

COMPLAINT - SUMMONS

COMPLAINT NUMBER
1506 S 2013 000558

COURT CODE: PREFIX: YEAR: SEQUENCE NO.:
**BRICK TOWNSHIP MUNICIPAL COURT
401 CHAMBERS BRIDGE
BRICK NJ 08723
(732) 262-1226 COUNTY OF: OCEAN**

of CHARGES: **1** CO-DEFTS: POLICE CASE #: **7730-13**
COMPLAINANT NAME: **JAMES BURGESS DET.
401 CHAMBERS BRDG RD
ATTN WARRANTS
BRICK TOWN NJ 08723**

THE STATE OF NEW JERSEY
VS.
CATHERINE R OREILLY
ADDRESS: **121 HARDING DR
BRICK NJ 08724**
DEFENDANT INFORMATION
SEX: **F** EYE COLOR: **HAZEL** DOB: **11-22-1967**
DRIVER'S LIC. # [REDACTED] DL STATE: **NJ**
SOCIAL SECURITY #: [REDACTED] SBI #: [REDACTED]
TELEPHONE #: [REDACTED]

By certification or on oath, the complainant says that to the best of his/her knowledge, information and belief the named defendant on or about **02-08-2013** in **BRICK TWP**, **OCEAN** County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, **CATHERINE O'REILLY** DID THREATEN **SHIRLEY MULLEN** IN AN ATTEMPT TO KEEP HER FROM TESTIFYING IN LEGAL PROCEEDING, SPECIFICALLY BY CALLING **SHIRLEY MULLEN** AND THREATENING HER BY STATING THAT SHE WILL NEVER MAKE IT TO COURT.

MAY 2 2013 AMB:04

in violation of:

Original Charge	1) 2C:28-5A	2)	3)
Amended Charge			

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: **JAMES BURGESS DET.** Date: **04-19-2013**

The complaining witness is a law enforcement officer and a judicial probable cause determination is not required prior to the issuance of this Complaint-Summons.

SUMMONS:

YOU ARE HEREBY SUMMONED to appear before this court to answer this complaint. If you fail to appear on the date and at the time stated below, a warrant may be issued for your arrest.

DATE TO APPEAR: **05-01-2013** TIME: **9:00 am** **JAMES BURGESS DET.** **04-19-2013**
Signature of Person Issuing Summons Date

- Domestic Violence - Confidential Related Traffic Tickets or Other Complaints Serious Personal Injury/ Death Involved

Special conditions of release:

- No phone, mail or other personal contact w/victim
 No possession firearms/weapons
 Other (specify):

ORIGINAL

COMPLAINT - SUMMONS (Court Action)

COMPLAINT NUMBER				STATE V.	CATHERINE R OREILLY
1506	S	2013	000558		
COURT CODE	PREFIX	YEAR	SEQUENCE NO.		

FTA Bail Information		Date Bail Set: _____	Amount Bail Set: \$ _____ by: _____	<input type="checkbox"/> Bail Recog. Attached
Released on Bail	R.O.R.	Committed Default	Committed w/o Bail	Date Referred to County Prosecutor: _____
Place Committed: _____				Defendant Desires Counsel: <input type="checkbox"/> Yes <input type="checkbox"/> No
Date of First Appearance: 05-01-2013	<input type="checkbox"/> Advised of Rights by _____			

Prosecuting Attorney Information				Defense Counsel Information					
Name:				Name:					
State	County	Municipal	Other	None	Retained	Public Def	Assigned	Waived	Other

Original Charge	1) 2C:28-5A		2)		3)	
Amended Charge						
Waiver Indt/Jury						
Plea/Date of Plea	Plea:	Date:	Plea:	Date:	Plea:	Date:
Adjudication (* see code)	Finding Code:	Date:	Finding Code:	Date:	Finding Code:	Date:
Jail Term	Jail time credit	Susp. Imp	Jail time credit	Susp. Imp	Jail time credit	Susp. Imp
Probation Term		Susp. Imp		Susp. Imp		Susp. Imp
Cond. Discharge Term						
Community Service						
D/L Suspension Term						
Fines/Costs	Fines:	Costs:	Fines:	Costs:	Fines:	Costs:
VCCB/SNSF	VCCB:	SNSF:	VCCB:	SNSF:	VCCB:	SNSF:
DEDR/Lab Fee	DEDR:	LAB:	DEDR:	LAB:	DEDR:	LAB:
CD Fee/Drug Ed Fnd	CD:	DAEF:	CD:	DAEF:	CD:	DAEF:
DV Surch/Other Fees	DV:	Other:	DV:	Other:	DV:	Other:
Restitution Beneficiary: _____						

