017), <https://monarchhousing.org/wp-content/uploads/njcounts17/2017PITReportOcean.pdf>.

Lekha Tull, DDS, MAGD, DABDSM
214 N Harrison St
Princeton, NJ 08540

Nov 1, 2017

Sheriff's Dept
138 Chestnut St
Toms River, NJ 08753

911 Call log from June 10, 2017

To whom it may concern.

We need the call log for the June 10, 2017

The accident involved me

Please see police report attached.

The time of the call was around 10 am

The location of the incident was the intersection of Long Beach Blvd and 78th street

Thanks you for your assistance.

Sincerely,



Lekha Tull

RECEIVED
OCEAN COUNTY
SHERIFF'S OFFICE
2017 NOV -2 PM 1:51

OFFICE OF THE SHERIFF

MICHAEL G. MASTRONARDY
SHERIFF

BRIAN KLIMAKOWSKI
UNDERSHERIFF

NILS R. BERGQUIST, JR.
UNDERSHERIFF



TELEPHONE (732) 929-2044

EMAIL

OCSheriffOpraRequests@co.ocean.nj.us

FAX NUMBER

732-349-1909

OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, N.J. 08754 - 2191

REQUEST FOR ACCESS TO GOVERNMENT RECORDS

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REQUESTOR PLEASE COMPLETE INFORMATION BELOW.

See side two for important information.

Name: Jeffrey R. Matawa
(First Name) (MI) (Last Name)

Address: 6 Briar Mills Dr. Brick NJ. 08724
(Street, P.O.) (Town/City) (Zip Code)

Telephone Number () Home

E-Mail Address: PAT+830@gmail.com

Brief description of Government Records you are

requesting: Copies of Sheriff Log of When & Why the Sheriff has been
AT 112 E St. Brick N.J. 08723. my ex-wife and I have joint residence at Co-study.
I want to know that my children arent in any danger.
Circle One: Under the 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 of Requestor Jeff R. Matawa Date November 1, 2017

Response Media Type

Circle One

- Copy on a CD (Windows 2000 or XP)
- Paperwork only

Nature of Data

- Date of incident: From JAN. 1 2014 to NOV. 8 2017
- Time of incident: _____
- Address of incident: 112 E St. Brick N.J. 08723
- Type of Call: (911 etc.) Sheriff Offices just showed up As per my two sons.
- Call made from Home # _____ Work # _____ Cell # AND where knocking ON the door.

For County Use Only

Request Approved _____ Request Denied _____

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available: _____

Fee \$ _____

Paid by: Check _____ Cash: _____ Money Order: _____ Receipt #: _____

Record Custodian for Ocean County Sheriff _____ Date _____

TIMEFRAME FOR RESPONSE TO A REQUEST

The public agency is required to grant or deny access to a governmental record no later than seven (7) days after receiving the request. If requestor did not provide a name, address, telephone number or other means of contacting the requestor, the custodian shall not be required to respond until the requestor reappears before the custodian seeking a response to the original request.

Under OPRA, a custodian must deny access to a person who has been convicted of an indictable offense in New Jersey, any other state, or the United States, and who is seeking government records containing personal information pertaining to the person's victim or the victim's family.

If the government record is in storage or archived, the requestor shall be so advised within seven (7) business days after the custodian receives the request. The requestor shall be advised by the custodian when the record can be made available. If the record is not made available by that time, access shall be deemed denied.

RIGHT TO APPEAL

If you wish to challenge a custodian's decision denying access to a public record, you may:

- 1) Institute a proceeding to challenge the custodians decision by filing an action in Superior Court in New Jersey; or
- 2) File a Complaint with the Government Records Council in the Department of Community Affairs.

OFFICE OF THE SHERIFF

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UNDERSHERIFF

NILS R. BERGQUIST, JR.

UNDERSHERIFF



TELEPHONE (732) 929-2044

EMAIL

OCSherriffOpraRequests@co.ocean.nj.us

FAX NUMBER

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REQUESTOR PLEASE COMPLETE INFORMATION BELOW.

See side two for important information.

Name: Dawn Lawson

(First Name)

(MI)

(Last Name)

Address: 31 Sea Breeze Road, Toms River, NJ 08753

(Street, P.O.)

(Town/City)

(Zip Code)

Telephone Number: ()

Work

Home

E-Mail Address: dawnlawson@comcast.net

Brief description of Government Records you are requesting:

outside of Courtroom 13 - video surveillance

Circle One: Under the 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 of Requestor

Response Media Type

Date

Circle One

- Copy on a CD (Windows 2000 or XP)
- Paperwork only

Nature of Data

- Date of incident: November 15, 2017
- Time of incident: 10:08 a.m. - 10:25
- Address of incident: 120 Hooper Ave., outside c
- Type of Call: (911 etc.)
- Call made from Home #

Work #

Cell #

For County Use Only

Request Approved

Request Denied

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available:

Fee \$

Paid by: Check

Cash:

Money Order:

Receipt #:

Record Custodian for Ocean County Sheriff

Date

OFFICE OF THE SHERIFF

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REQUESTOR PLEASE COMPLETE INFORMATION BELOW.

See side two for important information.

Name: Lisa E. Halpern ESR
(First Name) (Mi) (Last Name)

Address: 500 Hooper Ave Toms River NJ 08753
(Street, P.O.) (Town/City) (Zip Code)

Telephone Number: rk () Home

E-Mail Address: lisaehalpern@comcast.net

Brief description of Government Records you are requesting:

video footage near 1st Floor metal detector in the Justice Complex on 11/15/17 at 1010 hrs. See attached incident report

Circle One: Under the 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 of Requestor [Signature] Date 11/15/17

Response Media Type

Circle One

- ☒ Copy on a CD (Windows 2000 or XP) video
- ☐ Paperwork only

Nature of Data

- Date of incident: 11/15/17
- Time of incident: 10:27 AM
- Address of incident: Justice Complex
- Type of Call: (911 etc.) report made to sheriff's officer
- Call made from Home # _____ Work # _____ Cell # _____

For County Use Only

Request Approved _____ Request Denied _____

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available: _____

Fee \$ _____

Paid by: Check _____ Cash: _____ Money Order: _____ Receipt #: _____

Record Custodian for Ocean County Sheriff _____

Date _____

2017 NOV 17 AM 10:09
OCEAN COUNTY
SHERIFF'S OFFICE

Oct. 3. 2017 3:09PM

No. 9445 P. 3
Print Form

OFFICE OF THE SHERIFF

MICHAEL G. MASTRONARDY
SHERIFF

BRIAN KLIMAKOWSKI
UNDERSHERIFF

NILS R. BERGQUIST, JR.
UNDERSHERIFF



TELEPHONE (732) 929-2044

EMAIL
OCSherriffOpsRequests@co.ocean.nj.us
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REQUESTOR PLEASE COMPLETE INFORMATION BELOW.
See side two for important information.

Name: Department of Children and Families/DCPP
(First Name) (MI) (Last Name)
Address: 570 South Avenue Cranford 07016
(Street, P.O.) (Town/City) (Zip Code)
Telephone Number: (908) 497-1488 x7838 Work () Home
E-Mail Address: Niziah.Wilson@dcf.state.nj.us

Brief description of Government Records you are requesting:

DCPP is requesting a police report for investigation purposes

Circle One: Under the 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 of Requestor Niziah Wilson Response Media Type Incident # 17506121
Date 10/03/2017

Circle One

- Copy on a CD (Windows 2000 or XP)
- Paperwork only (Fax / email)

Nature of Data

- Date of incident 08/27/2017
- Time of incident: _____
- Address of incident: Six Flags Great Adventures
- Type of Call: (911 etc.) 911/Child Welfare Check
- Call made from Home # _____ Work # _____ Cell # _____

For County Use Only

Request Approved _____ Request Denied _____

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available: _____

Fee \$ _____

Paid by: Check _____ Cash: _____ Money Order: _____ Receipt #: _____

Record Custodian for Ocean County Sheriff _____ Date _____

LAW OFFICES
HONIG & GREENBERG, LLC

ADAM D. GREENBERG†
MURRAY HONIG
HELENE B. RAUSH†

1949 BERLIN ROAD
SUITE 200
CHERRY HILL, NEW JERSEY 08003

Telephone (856) 770-0990
Facsimile (856) 770-8511
AGREENBERG@HGLLCLAW.COM

† ALSO MEMBER OF PA BAR

October 19, 2017

EMAIL SUBMISSION TO:

OCSherriffOpraRequests@co.ocean.nj.us

ATTN: OPRA Request Clerk

Ocean County Sheriff's Department

PO Box 2191

Toms River, NJ 08754-2191

Re: OPRA Request Regarding 04/04/2017 Sheriff's Sale

Nationstar Mortgage, LLC, et al. v. Dawn R. Ochelli, et al.

