ATTACHMENT A

INCIDENT NUMBER: 19-20127

A. Incident Informa	Andrew Committee of the										
Date:	Time:		Day of	Week:		j	Location	n:			
10/02/19		14:08		Wed	nesday	у	401 A	valon i	Dr. Apt. 4	401, Wc	od-
Type of Incident:		in Progress		nestic	Турс		erson:	F	nder the In		
Ļ		ious Person		fic Violation				\Box o	ther Unusu	ıal Conditi	on
<u></u>	Other Type of Call Other Dis								pecify:		
		<i>/</i> ·	/								
B. Suspect(s) Inform	mation (c			re subjects of p	olice use	e of fo	rce				
Name,(Last, First, M	iddle)		Charge(s)			Race		Age	Weapon?	Susp. Injured?	Hospital?
		No			М		Hisp	17	No	No	Yes
				* 4							
				(Check Ye	s for inju	ury / h	10spital 1	resulting	g from polic	e use of for	ce)
C. Level of Suspect((s) Resist	tance (chec	k all that apply)		***************************************			······································	and the second s		
Suspect				— ···	Suspe	ect#	1	Sus	Suspect #2		ect #3
resisted Police Offi	icer cont	rol	Control thing and April 2 Apri		X	 			*		The second second second second
physical threat / att					×						
threatened / attack	ced Polic	e Officer v	vith blunt objec	t							
threatened / attack											
threatened / attack	ced Police	e Officer w	with motor vehic								
threatened Police (Officer w	/ith firearm	ı								
fired at Police Offic	er										
Other (Specify:			•)							
						Military					
D. Type of Force Use	ed (check	s all that ap	ply)								
Type of Force Used	: 🛛 C	ompliance	Hold	⊠ _{Hands/l}	Fists	ists Firearms Disch			Discharge:		
	□ cr	hemical/Na	latural Agent	☐ Kicks/F			• -	701111	_	er of Shots	Fired:
	☐ Sti	trike/Use B	Baton	☐ Canine	1						
or Other Object Specify: lifted off ground placed Use "UNK" if ur									(nown]		
PRESIDENCE AND										es cinicis moscorreno a cina	
E. Officer Information	lan										
Name,(Last, First, M		Badge	# On-Dui	ıtv? U	niform?		Officer	r Injured	vo Ta	iken to Ho	anital?
De la companya de companya de la companya del companya de la companya de la companya del companya de la company		ضية	Yes		es es		No		11 1 19	No No	Spitari
Signature;				Polic	e Officer	er Assi	ianmen	t:			
Print Supervisor Nam	1e' (1	And the second s	A Stant Massach Department on the part of the stantage of the	Supervisor			<u>-</u>				
11114 9 9 9 9 7 - 1 - 1 - 1 - 1 - 1 - 1	, T.			Oupoi vioci	Olgitute	JIC.		_			

ATTACHMENTA

INCIDENT NUMBER: 19-14987

A. Incident Information	íon								
Date: T	Time:	Day of Week	K:	Locatio	on:	Marie Control of the			
07/25/19	21:08		Thursday						
	Crime in Progres	ess Domestic		pe of Person:	——————————————————————————————————————	T. Jan tha Ir	PT		
·	Suspicious Perso		1 "	CULL VALUE.	= ~	Under the In Other Unusu		-	
	Other Type of Ca					Other Unusu Specify:			
(**	(Specify:	<u> </u>	pute		`	,pecity	V-1		
And the Control of th									
B. Suspect(s) Informa	ation (only those	persons who were sub							
Name,(Last, First, Midd	ddle) Arrest?	Charge(s)	Sex	Race	Age	Weapon?	Susp. Injured?	Hospital'	
	Yes	2C:12-1B(1)	М	Cauc	54	No	No	No	
								 	