Miscellaneous Information, Adjournments, Companion Complaints, Co-Defendants, Case Notes: 	* Finding Codes 1 - Guilty 2 - Not Guilty 3 - Dismissed - Other 4 - Guilty but Merged 5 - Dismissed-Rule 6 - Dismissed Lack of Prosecution 7 - Dismissed - Pros Motion/Vic Req 8 - Conditional Discharge D - Dismissed- Prosecutor Discretion M - Dismissed- Mediation P - Dismissed-Plea Agreement S - Disposed at Superior W - Dismissed-False ID
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SUPERIOR COURT OF NEW JERSEY
LAW DIVISION - OCEAN COUNTY

RECEIVED & FILED
JUN 12 2013
DEPUTY CLERK
SUPERIOR CT. OCEAN CO.

THE STATE OF NEW JERSEY :
:
VS. :
:
CATHERINE R. O'REILLY :
:
Defendant :

INDICTMENT
NO. 13-06-1490

COUNT ONE

WITNESS TAMPERING-THIRD DEGREE

The Grand Jurors of the State of New Jersey, in and for the County of Ocean, upon their oaths present that CATHERINE R. O'REILLY, on or about February 8, 2013, in the Borough of Point Pleasant and in the Township of Brick, County of Ocean, and within the jurisdiction of this Court, believing that an official proceeding or investigation was pending or about to be instituted, knowingly did attempt to induce or otherwise cause Shirley Mullen, to elude legal process or absent herself, contrary to the provisions of N.J.S.A. 2C:28-5a, and against the peace of this State, the Government and dignity of the same.

JOSEPH D. CORONATO
OCEAN COUNTY PROSECUTOR

DATED: 6/12/13

BY: Mara Brater
MARA BRATER
ASSISTANT PROSECUTOR

ENDORSED: [Signature]
For person

Superior Court of New Jersey
Law Division, Ocean County

THE STATE

VS.

CATHERINE R. O'REILLY

Case 13-05-
1753

INDICTMENT NO.

13-06-1490

INDICTMENT FOR

WITNESS TAMPERING

Joseph D. Coronato
Ocean County Prosecutor

A TRUE BILL


Foreperson

Bail SUMMONS

Condition Of Bail N/A



Judgment of Conviction

Superior Court of New Jersey, OCEAN County

State of New Jersey v.

Last Name

OREILLY

First Name

CATHERINE

Middle Name

R

Also Known As

O'REILLY CATHERINE R

Date of Birth

11/22/1967

SBI Number

604108B

Date(s) of Offense

02/08/2013

Date of Arrest

PROMIS Number

13 051753-001

Date Ind / Acc / Compl Filed

06/12/2013

Original Plea

Not Guilty Guilty

Date of Original Plea

08/05/2013

Adjudication By

Guilty Plea

Jury Trial Verdict

Non-Jury Trial Verdict

Dismissed / Acquitted

Date: 03/24/2014

Original Charges

Ind / Acc / Compl	Count	Description	Statute	Degree
13-06-01490-I	1	TAMPER W/WITNESS-OFF PROCED	2C:28-5A	3

Final Charges

Ind / Acc / Compl	Count	Description	Statute	Degree
13-06-01490-I	AMENDED 1	HARASSMENT	2C:33-4	DP

Sentencing Statement

It is, therefore, on 06/13/2014 **ORDERED** and **ADJUDGED** that the defendant is sentenced as follows:
 On Amended Count One of Indictment 13-06-01490, defendant is sentenced to two (2) years Probation. This sentence shall run concurrent with the sentence imposed on Indictment 13-01-00188. Defendant is directed to comply with any and all terms and conditions as established by Probation. Defendant shall have no contact with the victim in this matter and shall turn over any and all firearms within five days to the defendant's brother. Defendant is not to possess any firearms/weapons.