Court Docket #: F03073813

Sheriff Docket #: CH772055

Dear Sir/Madam:

This office represents FIG Capital Investments, NJ13, LLC, the Plaintiff in a tax sale certificate foreclosure entitled MTAG as Custodian for FIG Capital investments NJ13, LLC v. Fred H. McDaniel and Leona G. McDaniel, his wife, et al. in the Superior Court of New Jersey, Chancery Division, Ocean County under Docket No.: F-13613-17 against the property known as 1 Derby Court in the Township of Lacey in Ocean County, New Jersey (Block 1024.02; Lot 10).

Please find enclosed an OPRA Request concerning the Sheriff Sale held on April 4, 2017. Specifically, we are trying to ascertain a copy of the Sheriff Deed generated from that sale. At your convenience, please provide a response to our request.

We will, of course, accommodate any additional time you may need to provide a response to the Request. I look forward to working with you. Thank you for your anticipated courtesies.

Very truly yours
HONIG & GREENBERG, L.L.C.

A handwritten signature in black ink, appearing to read "Adam D. Greenberg". The signature is stylized with a large, looped "G" and a cursive "A".

By: Adam D. Greenberg

ADG:kt

Enclosure

c: FIG Capital Investments NJ13, LLC

OFFICE OF THE SHERIFF

MICHAEL G. MASTRONARDY
SHERIFF

BRIAN KLIMAKOWSKI
UNDERSHERIFF

NILS R. BERGQUIST, JR.
UNDERSHERIFF



TELEPHONE (732) 929-2044

EMAIL

OCSheriffOpraRequests@co.ocean.nj.us

FAX NUMBER

732-349-1909

OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, N.J. 08754 - 2191

REQUEST FOR ACCESS TO GOVERNMENT RECORDS

A REQUEST FOR ACCESS TO A GOVERNMENT RECORD SHALL BE IN WRITING AND HAND DELIVERED, MAILED, TRANSMITTED ELECTRONICALLY OR OTHERWISE CONVEYED TO THE APPROPRIATE CUSTODIAN.

REQUESTOR PLEASE COMPLETE INFORMATION BELOW.

See side two for important information.

Name: Adam D. Greenberg, Esquire
(First Name) (MI) (Last Name)
Address: 1949 Berlin Road, Suite 200 Cherry Hill, NJ 08003-3737
(Street, P.O.) (Town/City) (Zip Code)

Telephone Number: 856 770-0990 Work () Home

E-Mail Address: Agreenberg@hgllc.law.com

Brief description of Government Records you are requesting:

Court Docket #: F03073813

Sheriff Deed from 04/04/2017 Sale. Sheriff Docket #: CH772055

NationStar Mortgage LLC, et al. v. Dawn R. Ochelli, et al.

Circle One: Under the 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 of Requestor

Date

Response Media Type

Circle One

- Copy on a CD (Windows 2000 or XP)
- Paperwork only

Email Transmission

Nature of Data

- Date of Incident: _____
- Time of Incident: _____
- Address of Incident: _____
- Type of Call: (911 etc.) _____
- Call made from Home # _____ Work # _____ Cell # _____

For County Use Only

Request Approved _____

Request Denied _____

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available: _____

Fee \$ _____

Paid by: Check _____ Cash: _____ Money Order: _____ Receipt #: _____

Record Custodian for Ocean County Sheriff

Date

TIMEFRAME FOR RESPONSE TO A REQUEST

The public agency is required to grant or deny access to a governmental record no later than seven (7) days after receiving the request. If requestor did not provide a name, address, telephone number or other means of contacting the requestor, the custodian shall not be required to respond until the requestor reappears before the custodian seeking a response to the original request.

Under OPRA, a custodian must deny access to a person who has been convicted of an indictable offense in New Jersey, any other state, or the United States, and who is seeking government records containing personal information pertaining to the person's victim or the victim's family.

If the government record is in storage or archived, the requestor shall be so advised within seven (7) business days after the custodian receives the request. The requestor shall be advised by the custodian when the record can be made available. If the record is not made available by that time, access shall be deemed denied.

RIGHT TO APPEAL

If you wish to challenge a custodian's decision denying access to a public record, you may:

- 1) Institute a proceeding to challenge the custodians decision by filing an action in Superior Court in New Jersey; or
- 2) File a Complaint with the Government Records Council in the Department of Community Affairs.

Record Custodian for Ocean County Sheriff

Paid by: Check _____ Cash: _____ Money Order: _____ Receipt #: _____ Date _____

Approximate date records will be available: _____

Fee \$ _____

If request is denied please state reason, in whole or in part, below: _____

Request Approved _____ Request Denied _____

For County Use Only

Work # _____ Cell # _____

Nature of Data

- Date of incident: August 24, 2017
- Time of incident: 12:33pm
- Address of incident: 424 7th Street, Lakewood
- Type of Call: (911 etc.)
- Call made from Home # _____

Circle One

- Copy on a CD (Windows 2000 or XP)
- Paperwork only

Signature of Requestor _____

Response Media Type _____ Date _____

Circle One: Under the 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.

Brief description of Government Records you are requesting a copy of ANY AND ALL reports, records, documents, photographs, video, and/or audio files available in connection with a fatal motor vehicle accident involving all the way towing driver Chayim Goodman and pedestrian Hadassah Krohn.

E-Mail Address: L.Norrega@wallersnixon.com

Telephone Number: (908) 272-9060 Work (908) 272-8664 FAX Home

Address: 123 North Union Avenue, Suite 205, Cranford NJ 07016

Name: Lisa Norrega (First Name) (Last Name)

See side two for important information.

REQUESTOR PLEASE COMPLETE INFORMATION BELOW.

A REQUEST FOR ACCESS TO A GOVERNMENT RECORD SHALL BE IN WRITING AND HAND DELIVERED, MAILED, TRANSMITTED ELECTRONICALLY OR OTHERWISE CONVEYED TO THE APPROPRIATE CUSTODIAN.

REQUEST FOR ACCESS TO GOVERNMENT RECORDS

OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, N.J. 08754 • 2191



OFFICE OF THE SHERIFF

MICHAEL G. MASTRONARDY
SHERIFF
BRIAN KLIMAKOWSKI
UNDER-SHERIFF
NILS R. BERGQUIST, JR.
UNDER-SHERIFF

TELEPHONE (732) 929-2044
EMAIL
FAX NUMBER
732-349-1909
OCSheriff@co.ocean.nj.us



Print Form

MICHAEL G. MASTRONARDY
SHERIFF

BRIAN KLIMAKOWSKI
UNDERSHERIFF

NILS R. BERGQUIST, JR.
UNDERSHERIFF



TELEPHONE (732) 929-2044
EMAIL
OCSherriffOperaRequests@co.ocean.nj.us
FAX NUMBER
732-349-1909

OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, N.J. 08754 • 2191

REQUEST FOR ACCESS TO GOVERNMENT RECORDS

A REQUEST FOR ACCESS TO A GOVERNMENT RECORD SHALL BE IN WRITING AND HAND DELIVERED, MAILED, TRANSMITTED ELECTRONICALLY OR OTHERWISE CONVEYED TO THE APPROPRIATE CUSTODIAN.

REQUESTOR PLEASE COMPLETE INFORMATION BELOW.
See side two for important information.

Name: Jodi (First Name) Hoyt (Last Name)

Address: P.O. Box 47604 (Street, P.O.) Plymouth (Town/City) 55447 (Zip Code)

Telephone Number: (866) 233 0353 Work () Home

E-Mail Address: jodi.hoyt@theclinicscenter.com

Brief description of Government Records you are requesting:

Jersey Central Power: Light/pole damaged in accident

Circle One: Under the 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.

