

Affidavit of Probable Cause

COMPLAINT NUMBER

1506**S****2022****000527**

COURT CODE

PREFIX

YEAR

SEQUENCE NO.

BRICK TOWNSHIP MUNICIPAL COURT
401 CHAMBERS BRIDGE
BRICK NJ 08723-0000
732-262-1226 COUNTY OF: **OCEAN**

of CHARGES
2

CO-DEFTS

POLICE CASE #:
49870-22

COMPLAINANT **JEFFREY E PERSON DET.**
NAME: **401 CHAMBERS BRDG RD**
ATTN WARRANTS
BRICK TOWN NJ 08723

*THE STATE OF NEW JERSEY**VS.***MATTHEW J RUSSO**

ADDRESS:

[REDACTED]**BRICK****NJ 08723-0000**

DEFENDANT INFORMATION

SEX: **M** EYE COLOR: **BLUE**DOB: **[REDACTED]**

DRIVER'S LIC. #:

[REDACTED]DL STATE: **NJ**

SOCIAL SECURITY #:

SBI #:

TELEPHONE #:

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LIVESCAN PCN #:

Purpose: This Affidavit/Certification is to more fully describe the facts of the alleged offense so that a judge or authorized judicial officer may determine probable cause.

1. Description of relevant facts and circumstances which support probable cause that (1) the offense(s) was committed and (2) the defendant is the one who committed it:

[REDACTED]**Affidavit of Probable Cause****Page 5 of 7**

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2. I am aware of the facts above because: (Included, but not limited to: your observations, statements of eyewitnesses, defendant's admission, etc.)

3. If victim was injured, provide the extent of the injury:

N/A

Certification:

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Signed: JEFFREY E PERSON DET. LAW ENFORCEMENT OFFICER

Date: 07/18/2022

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