Defendant is to pay monetary penalties as set forth on page two through Probation at a monthly rate determined by Probation.

Defendant is hereby ordered to provide a DNA sample and pay the costs for testing.

Any bail that has been posted in this matter is discharged.

It is further **ORDERED** that the sheriff deliver the defendant to the appropriate correctional authority.

Total Custodial Term

000 Years 00 Months 000 Days

Institution Name

Total Probation Term

02 Years 00 Months

DEDR (N.J.S.A. 2C:35-15 and 2C:35-5.11)		Additional Conditions																
<p>A mandatory Drug Enforcement and Demand Reduction (DEDR) penalty is imposed for each count. (Write in number of counts for each degree.)</p> <p><input type="checkbox"/> DEDR penalty reduction granted (N.J.S.A. 2C:35-15a(2))</p> <table style="width:100%; border: none;"> <tr> <td style="width: 50%; text-align: center;">Standard</td> <td style="width: 50%; text-align: center;">Doubled</td> </tr> <tr> <td>1st Degree _____ @ \$</td> <td>_____ @ \$</td> </tr> <tr> <td>2nd Degree _____ @ \$</td> <td>_____ @ \$</td> </tr> <tr> <td>3rd Degree _____ @ \$</td> <td>_____ @ \$</td> </tr> <tr> <td>4th Degree _____ @ \$</td> <td>_____ @ \$</td> </tr> <tr> <td>DP or _____ @ \$</td> <td>_____ @ \$</td> </tr> <tr> <td>Petty DP _____ @ \$</td> <td>_____ @ \$</td> </tr> </table> <p style="text-align: center;">Total DEDR Penalty \$ _____</p> <p><input type="checkbox"/> The court further ORDERS that collection of the DEDR penalty be suspended upon defendant's entry into a residential drug program for the term of the program. (N.J.S.A. 2C:35-15e)</p>		Standard	Doubled	1st Degree _____ @ \$	_____ @ \$	2nd Degree _____ @ \$	_____ @ \$	3rd Degree _____ @ \$	_____ @ \$	4th Degree _____ @ \$	_____ @ \$	DP or _____ @ \$	_____ @ \$	Petty DP _____ @ \$	_____ @ \$	<p><input type="checkbox"/> The defendant is hereby ordered to provide a DNA sample and ordered to pay the costs for testing of the sample provided (N.J.S.A. 53:1-20.20).</p> <p><input type="checkbox"/> The defendant is hereby sentenced to community supervision for life. (If offense occurred before 1/14/04) (N.J.S.A. 2C:43-6.4)</p> <p><input type="checkbox"/> The defendant is hereby sentenced to parole supervision for life. (If offense occurred on or after 1/14/04) (N.J.S.A. 2C:43-6.4).</p> <p><input type="checkbox"/> The defendant is hereby ordered to serve a _____ year term of parole supervision, which term shall begin as soon as defendant completes the sentence of incarceration. (N.J.S.A. 2C:43-7.2).</p> <p><input type="checkbox"/> The court imposes a restraining order pursuant to DORA. (N.J.S.A. 2C:35-5.7(h)). Restraining Order expires _____</p>		
Standard	Doubled																	
1st Degree _____ @ \$	_____ @ \$																	
2nd Degree _____ @ \$	_____ @ \$																	
3rd Degree _____ @ \$	_____ @ \$																	
4th Degree _____ @ \$	_____ @ \$																	
DP or _____ @ \$	_____ @ \$																	
Petty DP _____ @ \$	_____ @ \$																	
<p>Forensic Laboratory Fee (N.J.S.A. 2C:35-20) _____</p> <p>Offenses @ \$ _____</p>		<p>Total Lab Fee \$ _____</p>																
VCCA Assessment (N.J.S.A. 2C:43-3.1)		Findings Per N.J.S.A. 2C:47-3																