Jodi Hoyt
Signature of Requestor

10.19.2017
Date

Response Media Type

Circle One

- ☒ Copy on a CD (Windows 2000 or XP)
- ☐ Paperwork only

Nature of Data

- Date of Incident: 5.17.2017
- Time of Incident: _____
- Address of Incident: 1975 Rutgers University Blvd
- Type of Call: (911 etc.) _____
- Call made from Home # _____ Work # _____ Cell # _____

For County Use Only

Request Approved _____ Request Denied _____

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available: _____

Fee \$ _____

Paid by: Check _____ Cash: _____ Money Order: _____ Receipt #: _____

Record Custodian for Ocean County Sheriff _____ Date _____

RECEIVED
OCEAN COUNTY
SHERIFF'S OFFICE
2017 OCT 19 AM 11:10

OFFICE OF THE SHERIFF

MICHAEL G. MASTRONARDY
SHERIFF

BRIAN KLIMAKOWSKI
UNDERSHERIFF

NILS R. BERGQUIST, JR.
UNDERSHERIFF



TELEPHONE (732) 929-2044
EMAIL
OCSheriffOpraRequests@co.ocean.nj.us
FAX NUMBER
732-349-1909

OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, N.J. 08754 - 2191

REQUEST FOR ACCESS TO GOVERNMENT RECORDS

A REQUEST FOR ACCESS TO A GOVERNMENT RECORD SHALL BE IN WRITING AND HAND DELIVERED, MAILED, TRANSMITTED ELECTRONICALLY OR OTHERWISE CONVEYED TO THE APPROPRIATE CUSTODIAN.

REQUESTOR PLEASE COMPLETE INFORMATION BELOW.
See side two for important information.

Name: Richard F Healy
(First Name) (MI) (Last Name)
Address: 1154 Sassaquin Ave New Bedford 02745
(Street, P.O.) (Town/City) (Zip Code)
Telephone Number: () Work () Home
E-Mail Address: rhealy73@comcast.net

Brief description of Government Records you are
requesting: interrogation videos, any video in the following cases: Michael Lubrano Case # 07041227, Malik
Washington case # 07041225, Richard Burnham case # 07041202, Anthony Palumbo case # 07041218

Circle One: Under the 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 of Requestor Richard F. Healy Response Media Type 10/27/17
Date

- Circle One
- Copy on a CD (Windows 2000 or XP)
 - Paperwork only

Nature of Data

- Date of incident: _____
- Time of incident: _____
- Address of incident: _____
- Type of Call: (911 etc.) _____
- Call made from Home # _____ Work # _____ Cell # _____

For County Use Only

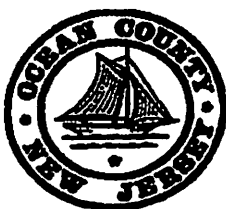
Request Approved _____ Request Denied _____

If request is denied please state reason, in whole or in part,
below:

Approximate date records will be available: _____
Fee \$ _____

Paid by: Check _____ Cash: _____ Money Order: _____ Receipt #: _____

Record Custodian for Ocean County Sheriff _____ Date _____



COUNTY OF OCEAN

REQUEST FOR GOVERNMENTAL RECORDS

This form should be completed and returned to the Custodian of Records in the Office of the Clerk of the Board of Chosen Freeholders, Ocean County Administration Building, 101 Hooper Avenue, Room 328, Toms River, New Jersey 08753.

Please complete the information below. See reverse side for important information.

NAME: Jeremiah Harris
(First Name) (MI) (Last Name)

ADDRESS: 456 Rt. 22 W. Whitehouse Station, NJ 08889
(Street, PO) (Town/City) (State) (zip)

PHONE NUMBER: _____, (Work) () _____ (Home)

EMAIL ADDRESS: bids@perc-corp.com

Brief description of government record(s) you are requesting to copy ☒ or inspect _____
(check one):

The technical evaluation/score from the 2017
RFP "Support Plan for Maintenance and Service for
Gas Chromatography/Mass Spectrometry"

The Applicant hereby acknowledges receipt of a copy of this form with the date on which the information is expected to be available and the estimated cost. The Applicant hereby certifies that he or she has not been convicted of any indictable offense under the laws of this State, any other state or the United States and is not seeking government records containing personal information pertaining to the victim or the victim's family as provided by N.J.S.A. 47:1A-1 et seq.

Signature [Signature]

Date 10/4/17

OFFICE OF THE SHERIFF

MICHAEL G. MASTRONARDY
SHERIFFBRIAN KLIMAKOWSKI
UNDERSHERIFFNILS R. BERGQUIST, JR.
UNDERSHERIFFTELEPHONE (732) 929-2044
EMAIL
OCSheriff@opraRequests@co.ocean.nj.us
FAX NUMBER
732-349-1909

OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, N.J. 08754 - 2191

REQUEST FOR ACCESS TO GOVERNMENT RECORDS

A REQUEST FOR ACCESS TO A GOVERNMENT RECORD SHALL BE IN WRITING AND HAND DELIVERED, MAILED, TRANSMITTED ELECTRONICALLY OR OTHERWISE CONVEYED TO THE APPROPRIATE CUSTODIAN.

REQUESTOR PLEASE COMPLETE INFORMATION BELOW.
See side two for important information.Name: David Gamble
(First Name) (MI) (Last Name)Address: 57 South Main Street # 172 Neptune NJ 07753
(Street, P.O.) (Town/City) (Zip Code)

Telephone Number: _____ Work _____ Home _____

E-Mail Address: DLGInvestigators@Gmail.COM

Brief description of Government Records you are requesting:

Please provide all reports, diagrams, photographs and video related to a fatal motor vehicle accident on September 23, 2017 at Longfellow and Whitter in Toms River, NJ. Victim's name is Joseph Bartolotta. Thank you

Circle One: Under the 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 of Requestor _____

Response Media Type _____

Date 10/24/2017

Circle One

Copy on a CD (Windows 2000 or XP)

• Paperwork only

Nature of Data

- Date of Incident 09/23/2017
- Time of Incident: _____
- Address of Incident Longfellow and Whitter, Toms River
- Type of Call: (911 etc.) _____
- Call made from Home # _____ Work # _____ Cell # _____

For County Use Only

Request Approved _____ Request Denied _____

If request is denied please state reason, in whole or in part, below: _____

Approximate date records will be available: _____

Fee \$ _____

Paid by: Check _____ Cash: _____ Money Order: _____ Receipt #: _____

Record Custodian for Ocean County Sheriff _____ Date _____

OFFICE OF THE SHERIFF

MICHAEL G. MASTRONARDY
SHERIFF

BRIAN KLIMAKOWSKI
UNDERSHERIFF

NILS R. BERGQUIST, JR.
UNDERSHERIFF



TELEPHONE (732) 929-2044
EMAIL
OCSheriffOpraRequests@co.ocean.nj.us
FAX NUMBER
732-349-1909

OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, N.J. 08754 - 2191

REQUEST FOR ACCESS TO GOVERNMENT RECORDS

A REQUEST FOR ACCESS TO A GOVERNMENT RECORD SHALL BE IN WRITING AND HAND DELIVERED, MAILED, TRANSMITTED ELECTRONICALLY OR OTHERWISE CONVEYED TO THE APPROPRIATE CUSTODIAN.

REQUESTOR PLEASE COMPLETE INFORMATION BELOW.
See side two for important information.

Name: David Gamble
(First Name) (MI) (Last Name)

Address: 57 South Main Street # 172 Neptune NJ 07753
(Street, P.O.) (Town/City) (Zip Code)

Telephone Number: _____ Work _____ Home _____

E-Mail Address: DLGInvestigators@Gmail.COM

Brief description of Government Records you are requesting:

Please provide all CAD logs, 911 calls and transmissions related to a fatal motor vehicle accident on September 29, 2017 at Longfellow and Whitter in Toms River, NJ. Victim's name is Joseph Bartolotta. Thank you

Circle One: Under the 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 of Requestor: _____ Date: 10/24/2017

Response Media Type

Circle One

- Copy on a CD (Windows 2000 or XP)
- Paperwork only

Nature of Data

- Date of Incident: 09/29/2017
- Time of Incident: _____
- Address of Incident: Longfellow and Whitter, Toms River
- Type of Call: (911 etc.) _____
- Call made from Home # _____ Work # _____ Cell # _____

For County Use Only

Request Approved _____ Request Denied _____

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available: _____

Fee \$ _____

Paid by: Check _____ Cash: _____ Money Order: _____ Receipt #: _____

Record Custodian for Ocean County Sheriff _____ Date _____



COUNTY OF OCEAN

REQUEST FOR GOVERNMENTAL RECORDS

This form should be completed and returned to the Custodian of Records in the Office of the Clerk of the Board of Chosen Freeholders, Ocean County Administration Building, 101 Hooper Avenue, Room 328, Toms River, New Jersey 08753.

