Complaint Number: SC-2025-033354-0908

North bergen municipal court

Court Code: 0908

Name: LEONARD FILIPOWSKI
Address: P.O. BOX 3464
Apt:
City: STAMFORD **State:** CT **Zip:** 06905-0000
Telephone: **Type:** CELL
Email:
License #:
License State: **Expiration Date:**
Date of Birth: xx/xx/1964
Sex: MALE **Eyes:**
Weight: **Height:**
Race: U - Unknown
Hispanic or Latino?: U - Unknown

Agency/Officer ID: 0908 - NORTH BERGEN POLICE DEPARTMENT / 9999 - CITIZEN COMPLAINANT
Offense: 2C:18-3A
Description: CRIMINAL TRESPASS-STRUCT OTHER THAN RESEARCH FACLTY ETC
Offense Date & Time: 05/30/2025 **At:**
Location:
Issued Date: 05/30/2025
Municipality of Offense: 0908 - North bergen twp
Narrative: Trespass 7701 bergenline ave

First Appearance, Arraignment & Counsel Information

1st Appearance Date ___/___/_____ Arraignment Date ___/___/_____

☐ **Advised of Rights** By: _____

Defendant desires Counsel ☐ Yes ☐ No

Counsel:

Assigned: ☐ Yes ☐ No Name: _____ (if Yes, name of counsel)

Retained: ☐ Yes ☐ No Name: _____ (if Yes, name of counsel)

Waived: ☐ Yes ☐ No Name: _____ (if Yes, name of Judge accepting waiver)

Name of Prosecuting Attorney: _____

Affiliation: ☐ Municipal ☐County ☐State ☐ Private

Court Action

Complaint Amended To: _____

Final Plea: ☐ Guilty ☐ Not Guilty **Date:**___/___/_____

Finding: ☐ Guilty ☐ Not Guilty
☐ Dismissed (reason)_____

☐ Civil Reservation ☐ Voided

Sentence:

Fine:$_____ Costs:$_____ Sanctions:$_____
VCCO:$_____ DWI:$_____ SNSF:$_____
Other:$_____ DAEF:$_____ Total:$_____

Period of DL Suspension/Forfeiture:_____ mo/yrs
or ☐ Indeterminate

☐ Advised of Enhanced Penalties

IDRC:_____ Comm. Service:_____

Ignition Interlock:_____ mo/yrs.

Jail Term: _____ Jail Credit :_____

Court Information

Court Date: 09/25/2025 Court Time: 09:15 AM
Court Appearance Required: Yes

Bench Warrant/Bail Information

Failed to Appear Date: ___/___/_____

Warrant Date: ___/___/_____ Ordered by: _____ (Signature and Title of person issuing warrant)

Bail Amount:$_____ Set by: _____ (Name & Title)

☐ Forfeited ☐ Return ☐ Reinstated

Date: ___/___/_____ s/_____ (Signature of Judge)

Judge's Notes

_____
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Adjournment Requested by	Reason	To
		/ /
		/ /

☐ See attached sheet for additional Judge's notes or other information.

Signature of Judge: _____ Dated: ___/___/_____

Revised: 09/2024, CN: 12863