		(1	Check Yes for inju	jury / hospital	. resultin	g from polic	e use of for	rce)	
						,			
C Y and of Sugmont(s)	- I-tomas (aha	4.3							
C. Level of Suspect(s)	Resistance (chec	دلا all that apply)		X	7				
Suspect			Susp	pect #1	Sus	spect #2	Suspe	∍ct #3	
resisted Police Office		A STATE OF THE STA	×					And the second s	
physical threat / attac			×	,					
threatened / attacked				,					
threatened / attacked		- ·	oject 🗆	,					
threatened / attacked				,					
threatened Police Off	ficer with firearn	n		1					
fired at Police Officer	î			1					
Other (Specify:)		ı					
-	and the second s	*			<u> </u>				
							<u> </u>		
The actions Head	Table of the state								
D. Type of Force Used				1			2 <u>A</u> MANUTAN		
Type of Force Used:	Compliance		Hands/Fists	Fire	earms [Discharge:			
			140101 000		Number of Shots Fired: Number of Hits:				
	☐ Strike/Use E _ or Other Ob	ਤaton $f ar eta$	Canine						
	Other Force	•				[Use "u	JNK" if unk	.nown]	
		444		<u> </u>				Control of the Contro	
E. Officer Information									
Name, (Last, First, Midd		# On-Duty?	1 Uniform?	Office		·- 1		* **	
Name, Laor, 1	JIE) Dange	Yes	Uniform? Yes	Officer No	er Injured	1? 1ar	ken to Hos No	spital?	
5t =4	170						No		
Signature:			Police Officer	r Assignmen	it:				
Print Supervisor Name:		Qu.	nenticar Signatu						

ATTACHMENT A

INCIDENT NUMBER: 19-14987

A. Incident Informa												
Date:	Time:		Day of V	Week:	Location:							
07/25/19		21:08		Thurs	sday	74 Lir	74 Lincoln Ave. Wood-Ridge NJ.,					
Type of Incident:		in Progres		estic	Туре	e of Person:		nder the In		,		
	~	ious Perso		fic Violation				Other Unusual Condition				
L		Type of Ca	ill Other	r Dispute				specify:				
	(Specify	y:)									
~ a	/	- w	_									
B. Suspect(s) Inform Name,(Last, First, Mi	nation (o	only those particular of the Arrest?	persons who were Charge(s)	e subjects of pr			14 - 2	1000 1010				
varnoguada i noa	luule	Wilest:	Charge(s)		Sex	Race	Age	Weapon?	Susp. Injured?	Hospital		
	k	Yes	2C:12-1B		М	Cauc	54	No	No	No		
					141		——————————————————————————————————————	INO	140	INO		
					-							
				(Check Ye	s for inju	ury / hospital	resulting	from notic	A rice of for	229)		
				`	1	m) / morgr	10001	, mom pour	o and or tor	.cc _j		
C. Level of Suspect(s) Resist	ance (chec	k all that apply)									
Suspect					Suspe	∍ct #1	Sus	Suspect #2		ect #3		
resisted Police Offic	cer cont	irol		<u> </u>	X		П	<u> poeters</u>				
physical threat / att			icer		X							
threatened / attacke				†		I						
threatened / attacke			•	i		•						
threatened / attacke				- ,		1						
threatened Police C						ļ						
fired at Police Office				1								
Other (Specify:	J.)			!				•		
		and the second s				ļ						
D. Type of Force Use	d (check	all that ap	ply)			<u> </u>						
Type of Force Used:		ompliance		☑ Hands/F	ists	Fir	earms D	Discharge:				
	☐ Cr	hemical/N	latural Agent			İ	J	O	r of Shots	Fired:		
	☐ Str	trike/Use E	3aton	☐ Canine	ļ	1		Numbe	r of Hits:			
	or Other Object Other Force Specify:						[Use "UNK" if unknown]					
,					l				An amount of the second of the			
E. Officer Information												
Name,(Last, First, M	iddle)	Badge			niform?				iken to Hospital?			
3			Yes	Ye	IS	Yes	s		No			
Signature:				Police	∍ Officer	r Assignmen	nt:					
Print Supervisor Name	۵· ا			Supervisor	Clanatu							
THIL OWPORTION	٠. T			TOUDELVIOU -	Oluliatur	.1(+).						