Please complete the information below. See reverse side for important information.

NAME: David J Bruno
(First Name) (MI) (Last Name)

ADDRESS: 4 York Avenue, 2nd floor West Caldwell NJ 07006
(Street, PO) (Town/City) (State) (zip)

PHONE NUMBER: () (Work) () (Home)

EMAIL ADDRESS: resnes@bianchilawgroup.com

Brief description of government record(s) you are requesting to copy X or inspect
(check one):

This office represents, Clare P. Sullivan, in an on going legal matter. We request the date of arrest of Clare

P. Sullivan in complaint 1527-S-2016-000018.

Thank you for your time.

The Applicant hereby acknowledges receipt of a copy of this form with the date on which the information is expected to be available and the estimated cost. The Applicant hereby certifies that he or she has not been convicted of any indictable offense under the laws of this State, any other state or the United States and is not seeking government records containing personal information pertaining to the victim or the victim's family as provided by N.J.S.A. 47:1A-1 et seq.

Signature

10/27/2017

Date



COUNTY OF OCEAN

REQUEST FOR GOVERNMENTAL RECORDS

This form should be completed and returned to the Custodian of Records in the Office of the Clerk of the Board of Chosen Freeholders, Ocean County Administration Building, 101 Hooper Avenue, Room 328, Toms River, New Jersey 08753.

Please complete the information below. See reverse side for important information.

NAME: David J Bruno
(First Name) (MI) (Last Name)

ADDRESS: 4 York Avenue, 2nd floor West Caldwell NJ 07006
(Street, PO) (Town/City) (State) (zip)

PHONE NUMBER: (862) 210-8570 (Work) (862) 210-8570 (Home)

EMAIL ADDRESS: resnes@bianchilawgroup.com

Brief description of government record(s) you are requesting to copy X or inspect _____
(check one):

This office represents, Catherine P. Sullivan, in an on going legal matter. We request the date of arrest of Catherine

P. Sullivan in complaint 1527-S-2016-000019.

Thank you for your time.

The Applicant hereby acknowledges receipt of a copy of this form with the date on which the information is expected to be available and the estimated cost. The Applicant hereby certifies that he or she has not been convicted of any indictable offense under the laws of this State, any other state or the United States and is not seeking government records containing personal information pertaining to the victim or the victim's family as provided by N.J.S.A. 47:1A-1 et seq.

Signature

10/27/2017

Date

July 1, 2002

OCEAN COUNTY
SHERIFF'S OFFICE
RECEIVED
OCT 27 PM 12:11

FOR COUNTY USE ONLY	
Request Approved _____	
Request Denied _____	Reason for denial:

Approximate date records will be available: _____	
Fee: \$ _____	
Paid by: Check _____	Cash _____ Money Order _____

Custodian of Records	Date

2017 OCT 27 PM 12:11
RECEIVED
OCEAN COUNTY
CLERK'S OFFICE

TIMEFRAME FOR RESPONSE TO A REQUEST
The Custodian of Records is required to grant or deny access to a government record no later than seven (7) business days after receiving the request. If you do not provide a name, address, telephone number or other means of contacting you, the Custodian of Records will be unable to respond until you reappear in the Custodian of Records' Office seeking a response to the original request. If the government record is in storage or archived, you will be so advised within seven (7) business days after the Custodian of Records receives your request. You will be advised by the Custodian of Records when the record can be made available. If the record is not made available by that time, access will be considered to be denied.
RIGHT TO APPEAL
If you wish to challenge a decision of the Custodian of Records denying access to a government record, you may: 1) Institute a proceeding to challenge that decision by filing an action in Superior Court in New Jersey; or 2) File a Complaint with the Government Records Council in the Department of Community Affairs.

OCEAN COUNTY BOARD OF CHOSEN FREEHOLDERS

Administration Building
101 Hooper Avenue
Toms River, New Jersey 08753

PUBLIC NOTICE

In accordance with Public Law 2001, Chapter 404, concerning public access to government records, please be advised that the Custodian of Records in the Office of the Clerk of the Board of Chosen Freeholders is located at the Ocean County Administration Building, 101 Hooper Avenue, Toms River, New Jersey 08753, business days between the hours of 9:00 a.m. and 4:30 p.m.

A request to inspect or copy government records should be submitted on the Request for Government Records form which is available in the Office of the Custodian of Records.

A person who is denied access to a government record by the Custodian of Records may institute a proceeding to challenge the Custodian's decision by filing an action in Superior Court.

In lieu of filing an action in Superior Court, a person who is denied access to a government record may file a complaint with the Government Records Council.

7-1-2002
Date

Betty Vasek
Custodian of Records

Permanent Posting Do Not Remove

2017 OCT 27 PM 12:12
OCEAN COUNTY
SHERIFF'S OFFICE

July 1, 2002

4 York Ave, 2nd Floor
West Caldwell, New Jersey 07006
T: 862-210-8570
F: 862-210-8761
Blanchilawgroup.com

THE BIANCHI LAW GROUP, LLC

Fax

To: Ocean County Sheriff's Office **Fax:** (732) 349-1909

From: David J. Bruno, Esq. **Date:** October 27, 2017

Re: OPRA request for Clare P. Sullivan **Pages:** 4 (including cover page)

Cc:

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

Comments:

RECEIVED
OCEAN COUNTY
SHERIFF'S OFFICE
2017 OCT 27 PM 12:11

OCEAN COUNTY BOARD OF CHOSEN FREEHOLDERS

Administration Building
101 Hooper Avenue
Toms River, New Jersey 08753

PUBLIC NOTICE

In accordance with Public Law 2001, Chapter 404, concerning public access to government records, please be advised that the Custodian of Records in the Office of the Clerk of the Board of Chosen Freeholders is located at the Ocean County Administration Building, 101 Hooper Avenue, Toms River, New Jersey 08753, business days between the hours of 9:00 a.m. and 4:30 p.m.

A request to inspect or copy government records should be submitted on the Request for Government Records form which is available in the Office of the Custodian of Records.

A person who is denied access to a government record by the Custodian of Records may institute a proceeding to challenge the Custodian's decision by filing an action in Superior Court.

In lieu of filing an action in Superior Court, a person who is denied access to a government record may file a complaint with the Government Records Council.

7-1-2002
Date

Betty Vane
Custodian of Records

Permanent Posting Do Not Remove

July 1, 2002

2017 OCT 27 PM 12:11
RECEIVED
OCEAN COUNTY
SHERIFF'S OFFICE

<i>FOR COUNTY USE ONLY</i>	
Request Approved _____	
Request Denied _____	<i>Reason for denial:</i>

Approximate date records will be available: _____	
Fee: \$_____	
Paid by: Check _____	Cash _____ Money Order _____

Custodian of Records	Date _____

2017 OCT 27

PM 12:30

RECEIVED
OCEAN COUNTY
SHERIFF'S OFFICE

TIMEFRAME FOR RESPONSE TO A REQUEST

The Custodian of Records is required to grant or deny access to a government record no later than seven (7) business days after receiving the request. If you do not provide a name, address, telephone number or other means of contacting you, the Custodian of Records will be unable to respond until you reappear in the Custodian of Records' Office seeking a response to the original request.

If the government record is in storage or archived, you will be so advised within seven (7) business days after the Custodian of Records receives your request. You will be advised by the Custodian of Records when the record can be made available. If the record is not made available by that time, access will be considered to be denied.

RIGHT TO APPEAL

If you wish to challenge a decision of the Custodian of Records denying access to a government record, you may:

- 1) Institute a proceeding to challenge that decision by filing an action in Superior Court in New Jersey; or
- 2) File a Complaint with the Government Records Council in the Department of Community Affairs.

4 York Ave, 2nd Floor
West Caldwell, New Jersey 07006
T: 862-210-8570
F: 862-210-8761
Bianchilawgroup.com

THE BIANCHI LAW GROUP, LLC

Fax

To: Ocean County Sheriff's Office **Fax:** (732) 349-1909

From: David J. Bruno, Esq. **Date:** October 27, 2017

Re: OPRA request for Catherin P. Sullivan **Pages:** 4 (including cover page)

Cc:

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

Comments:

RECEIVED
OCEAN COUNTY
SHERIFF'S OFFICE
2017 OCT 27 PM 12:10

Kanko , Nicole

From: Greene, Joseph on behalf of OpraRequests OCSheriff
Sent: Wednesday, September 13, 2017 9:20 AM
To: Bockin , Kim; Kanko , Nicole
Subject: FW: Open public records request

I just received this OPRA request from yesterday's sales. Can you please provide the request info for me? Thank you very much!!!