<table style="width:100%; border: none;"> <thead> <tr> <th style="text-align: left;">Counts</th> <th style="text-align: left;">Number</th> <th style="text-align: left;">Amount</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____ @</td> <td>\$ _____</td> </tr> <tr> <td>_____</td> <td>_____ @</td> <td>\$ _____</td> </tr> <tr> <td>_____</td> <td>_____ @</td> <td>\$ _____</td> </tr> <tr> <td>_____</td> <td>_____ @</td> <td>\$ _____</td> </tr> </tbody> </table> <p style="text-align: center;">Total VCCA Assessment \$ 50.00</p>		Counts	Number	Amount	_____	_____ @	\$ _____	_____	_____ @	\$ _____	_____	_____ @	\$ _____	_____	_____ @	\$ _____	<p><input type="checkbox"/> The court finds that the defendant's conduct was characterized by a pattern of repetitive and compulsive behavior.</p> <p><input type="checkbox"/> The court finds that the defendant is amenable to sex offender treatment.</p> <p><input type="checkbox"/> The court finds that the defendant is willing to participate in sex offender treatment.</p>	
Counts	Number	Amount																
_____	_____ @	\$ _____																
_____	_____ @	\$ _____																
_____	_____ @	\$ _____																
_____	_____ @	\$ _____																
Vehicle Theft / Unlawful Taking Penalty (N.J.S.A. 2C:20-2.1)		License Suspension																
<p>Offense _____</p> <p>Mandatory Penalty \$ _____</p>		<p><input type="checkbox"/> CDS / Paraphemalia (N.J.S.A. 2C:35-16) <input type="checkbox"/> Waived</p> <p><input type="checkbox"/> Auto Theft / Unlawful Taking (N.J.S.A. 2C:20-2.1)</p> <p><input type="checkbox"/> Eluding (N.J.S.A. 2C:29-2)</p> <p><input type="checkbox"/> Other _____</p>																
Offense Based Penalties		Other Fees and Penalties																
<p>Penalty _____</p> <p>Amount \$ _____</p>		<p>Number of Months _____</p> <p><input type="checkbox"/> Non-resident driving privileges revoked</p>																
<p>Law Enforcement Officers Training and Equipment Fund Penalty (N.J.S.A. 2C:43-3.3)</p> <p><input type="checkbox"/> \$ _____</p>		<p>Safe Neighborhood Services Fund Assessment (N.J.S.A. 2C:43-3.2)</p> <p><input checked="" type="checkbox"/> 1 Offenses @ \$ 75.00</p> <p style="text-align: center;">Total: \$ 75.00</p>																
<p>Probation Supervision Fee (N.J.S.A. 2C:45-1d)</p> <p><input type="checkbox"/> \$ _____</p>		<p>Statewide Sexual Assault Nurse Examiner Program Penalty (N.J.S.A. 2C:43-3.6)</p> <p><input type="checkbox"/> Offenses @ \$ _____</p> <p style="text-align: center;">Total \$ _____</p>																
<p>Transaction Fee (N.J.S.A. 2C:46-1.1)</p> <p><input type="checkbox"/> \$ _____</p>		<p>Certain Sexual Offenders Surcharge (N.J.S.A. 2C:43-3.7)</p> <p><input type="checkbox"/> \$ _____</p>																
<p>Domestic Violence Offender Surcharge (N.J.S.A. 2C:25-29.4)</p> <p><input type="checkbox"/> \$ _____</p>		<p>Sex Crime Victim Treatment Fund Penalty (N.J.S.A. 2C:14-10)</p> <p><input type="checkbox"/> \$ _____</p>																
<p>Fine \$ _____</p> <p>Restitution \$ _____</p> <p>Total Financial Obligation \$ 125.00</p>		<p>Start Date _____ End Date _____</p> <p>Details _____</p> <p>Driver's License Number _____ Jurisdiction _____</p> <p>If the court is unable to collect the license, complete the following: Defendant's Address _____</p> <p>City _____ State _____ Zip _____</p> <p>Date of Birth _____ Sex <input type="checkbox"/> M <input type="checkbox"/> F Eye Color _____</p>																
<p>Details The Court waived the Probation Supervision Fee in this matter.</p>																		