ATTACHMENT A

INCIDENT NUMBER: 19-06407

A. Incident Informat	tion										
Date:	Date: Time: D				Location:						
03/31/19	18:46		Sunda	ι y	Valley	Blvd.					
1	Crime in Progres				of Person:		nder the In	fluence	<u> </u>		
	Suspicious Person		c Violation				ther Unusu		on		
×	Other Type of Ca	all Other:					specify:	ai Conum	.он		
	(Specify: CDS)					•				
		diameter (September 2)						,	the same of the sa		
B. Suspect(s) Inform	ration (only those	manana wha were		•	20						
Name,(Last, First, Mic	ddle) Arrest?	Charge(s)			of force Race	عم۵ا	Weapon?	Louan	11 1 1+01		
				264	Nace	Age	Weahous	Susp. Injured?	Hospital [*]		
	Yes	2C:35-10a(1)			Hisp	40	No .	No	No		
•			(Check Yes f	or inju	ıry / hospital ı	esulting	from police	e use of for	ce)		
C. Level of Suspect(s)	i) Resistance (chec	k all that apply)									
Suspect				Suspe	ct #1	Sus	pect #2	Suspe	ect #3		
resisted Police Offic	er control			X			•	 			
physical threat / atta	ack on Police Offi	cer									
threatened / attacke											
threatened / attacke		•	r object			$\overline{\sqcap}$					
threatened / attacked					1	П					
threatened Police Of			1								
fired at Police Office		<u>.</u>									
Other (Specify:	1										
Ottler (Opecity.)		Ш	_						
Name of Control of Con			and the state of t						***		
D There of Force Have	* / 1 .111 41-24 nm	• •									
D. Type of Force Used					Name of the last o						
Type of Force Used:			Hands/Fis								
V	Chemical/Na		☐ Kicks/Feet	eet Number of Shots Fire					Fired:		
	☐ Strike/Use B or Other Obj		☐ Canine					r of Hits:			
	☐ Other Force				[Use "UNK" if unknown]						
 .											
E. Officer Information	n										
Name,(Last, First, Mic		# On-Duty	r? Unifo	orm?	Officer	Injured	lo Ta	kan ta Has	anital?		
		Yes	Yes	711444	Officer Injured? Taken to Hospita No No				Spitari		
Signature:			Police ()fficer	Assignment		· · · · · · · · · · · · · · · · · · ·				
Print Supervisor Name:											
Tint Supervisor Mame:			Supervisor Sig	anafur	***						

ATTACHMENTA

INCIDENT NUMBER: 19-06407

A. Incident Information											
Date: Time	3:	Day of Week:	Day of Week: Location:					A THE REST OF THE			
03/31/19	03/31/19 1900:00			Sunday Valley			, Rlvd				
Type of Incident: 📋 Crin	☐ Domestic					nday the In	Munnag				
☐ Sus	oicious Person	☐ ☐ Traffic Viol	lation	<u> </u>		✓ Under the Influence☐ Other Unusual Condition					
Oth	er Type of Call	Other Disp		l l			pecify:	ал Сопацы	on }		
(Spe	cify:					`	P 0				
		Committee and Co						and the second s	Company of State of S		
B. Suspect(s) Information Name, (Last, First, Middle)	1 (only those pers	ons who were subje									
Name,(Last, First, Middle)	Arrest? Ch	arge(s)		Sex	Race	Age	Weapon?	Susp.	Hospital		
	Yes			NA				Injured?			
	160			М	cauc		No	No	No		
	- - - - - - - - - - 										
And the second s			1 1 37								
		(0)	heck yes	for inju	ry / hospital	resulting	from police	use of for	ce)		
			•								
C. Level of Suspect(s) Res	sistance (check al	l that apply)									
Suspect		The state of the s		Suspe	ct #1	Susi	pect #2	Suspect #3			
resisted Police Officer co	nnfrol				· ·			Ouspect#3			
physical threat / attack o				⊠ ⊠							
threatened / attacked Po		blant ablant									
		-									
threatened / attacked Po threatened / attacked Po			∍ct	<u> </u>							
threatened Police Officer		motor venicie						<u> </u>			
	With hreatm			ᆜ]						
fired at Police Officer											
Other (Specify:)									
D. Type of Force Used (che	ck all that apply)										
	Compliance Hol	·		. 1					· · · · · · · · · · · · · · · · · · ·		
	Compliance Hol Chemical/Natur		lands/Fis	i wouthto bisonarge.							
	Strike/Use Bato		Kicks/Fee Canine	^t				of Shots I	Fired:		
	or Other Object		varinte	Number of Hits: [Use "UNK" if unknowr					1		
L	Other Force Spe	ecify:			·		[USE O	NK" IEUNKI	nownj		
								deleter mars them a relege with the consessor			
E. Officer Information											
Name,(Last, First, Middle)	Badge#	On-Duty?	l Unif	orm?	Officer	المصدرة الم	· /				
		Yes	Yes		Unicer No	Injured'	? lak	<u>ken to Hos</u> No	pital?		
ignature:							<u> </u>	NO	<u></u>		
			Police (Officer /	Assignment	•					
rint Supervisor Name: 👅		Sung	ervisor Si	anatur	n:						