Lt. Joseph Greene
Ocean County Sheriff's Office
120 Hooper Avenue
Toms River, NJ 08753
(732) 506-5138

From: s weaver [mailto:sweaver300@yahoo.com]
Sent: Tuesday, September 12, 2017 5:01 PM
To: OpraRequests OCSheriff <OCSheriffOpraRequests@co.ocean.nj.us>
Subject: Open public records request

I am making the following open public records request for the following:

1. Copies of the bidder forms that were filled out by the winning third party bidders for the property " 303 Beach Plum Court, Tuckerton" and the property " 66 Nautilus Drive, Barnegat", both which were sold at the September 12, 2017 Sheriffs Sale.

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.

Shannon Weaver
Box 46
Island Heights, NJ 08732

Greene, Joseph

From: Sonnenfeld, Nina
Sent: Monday, September 18, 2017 12:13 PM
To: Greene, Joseph
Subject: RE: OPRA Request
Attachments: 09-15-17 0749 hrs 215 Forepeak Ave BEWD Warrant Service.pdf

Importance: High

Lt. Greene,

Please see the attached regarding this request.

Thanks,
Nina

From: Greene, Joseph On Behalf Of OpraRequests OCSheriff
Sent: Monday, September 18, 2017 12:00 PM
To: Sonnenfeld, Nina <NSonnenfeld@co.ocean.nj.us>
Subject: FW: OPRA Request

Thank you!

Lt. Joseph Greene
Ocean County Sheriff's Office
120 Hooper Avenue
Toms River, NJ 08753
(732) 506-5138

From: Gavin Rozzi [<mailto:gr@gavinrozzi.com>]
Sent: Friday, September 15, 2017 10:15 AM
To: OpraRequests OCSheriff <OCSheriffOpraRequests@co.ocean.nj.us>
Subject: OPRA Request

This is a request for public records in accordance with the Open Public Records Act (OPRA) as well as the common law right of access. The undersigned hereby certifies under penalty of perjury that he has NOT been convicted of an indictable offense either under the laws of the State of New Jersey or the laws of the United States.

Please provide the following government records via email to this address in electronic format:

- 1 - List of all Ocean County Sheriff's Department CAD responses to 215 Forepeak Avenue, Beachwood NJ from September 1st, 2017 to September 15th, 2017.
- 2 - Copy of the incident report and narrative regarding the September 15th, 2017 arrest of Michael N. McHale, 215 Forepeak Avenue, Beachwood NJ by OCSD personnel.

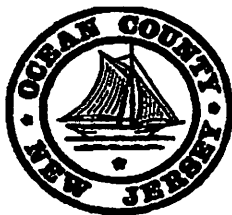
Gavin C. Rozzi
Editor, Ocean County Politics and creator of JerseyLeaks.org & OPRAMachine.com

Office: (732)-504-3636
Cell: (848)-667-0840
Fax: (609)-312-7187

[PGP Public Key](#) 5DA2 A929 9887 A4C6
Notary Public of New Jersey ID # 50020518

Postal mail: PO Box 32
Lanoka Harbor, New Jersey 08734

ROZZI MEDIA GROUP



COUNTY OF OCEAN

REQUEST FOR GOVERNMENTAL RECORDS

This form should be completed and returned to the Custodian of Records in the Office of the Clerk of the Board of Chosen Freeholders, Ocean County Administration Building, 1 01 Hooper Avenue, Room 328, Toms River, New Jersey 08753.

Please complete the information below. See reverse side for important information.

NAME: Erica N Powell
(First Name) (MI) (Last Name)

ADDRESS: 111 White Horse Pike Haddon Heights, NJ 08035
(Street, PO) (Town/City) (State) (zip)

PHONE NUMBER: (856) 547-7888 (Work) () (Home)

EMAIL ADDRESS: ericapowell@helmerlegal.com

Brief description of government record(s) you are requesting to copy XX or inspect
(check one):

A complete copy of the Computer Aided Dispatch (CAD) report, Communications CD and any 9-1-1 calls
regarding the report of a motor vehicle accident at the Delta Gas Station located at 200 Route 37E in Lakehurst, NJ
on July 1, 2017 at 10:21 pm involving a Gray Volkswagon Beetle bearing registration S28FCT

The Applicant hereby acknowledges receipt of a copy of this form with the date on which the information is expected to be available and the estimated cost. The Applicant hereby certifies that he or she has not been convicted of any indictable offense under the laws of this State, any other state or the United States and is not seeking government records containing personal information pertaining to the victim or the victim's family as provided by N.J.S.A. 47:1A-1 et seq.

Erica N. Powell
Signature

September 8, 2017
Date

OFFICE OF THE SHERIFF

WILLIAM L. POLHEMUS
SHERIFF
WAYNE R. RUPERT
UNDERSHERIFF
MICHAEL G. OSBORN
CHIEF



TELEPHONE 929-2044
AREA CODE 732

FAX NUMBER
732-831-7979

OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, N.J. • 08754-2191

REQUEST FOR ACCESS TO GOVERNMENT RECORDS

A REQUEST FOR ACCESS TO A GOVERNMENT RECORD SHALL BE IN WRITING AND HAND DELIVERED, MAILED, TRANSMITTED ELECTRONICALLY OR OTHERWISE CONVEYED TO THE APPROPRIATE CUSTODIAN.

REQUESTOR PLEASE COMPLETE INFORMATION BELOW.

See side two for important information.

Name: DALE (First Name) ELBERT (Last Name) FIRE CHIEF, TUCKERTON

Address: 326 E. MAIN ST (Street, P.O.) TUCKERTON NJ (Town/City) 08087 (Zip Code)

Telephone Number: (609) 296-1025 Work () Home

E-Mail Address: _____

Brief description of Government Records you are requesting:

REQUESTING ALL EMS & PHONE RECORDINGS, FIRE RECORDINGS,
PLUS DOCUMENTATION WITH TIME STAMPS RELATED TO
THIS INCIDENT.

Signature of Requestor _____

Date 9/5/17

Response Media Type

Circle One

- Copy on a CD (Windows 2000 or XP)
- Paperwork only
- Copy on a cassette tape

Nature of Data

- Date of incident: SEPT 4, 2017
- Time of incident: AFTER 12:00PM +
- Address of incident: GARDEN ST. PARKWAY
- Type of Call: (911 etc.) MVA - INJURIES
- Call made from Home # _____ Work # _____ Cell # _____

PHONE: BURLINGTON
MUNICIPAL

RADIO: EMS / FIRE

DOCS: PRINT-OUTS - ALL W/
TIMES.

55.358.

For County Use Only

Request Approved _____ Request Denied _____

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available: _____

Fee \$ _____

Paid by: Check _____ Cash: _____ Money Order: _____

Record Custodian for Ocean County Sheriff _____ Date _____



OFFICE OF THE SHERIFF

WILLIAM L. POLHEMUS
SHERIFF
WAYNE R. RUPERT
UNDERSHERIFF
MICHAEL G. OSBORN
CHIEF



TELEPHONE 929-2044
AREA CODE 732

FAX NUMBER
732-831-7979

OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, N.J. • 08754-2191

REQUEST FOR ACCESS TO GOVERNMENT RECORDS

A REQUEST FOR ACCESS TO A GOVERNMENT RECORD SHALL BE IN WRITING AND HAND DELIVERED, MAILED, TRANSMITTED ELECTRONICALLY OR OTHERWISE CONVEYED TO THE APPROPRIATE CUSTODIAN.

REQUESTOR PLEASE COMPLETE INFORMATION BELOW.

See side two for important information.

