BOROUGH OF ROSELLE
OPEN PUBLIC RECORDS ACT REQUEST FORM
210 CHESTNUT STREET

Telephone Number : (908) 259-3010
Fax Number: (908) 245-9508
Custodian: Lydia D. Massey, Acting Clerk

Important Notice

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

Requestor Information – Please Print

First Name Thomas MI _____ Last Name Hunter

E-mail Address Opra+request-21166-26c77d70@requests.opramachine.com

Mailing Address _____

City _____ State _____ Zip _____

Telephone _____ FAX _____

Preferred Delivery: Pick Up _____ US Mail _____ On-Site Inspect _____ Fax _____ E-mail ___x____

If you are requesting records containing personal information, please circle one: Under penalty of N.J.S.A. 2C:28-3, I certify that I ***HAVE / HAVE NOT*** been convicted of any indictable offense under the laws of New Jersey, any other state, or the United States.

Signature _____ Date 3/18/21

Payment Information

Maximum Authorization Cost $

Select Payment Method

Cash Check Money Order

Fees: Letter size pages - $0.05 per page
Legal size pages - $0.07 per page
Other materials (CD, DVD, etc) – actual cost of material

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

Extras: Special service charge dependent upon request.

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

Records Request for Police report #14-12294
Due Date 3/29/2021

AGENCY USE ONLY

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 3/24/21
Partial - Closed _____

AGENCY USE ONLY

Tracking Information

Tracking # 031821-7
Rec'd Date _____
Ready Date _____
Total Pages _____

Final Cost

Total _____
Deposit _____
Balance Due _____
Balance Paid _____

Records Provided

_____ _____
Custodian Signature **Date**

Lydia Massey

From: Thomas Hunter <opra+request-21166-26c77d70@requests.opramachine.com>
Sent: Thursday, March 18, 2021 1:40 PM
To: Lydia Massey
Subject: OPRA request - Requesting

Dear Roselle Borough,

This is a request for public records made under OPRA and the common law right of access. I am not required to fill out an official form. Please acknowledge receipt of this message.
Records requested: Police report #14-12294

Yours faithfully,

Tom Hunter
Beck Adjustment Services, LLC
(856) 304-9570

Please use deliver records electronically via email to the below UNIQUE address for all replies to this request:
opra+request-21166-26c77d70@requests.opramachine.com

Is lagbejimi@boroughofroselle.com the wrong address for OPRA requests to Roselle Borough? If so, please contact us using this form:
https://opramachine.com/change_request/new?body=roselle_borough

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

View this OPRA request & responses online:
https://opramachine.com/request/requesting

Please note that in some cases publication of requests and responses will be delayed.

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

DB

CC No:

ROSELLE POLICE DEPARTMENT — **INVESTIGATION REPORT**

1 REFERRAL/CONNECTING/PROPERTY SLIP *	2 CODE	3 UCR CODE	4 TRANS DISC NO	5 CASE NUMBER
	2014	2590		14-12294

6 CRIME ☐	INCIDENT ☒	7 PATROL DISTRICT	8 NJS	9 VICTIMS NAME
		1	Suspicious injury	[redacted]

13 TIME DATE CRIME OR INCIDENT OCCURRED	14 HOUR	15 WEEK	16 MONTH	17 DAY	18 YR.	19 HOME ADDRESS - CITY - STATE	PHONE
DATE BETWEEN						[redacted]	[redacted]
AND							
TIME AT	1250 hrs	Fri	04	25	14		

10 RACE	11 SEX	12 DOB
[redacted]	[redacted]	[redacted]

20 LOCATION	21 EMPLOYER-SCHOOL	22 BUSINESS PHONE
1127 Rivington St., Roselle	N/A	N/A

23 TIME & DATE UNIT NOTIFIED	24 PERSON REPORTING CRIME	25 AGE	26 TIME & DATE REPORTED
1250 hrs 04/25/14	Tynesha T. Starling	[redacted]	1250 hrs 04/25/14

27 TYPE OF PREMISES	28 CODE	29 WEAPONS-TOOLS	30 CODE	31 ADDRESS	32 PHONE
business				1410 Hussa St., Linden NJ 07036	[redacted]

33 VEHICLE	34 YEAR	35 MAKE	36 BODY TYPE	37 COLOR	38 REG. NUMBER & STATE	39 SERIAL NUMBER

VALUE STOLEN PROP.	40 CURRENCY	41 JEWELRY	42 FURS	43 CLOTHING	44 AUTO	45 MISC

46 TOTAL VALUE STOLEN	47 TOTAL RECOVERED	48 Teletype	49 ALARM NO.	50 WEATHER	51 STATUS CRIME	52 STATUS CASE
		YES ☐ NO ☐		Clear	Active	Invest

ADULT ☐ JUVENILE ☐ ADULT AND JUVENILE ☐ NARCOTICS INVOLVED ☐

LIST INVOLVED - LIST AND IDENTIFY ADDITIONAL VICTIMS - DESCRIBE PERPETRATORS OR SUSPECTS - ACTION TAKEN INCLUDE FINDINGS AND OBSERVATIONS OF INVESTIGATOR - PHYSICAL EVIDENCE FOUND - WHERE - BY WHOM - DISPOSITION AND TECHNICAL SERVICES PERFORMED- INTERVIEW OF VICTIMS -WITNESSES -PERSONS CONTACTED -SUSPECTS- LIST - DESCRIBE STOLEN PROPERTY - VALUE - COURT ACTION - ATTACH STATEMENTS

54 PERSON INVOLVED	ADDRESS	PHONE NO	RACE	SEX	DOB	ARREST SUSPECT WITNESS
Gail Cartisano	8 McGinnis Rd. Edison, NJ 08817	[redacted]	B	F	[redacted]	W
Dorothy Stadler	1017 Chandler Ave #3A, Linden NJ	[redacted]	W	F	[redacted]	W
						☐
						☐
						☐

NARRATIVE

Together with Roselle FD Ambulance I responded to CHRISTINA NICOLE ACADEMY & PRESCHOOL at 1127 Rivington St. on a report of a swollen arm of an eight month old child. Upon arrival we met with Tynesha Starling, mother of [redacted] Gail Cartisano, owner of the daycare and Dorothy Stadler, care giver. While assessing [redacted] swollen left arm a clear discomfort was observed around his left upper arm/shoulder area. Ms. Starling informed me that [redacted] was in a perfect shape this morning, when around 7:00 am she dropped him off at the daycare. I also spoke with Ms. Stadler, who informed me that she was the one providing care to [redacted] and does not recall any situation that would cause this injury to [redacted] Speaking with Ms. Cartisano I was informed that this injury was discovered at appr. 8:30 am and that's when she began to notify Ms. Starling. [redacted] with Ms. Starling were transported to Trinitas Hospital in Elizabeth for further evaluation and treatment.

55 TYPE NAME	56 BADGE NUMBER	57	58 DATE OF REPORT
Off. Dariusz Bziuk	0152	PAGE 1 OF 1 PAGES	04/25/14 TIME 1345 hr
SIGNATURE	59 TYPIST DB	60 DESK SUPERVISOR	

COPY GIVEN TO DYFS 23:15 HOURS