Name: DALE (First Name) EGBERT (Last Name) FIRE CHIEF, TUCKERTON

Address: 326 EAST MAIN ST. (Street, P.O.) TUCKERTON NJ (Town/City) 08087 (Zip Code)

Telephone Number: (609) 296-1025 Work () Home

E-Mail Address: _____

Brief description of Government Records you are requesting:

PHONE, RADIO RECORDINGS (FIRE & EMS) PLUS DOCUMENTATION w/TIME
STAMPS. - COMPLETE

Signature of Requestor _____ Date 9/5/17

Response Media Type

Circle One

- Copy on a CD (Windows 2000 or XP)
- Paperwork only
- Copy on a cassette tape

RADIO - FIRE
EMS

PHONE - MUNDL

DOCS -

PRINT-OUTS w/TIMES

Nature of Data

- Date of incident: AUGUST 9, 2017
- Time of incident: AFTER 3:00 PM
- Address of incident: EAGLEWOOD, 592 MAIN ST (CALLOWAY'S)
- Type of Call: (911 etc.) MVA - INJURIES
- Call made from Home # _____ Work # _____ Cell # _____

For County Use Only

Request Approved _____ Request Denied _____

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available: _____

Fee \$ _____

Paid by: Check _____ Cash: _____ Money Order: _____

Record Custodian for Ocean County Sheriff _____ Date _____

S.D.107

SPECIAL ASSISTANCE/ACCOMMODATIONS available, please call (732) 349-2010 (V/TDD).

LT. GREEN
732-349-1409

PROV.

OFFICE OF THE SHERIFF

WILLIAM L. POLHEMUS
SHERIFF
WAYNE R. RUPERT
UNDERSHERIFF
MICHAEL G. OSBORN
CHIEF



TELEPHONE 929-2044
AREA CODE 732

FAX NUMBER
732-831-7979

OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, N.J. • 08754-2191

REQUEST FOR ACCESS TO GOVERNMENT RECORDS

A REQUEST FOR ACCESS TO A GOVERNMENT RECORD SHALL BE IN WRITING AND HAND DELIVERED, MAILED, TRANSMITTED ELECTRONICALLY OR OTHERWISE CONVEYED TO THE APPROPRIATE CUSTODIAN.

REQUESTOR PLEASE COMPLETE INFORMATION BELOW.

See side two for important information.

Name: DALE (First Name) ELLERZ (Last Name) FIRE CHIEF, TULKERTON

Address: 326 E. MAIN ST (Street P.O.) TULKERTON NJ (Town/City) 08887 (Zip Code)

Telephone Number: (609) 296-1025 Work () Home

E-Mail Address: _____

Brief description of Government Records you are requesting:

REQUESTING ALL EMS & PHONE RECORDINGS, FIRE RECORDINGS,
PLUS DOCUMENTATION WITH TIME STAMPS RELATED TO
THIS INCIDENT. 9/5/17

Signature of Requestor _____

Date _____

Response Media Type

Circle One

- Copy on a CD (Windows 2000 or XP)
- Paperwork only
- Copy on a cassette tape

Nature of Data

- Date of incident: SEPT 4, 2017
- Time of incident: AFTER 12: NOON +
- Address of incident: GARDEN ST. PARKWAY
- Type of Call: (911 etc.) MVA - INJURIES
- Call made from Home # _____ Work # _____ Cell # _____

PHONE: BURLINGTON
MUNICIPAL

RADIO: EMS / FIRE

DOCS: PART-OUT - ALL W/
TIMES

55.358.

For County Use Only

Request Approved _____ Request Denied _____

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available: _____

Fee \$ _____

Paid by: Check _____ Cash: _____ Money Order: _____

Record Custodian for Ocean County Sheriff _____

Date _____



OFFICE OF THE SHERIFF

WILLIAM L. POLHEMUS
SHERIFF
WAYNE R. RUPERT
UNDERSHERIFF
MICHAEL G. OSBORN
CHIEF



TELEPHONE 929-2044
AREA CODE 732

FAX NUMBER
732-831-7979

OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, N.J. • 08754-2191

REQUEST FOR ACCESS TO GOVERNMENT RECORDS

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REQUESTOR PLEASE COMPLETE INFORMATION BELOW.

See side two for important information.

Name: DALE (First Name) EGBERT (Last Name) FIRE CHIEF, TUCKERTON

Address: 326 EAST MAIN ST. (Street, P.O.) TUCKERTON NJ (Town/City) 08087 (Zip Code)

Telephone Number: (609) 296-1025 Work () Home

E-Mail Address: _____

Brief description of Government Records you are requesting:

PHONE, RADIO RECORDINGS (FIRE & EMS) PLUS DOCUMENTATION w/TIME
STAMPS. - COMPLETE

Signature of Requestor [Signature] Date 9/5/17

- Circle One
- ☐ Copy on a CD (Windows 2000 or XP)
 - ☐ Paperwork only
 - ☐ Copy on a cassette tape

Response Media Type

RADIO - FIRE
EMS

PHONE - MURDER

DOCS -

PRINT-OUTS w/TIMES

Nature of Data

- Date of incident: AUGUST 9, 2017
- Time of incident: AFTER 3:00 P.M.
- Address of incident: EAGLEWOOD, 592 MAIN ST (CALUMNETS)
- Type of Call: (911 etc.) MVA - INJURIES
- Call made from Home # _____ Work # _____ Cell # _____

For County Use Only

Request Approved _____ Request Denied _____

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available: _____

Fee \$ _____

Paid by: Check _____ Cash: _____ Money Order: _____

Record Custodian for Ocean County Sheriff _____ Date _____

S.D.107



SPECIAL ASSISTANCE/ACCOMMODATIONS available, please call (732) 349-2010 (V/TDD).

LT. GREEN
732-349-1909
PAX:

OFFICE OF THE SHERIFF

MICHAEL G. MASTRONARDY
SHERIFFBRIAN KLIMAKOWSKI
UNDERSHERIFFNILS R. BERGQUIST, JR.
UNDERSHERIFFTELEPHONE (732) 929-2044
EMAIL
OCSherrifOpraRequests@co.ocean.nj.us
FAX NUMBER
732-349-1909

OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, N.J. 08754 - 2191

REQUEST FOR ACCESS TO GOVERNMENT RECORDS

A REQUEST FOR ACCESS TO A GOVERNMENT RECORD SHALL BE IN WRITING AND HAND DELIVERED, MAILED, TRANSMITTED ELECTRONICALLY OR OTHERWISE CONVEYED TO THE APPROPRIATE CUSTODIAN.

REQUESTOR PLEASE COMPLETE INFORMATION BELOW.
See side two for important information.Name: Paul Burghardt
(First Name) (MI) (Last Name)Address: 100 Lexington Ave, Rochelle Park, NJ 07662
(Street, P.O.) (Town/City) (Zip Code)

Telephone Number: [Redacted] Work [Redacted] Home [Redacted]

E-Mail Address: Mfd4300@yahoo.com

Brief description of Government Records you are

requesting:
Looking for all 911 Dispatched calls to 45 Sampson Ave, Seaside Heights, NJ 08751 for this year 2017. I don't need names, reasons, or unit numbers just overall times sent. I'm president of the Condo Assoc, of this building.

Circle One: Under the 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 of Requestor

Response Media Type

Date

9/18/2017

Circle One

- Copy on a CD (Windows 2000 or XP)
- Paperwork only

Nature of Data

- Date of incident: 1/1/17 to 9/18/17
- Time of incident: All
- Address of incident: 45 Sampson Ave, Seaside Heights, NJ 08751
- Type of Call: (911 etc.) 911 - Dispatched to Address above
- Call made from Home # _____ Work # _____ Cell # _____

For County Use Only

Request Approved _____ Request Denied _____

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available: _____

Fee \$ _____

Paid by: Check _____ Cash: _____ Money Order: _____ Receipt #: _____

Record Custodian for Ocean County Sheriff

Date



OFFICE OF THE SHERIFF

MICHAEL G. MASTRONARDY
SHERIFF

BRIAN KLIMAKOWSKI
UNDERSHERIFF

NILS R. BERGQUIST, JR.
UNDERSHERIFF



TELEPHONE (732) 929-2044

EMAIL

OCSheriffOpenRequests@co.ocean.nj.us

FAX NUMBER

732-349-1909

OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, N.J. 08754 - 2191

REQUEST FOR ACCESS TO GOVERNMENT RECORDS

A REQUEST FOR ACCESS TO A GOVERNMENT RECORD SHALL BE IN WRITING AND HAND DELIVERED, MAILED, TRANSMITTED ELECTRONICALLY OR OTHERWISE CONVEYED TO THE APPROPRIATE CUSTODIAN.

REQUESTOR PLEASE COMPLETE INFORMATION BELOW.
See side two for important information.

Name: Lindsey Zylla TPA for Verizon
(First Name) (Last Name)

Address: P.O. Box 47604 Plymouth NJ 08544
(Street, P.O.) (Town/City) (Zip Code)

Telephone Number: 610-233-0357 Work IX 1035 Home

E-Mail Address: Lindsey.Zylla@theclaimcenter.com

Brief description of Government Records you are requesting:

Any records regarding a utility pole that was damaged on 12/18/2014 at Pershing Blvd & Liggett Rd, Lavaflex NJ

Circle One: Under the 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 of Requestor: Lindsey Zylla

Response Media Type

Date

8/24/17

UG 24 PM 3:08

Circle One

- Copy on a CD (Windows 2000 or XP)
- Paperwork only

Nature of Data

- Date of Incident: 12/18/2014
- Time of Incident: 9:40
- Address of Incident: Pershing Blvd & Liggett Rd
- Type of Call: (911 etc.) 9:47
- Call made from Home # 4 Work # _____ Cell # _____

For County Use Only

Request Approved _____ Request Denied _____

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available: _____

Fee \$ _____

Paid by: Check _____ Cash: _____ Money Order: _____ Receipt #: _____

Record Custodian for Ocean County Sheriff

Date

REF # 20417

Print Form

OFFICE OF THE SHERIFF

MICHAEL G. MASTRONARDY
SHERIFFBRIAN KLIMAKOWSKI
UNDERSHERIFFNILS R. BERGQUIST, JR.
UNDERSHERIFFTELEPHONE (732) 929-2044
EMAIL
OCSheriff@praRequests@co.ocean.nj.us
FAX NUMBER
732-349-1909

OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, N.J. 08754 • 2191

REQUEST FOR ACCESS TO GOVERNMENT RECORDS

A REQUEST FOR ACCESS TO A GOVERNMENT RECORD SHALL BE IN WRITING AND HAND DELIVERED, MAILED, TRANSMITTED ELECTRONICALLY OR OTHERWISE CONVEYED TO THE APPROPRIATE CUSTODIAN.

REQUESTOR PLEASE COMPLETE INFORMATION BELOW.
See slide two for Important Information.Name: Kaochee Xong
(First Name) (Last Name)Address: P.O. Box 47604 Plymouth MN 55447
(Street, P.O.) (Town/City) (Zip Code)Telephone Number: 866-233-0353 Work () HomeE-Mail Address: Kaochee.Xong@theclaimcenter.com

Brief description of Government Records you are

requesting: Police report regarding to a MVA - that damaged
Verizon pole

Circle One: Under the 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 of Requestor

Response Media Type

Date

8/3/17

Circle One

- ☐ Copy on a CD (Windows 2000 or XP)
- ☒ Paperwork only

Nature of Data

- Date of Incident: 8/18/2016
- Time of Incident: N/A
- Address of Incident: 1605 Whitcomb Road
- Type of Call: (911 etc.)
- Call made from Home # _____ Work # _____ Cell # _____

For County Use Only

Request Approved _____ Request Denied _____

If request is denied please state reason, in whole or in part,
below:

Approximate date records will be available:

Fee \$ _____

Paid by: Check _____ Cash: _____ Money Order: _____ Receipt #: _____

Record Custodian for Ocean County Sheriff

Date

RECEIVED
OCEAN COUNTY
SHERIFF'S OFFICE
2017 AUG -4 AM 7:04

Fantasy Island 3

Print Form

AUG 3 2017

OFFICE OF THE SHERIFF

MICHAEL G. MASTRONARDY

SHERIFF

BRIAN KLIMAKOWSKI

UNDERSHERIFF

NILS R. BERGQUIST, JR.

UNDERSHERIFF



TELEPHONE (732) 929-2044

EMAIL

OCSheriffOpraRequests@co.ocean.nj.us

FAX NUMBER

732-349-1909

Page 1 of 2

OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, N.J. 08754 - 2191

REQUEST FOR ACCESS TO GOVERNMENT RECORDS

A REQUEST FOR ACCESS TO A GOVERNMENT RECORD SHALL BE IN WRITING AND HAND DELIVERED, MAILED, TRANSMITTED ELECTRONICALLY OR OTHERWISE CONVEYED TO THE APPROPRIATE CUSTODIAN.

REQUESTOR PLEASE COMPLETE INFORMATION BELOW.

See side two for important information.

Name: Vincent MASTRONARDY
(First Name) (MI) (Last Name)

Address: 25 LAKE MICHIGAN DRIVE
(Street, P.O.) (Town/City) (Zip Code)

Telephone Number: _____ k _____ Home

E-Mail Address: _____

Brief description of Government Records you are requesting:

CRD / Incident Report / 911 Dispatches / collapse command
ALL TOWNSHIP POLICE RADIO correspondence / DASH cam video / April 30

Circle One: Under the 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 of Requestor

Response Media Type

Date

Circle One

- Copy on a CD (Windows 2000 or XP)
- Paperwork only

CD & Paper

Nature of Data

- Date of incident: July 29 2017
- Time of incident: 7:30 - 11:00 PM
- Address of incident: Long Beach BLVD
- Type of Call: (911 etc.) 911 & Local Police
- Call made from Home # 732 982 2945 Work # _____ Cell # _____

ALL Records
NORTH of Fantasy Island Amusement Place

For County Use Only

Request Approved _____ Request Denied _____

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available:

Fee \$

Paid by: Check _____ Cash: _____ Money Order: _____ Receipt #: _____

Record Custodian for Ocean County Sheriff

Date

2017 AUG -3 PM 12:17

OCEAN COUNTY SHERIFF'S OFFICE

Vincent MASTROPASQUA

Page 292

FANTASY ISLAND 3

8/3/2017

DETAIL —

REQUESTING THE FOLLOWING
SPECIFICS

- 1) Police CAD Report
- 2) Incident Report
- 3) 911 Dispatcher ^{AUDIO} & caller communication
- 4) Township Police Radio ~~communication~~ ^{communication}
to and from all personnel,
~~complainer~~ ^{complainer} ~~dispatcher~~ GPS location & caller info
- 5) DASH cam of 1 officer #1 TRAYNOR
3 officer #2 _____

2017 AUG -3 PM 12:17

SHERIFF'S OFFICE
OCEAN COUNTY

OFFICE OF THE SHERIFF

MICHAEL G. MASTRONARDY
SHERIFF

BRIAN KLIMAKOWSKI
UNDERSHERIFF

NILS R. BERGQUIST, JR.
UNDERSHERIFF



TELEPHONE (732) 929-2044
EMAIL
OCSheriffOperaRequests@co.ocean.nj.us
FAX NUMBER
732-349-1909

OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, N.J. 08754 - 2191

REQUEST FOR ACCESS TO GOVERNMENT RECORDS

A REQUEST FOR ACCESS TO A GOVERNMENT RECORD SHALL BE IN WRITING AND HAND DELIVERED, MAILED, TRANSMITTED ELECTRONICALLY OR OTHERWISE CONVEYED TO THE APPROPRIATE CUSTODIAN.

REQUESTOR PLEASE COMPLETE INFORMATION BELOW.
See side two for important information.

Name: Larry S. Loigman, Esq.
(First Name) (MI) (Last Name)

Address: PO Box 97, Middletown 07748
(Street, P.O.) (Town/City) (Zip Code)

Telephone Number: (732) 842-8292 Work () Home

E-Mail Address: loigman@verizon.net

Brief description of Government Records you are requesting:

All records relating to foreclosure sale of 818 S Lake Drive, Lakewood (Cohen, CH771041), including, but not limited, all requests for adjournment and action thereon, deeds, receipts, and similar records

Circle One Under the 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.

Larry S. Loigman
Signature of Requestor

Aug 27 2017
Date

Response Media Type

Circle One

- Copy on a CD (Windows 2000 or XP)
- Paperwork only

Nature of Data

- Date of Incident: _____
- Time of Incident: _____
- Address of Incident: _____
- Type of Call: (911 etc.) _____
- Call made from Home # _____

Work # _____ Cell # _____

For County Use Only

Request Approved _____ Request Denied _____

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available: _____
Fee \$ _____

Paid by: Check _____ Cash: _____ Money Order: _____ Receipt #: _____

Record Custodian for Ocean County Sheriff _____
Date _____

OFFICE OF THE SHERIFF

MICHAEL G. MASTRONARDY
SHERIFFBRIAN KLIMAKOWSKI
UNDERSHERIFFNILS R. BERGQUIST, JR.
UNDERSHERIFFTELEPHONE (732) 929-2044
EMAIL
OCSheriffOpraRequests@co.ocean.nj.us
FAX NUMBER
732-349-1909

OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, N.J. 08754 - 2191

REQUEST FOR ACCESS TO GOVERNMENT RECORDS

A REQUEST FOR ACCESS TO A GOVERNMENT RECORD SHALL BE IN WRITING AND HAND DELIVERED, MAILED, TRANSMITTED ELECTRONICALLY OR OTHERWISE CONVEYED TO THE APPROPRIATE CUSTODIAN.

REQUESTOR PLEASE COMPLETE INFORMATION BELOW.

See side two for important information.

Name: Michael Khali, Esq.
(First Name) (MI) (Last Name)Address: 80 W Main St. Freehold, New Jersey 07728
(Street, P.O.) (Town/City) (Zip Code)

Telephone Number: 732 462-4773 Work () Home

E-Mail Address: atrbk1@gmail.com

Brief description of Government Records you are requesting:

Any and all documents involving the foreclosure/sheriff sale Docket No F-000979-11

Circle One: Under the 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 of Requestor

Response Media Type

Date

8-4-17

Circle One

- Copy on a CD (Windows 2000 or XP)
- Paperwork only

Nature of Data

- Date of incident: _____
- Time of incident: _____
- Address of incident: _____
- Type of Call: (911 etc.) _____
- Call made from Home # _____ Work # _____ Cell # _____

For County Use Only

Request Approved _____ Request Denied _____

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available: _____

Fee \$ _____

Paid by: Check _____ Cash: _____ Money Order: _____ Receipt #: _____

Record Custodian for Ocean County Sheriff

Date

OFFICE OF THE SHERIFF

TELEPHONE (732) 929-2044

EMAIL

OCSheriffOpraRequests@co.ocean.nj.us

FAX NUMBER

732-349-1909

MICHAEL G. MASTRONARDY

SHERIFF

BRIAN KLIMAKOWSKI

UNDERSHERIFF

NILS R. BERGQUIST, JR.

UNDERSHERIFF



OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, NJ. 08754 - 2191

REQUEST FOR ACCESS TO GOVERNMENT RECORDS

A REQUEST FOR ACCESS TO A GOVERNMENT RECORD SHALL BE IN WRITING AND HAND DELIVERED, MAILED, TRANSMITTED ELECTRONICALLY OR OTHERWISE CONVEYED TO THE APPROPRIATE CUSTODIAN.

REQUESTOR PLEASE COMPLETE INFORMATION BELOW.

See side two for important information.

Name: Naji Filali

(First Name)

(MI)

(Last Name)

Address: 1011 1st Street, SE, Washington, DC 20003

(Street, P.O.)

(Town/City)

(Zip Code)

Telephone Number: 845 709-4983

Work

()

Home

E-Mail Address: nfilali@percipientstrategies.com

Brief description of Government Records you are

requesting and all premise history, calls for service/CAD, and incident reports for 63 10th St, Toms River, NJ

(8/1/05-8/17/17) and 704 3rd Avenue, Lyndhurst, NJ (9/1/97-7/31/05). If search by name is possible, I seek

references to "Daniel Rodrick," "Dan Rodrick," "Diana Rodrick," or "Diana Orozco."

Circle One Under the 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 of Requestor

Response Media Type

8/17/17

Date

Circle One

- Copy on a CD (Windows 2000 or XP)
- Paperwork only

Nature of Data

- Date of incident: _____
- Time of incident: _____
- Address of incident: _____
- Type of Call: (911 etc.) _____
- Call made from Home # _____

Work #

Cell #

For County Use Only

Request Approved _____

Request Denied _____

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available: _____

Fee \$

Paid by: Check _____

Cash: _____

Money Order: _____

Receipt #: _____

Record Custodian for Ocean County Sheriff

Date

OFFICE OF THE SHERIFF

MICHAEL G. MASTRONARDY
SHERIFF

BRIAN KLIMAKOWSKI
UNDERSHERIFF

NILS R. BERGQUIST, JR.
UNDERSHERIFF



TELEPHONE (732) 929-2044
EMAIL
OCSheriffOpraRequests@co.ocean.nj.us
FAX NUMBER
732-349-1909

OCEAN COUNTY JUSTICE COMPLEX • P.O. BOX 2191 • 120 HOOPER AVENUE • TOMS RIVER, NJ. 08754 - 2191

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REQUESTOR PLEASE COMPLETE INFORMATION BELOW.

See side two for important information.

Name: Thomas J Drury, Jr.
(First Name) (Mi) (Last Name)

Address: 122 East Oak Avenue, Moorestown, NJ 08057
(Street, P.O.) (Town/City) (Zip Code)

Telephone Number: Work () Home

E-Mail Address: tdrury@tdrury.com

Brief description of Government Records you are requesting:

Listing of all transactions completed at August 15, 2017 Sheriff's Sale.

Circle One: Under the 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 of Requestor

Response Media Type

Date

August 16, 2017

Circle One

- Copy on a CD (Windows 2000 or XP)
- Paperwork only

Nature of Data

- Date of incident: _____
- Time of incident: _____
- Address of incident: _____
- Type of Call: (911 etc.) _____
- Call made from Home # _____ Work # _____ Cell # _____

For County Use Only

Request Approved _____ Request Denied _____

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available: _____

Fee \$ _____

Paid by: Check _____ Cash: _____ Money Order: _____ Receipt #: _____

Record Custodian for Ocean County Sheriff

Date

2017 AUG 21 AM 10:53

OCEAN COUNTY
SHERIFF'S OFFICE

BRIAN J. DI STEFANO, ESQ.
A Limited Liability Company
1 Pelican Drive
2nd Floor, Suite 6
Bayville, New Jersey 08721
Web-site: www.brianjdistefanolaw.com
E-Mail: brianjdistefanoesq@tdnjlaw.com

Telephone: 732.237.0008

Facsimile: 732.237.0018

August 8, 2017

Ocean County Sheriff Communications Center
138 Chestnut St
Toms River, NJ 08753

Re: STATE V. MICHAEL PETROCK III
SUMMONS NO.: 089148, 089149

Dear Sir/Madam:

Please be advised, this office represents the interests of Mr. Petrock in the above captioned matter as the Barnegat Township Public Defender. I would respectfully request a copy of the 911 calls and dispatch records be forwarded to my office at your earliest convenience.

Please contact me directly if you have any questions or concerns. I appreciate your courtesy.

Very truly yours,

/s/ Brian J. Di Stefano, Esq.

BRIAN J. DI STEFANO, ESQ.

BJD/gm
cc:client



OFFICE OF THE SHERIFF

MICHAEL G. MASTRONARDY
SHERIFFBRIAN KLIMAKOWSKI
UNDERSHERIFFNILS R. BERGQUIST, JR.
UNDERSHERIFF

TELEPHONE (732) 929-2044

EMAIL

OCShoriffOperaRequests@co.ocean.nj.us

FAX NUMBER

732-349-1909

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REQUESTOR PLEASE COMPLETE INFORMATION BELOW.

See side two for important information.

Name: Elizabeth A. Cook
(First Name) (MI) (Last Name)Address: 1510 Hooper Ave Suite 210 Toms River, NJ 08753
(Street, P.O.) (City/Zip) (Zip Code)Telephone Number: 732 255 8015 x4136 () HomeE-Mail Address: Elizabeth.Cook@dcf.state.nj.us

Brief description of Government Records you are requesting:

7/27/17 report filed against
Michelle Billington

Circle One: Under the 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 of Requestor: Elizabeth A. Cook, FSST

Response Media Type

Date

8/18/17

Circle One

- ☐ Copy on a CD (Windows 2000 or XP)
- ☒ Paperwork only

Nature of Data

- Date of Incident: 7-26-17 or 7/27/17
- Time of Incident: _____
- Address of Incident: Ocean County Courthouse
- Type of Call: (911 etc.) _____
- Call made from Home # _____ Work # _____ Call # _____

For County Use Only

Request Approved _____

Request Denied _____

If request is denied please state reason, in whole or in part, below:

Approximate date records will be available: _____

Fee \$ _____

Paid by: Check _____

Cash: _____

Money Order: _____

Receipt #: _____

Record Custodian for Ocean County Sheriff _____

Date _____