

COMPLAINT - WARRANT

COMPLAINT NUMBER				THE STATE OF NEW JERSEY VS. EDWARD F ROMANOWSKI ADDRESS: 400 TOWNSHIP ROAD OXFORD PA 19363	
1020	W	2015	000027		
<small>COURT CODE</small>	<small>PREFIX</small>	<small>YEAR</small>	<small>SEQUENCE NO.</small>		
JOINT COURT OF DELAWARE VALLEY PO BOX 496 MILFORD NJ 08848 (908) 995-9100 COUNTY OF: HUNTERDON					
# of CHARGES 2	CO-DEFTS	POLICE CASE #: 14-1367	DEFENDANT INFORMATION SEX: M EYE COLOR: HAZEL DOB: [REDACTED] DRIVER'S LIC. [REDACTED] DL STATE: [REDACTED] SOCIAL SECURITY [REDACTED] SBI #: [REDACTED] TELEPHONE #:		
COMPLAINANT PTL. BENT NAME: 61 CHURCH RD ATTN WARRANTS MILFORD NJ 08848					

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 12-22-2014 in HOLLAND, HUNTERDON County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, REPORT OR CAUSE TO BE REPORTED TO LAW ENFORCEMENT AUTHORITIES AN OFFENSE OR OTHER INCIDENT WITHIN THE AUTHORITY'S CONCERN, KNOWING THAT SUCH OFFENSE OR INCIDENT DID NOT OCCUR, A CRIME OF A DISORDERLY PERSONS OFFENSE.

WITHIN THE JURISDICTION OF THIS COURT, WITH PURPOSE TO HARASS ANOTHER, ENGAGE IN A COURSE OF ALARMING CONDUCT WITH THE PURPOSE TO ALARM OR SERIOUSLY ANNOY SUCH OTHER PERSON, SPECIFICALLY BY REPORTING TO POLICE OFFICIALS THAT HIS SON WAS BEING ABUSED WHILE IN THE CARE OF TANGEE WILSON AND CHRIS WILSON, A PETTY DISORDERLY PERSONS OFFENSE.

in violation of:

Original Charge	1) 2C:28-4B(1)	2) 2C:33-4C	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 wilfully false, I am subject to punishment.

Signed: _____ PTL. BENT _____ Date: 04-08-2015

DATE OF FIRST APPEARANCE 05-05-2015 TIME 7:00pm DATE OF ARREST

PROBABLE CAUSE DETERMINATION AND ISSUANCE OF WARRANT

Probable cause IS NOT found for the issuance of this complaint.

Signature of Court Administrator or Deputy Court Administrator _____ Date _____ Signature of Judge _____ Date _____

Probable cause IS found for the issuance of this complaint.

Signature and Title of Judicial Officer Issuing Warrant _____ Date _____
TO ANY PEACE OFFICER OR OTHER AUTHORIZED PERSON: PURSUANT TO THIS WARRANT YOU ARE HEREBY COMMANDED TO ARREST THE NAMED DEFENDANT AND BRING THAT PERSON FORTHWITH BEFORE THE COURT TO ANSWER THE COMPLAINT.

Bail Amount Set: 4,000.00 / FULL by: *By Ptl. Michael D. Bent, per telephonic authorization by Joseph Novak, JMC*
(if different from judicial officer that issued warrant)

- 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):

Municipal

Document Origination: <input checked="" type="checkbox"/> JAIL <input type="checkbox"/> SUPERIOR COURT <input type="checkbox"/> MUNICIPAL COURT <input type="checkbox"/> LAW ENFORCEMENT AGENCY	NEW JERSEY BAIL RECOGNIZANCE With Waiver of Extradition Court: Hunterdon County Superior Court Phone: (908) 237-5912 Address: Finance Division - Central Fee Office Hunterdon County Justice Center P.O. Box 1069, Flemington, NJ 08822	Bail Recognizance #: 10- 0014698 Receipt Number: 346137 CABS Number:
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Case Information:	COMPLAINT (CDR) #: W2015000027	PROMIS/GAVEL #:	INDICTMENT/ACC. #:
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CHARGE(S): 2C:28-4B(1) 2C:33-4C	WHERE OFFENSE OCCURRED MUNICIPALITY: 1020 Joint of DelVal COUNTY: Hunterdon
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Defendant Information: State of New Jersey vs. Romanowski, Edward Defendant	FIRST NAME Edward	MIDDLE INITIAL	LAST NAME Romanowski
	ADDRESS: 400 Township Rd PO Box 224		
	CITY: Oxford	STATE NJ	ZIP: 19363
	DATE OF BIRTH:	SOCIAL SECURITY #:	
	PHONE #:	STATE BUREAU OF IDENTIFICATION #:	

Bail Information:	AMOUNT OF BAIL SET: \$4000.00	BAIL TYPE: <input type="checkbox"/> ROR <input type="checkbox"/> 10% CASH <input checked="" type="checkbox"/> FULL CASH	DATE BAIL SET: 4/8/15	BAIL SET BY: Novak
	AMOUNT OF BAIL RECEIVED: \$4000.00	FILING FEE RECEIVED: \$ 0	TOTAL AMOUNT RECEIVED: \$ 4000.00	BAIL RECEIVED BY: Noriega
	PAYMENT TYPE: <input checked="" type="checkbox"/> CASH <input type="checkbox"/> CHECK # <input type="checkbox"/> CREDIT CARD <input type="checkbox"/> MONEY ORDER # <input type="checkbox"/> BOND			

SPECIAL CONDITIONS OF BAIL
Contact Court

IF MORE THAN ONE SURETY/INSURER IS INVOLVED, COMPLETE A SEPARATE BAIL RECOGNIZANCE FOR EACH.

Non-Corporate Surety Information: (PERSON POSTING CASH BAIL)	Corporate Surety/Bail Agent Information:		
FIRST NAME Karen	MIDDLE INITIAL J	LAST NAME Gambrel	NAME OF INSURER (Corporate Surety Company) and NAIC number. Attach proof of authority with corporate seal affixed: BAIL AGENT AND LICENSE #: BAIL AGENCY AND LICENSE #: POWER OF ATTORNEY #: EXPIRATION DATE:
ADDRESS:			
ADDRESS:			
CITY:	STATE:	ZIP:	
PHONE #:	DRIVER'S LIC. # OR OTHER FORM OF I.D.:		
AS SURETY, I HAVE READ, UNDERSTAND AND AGREE TO THE CONDITIONS (SEE REVERSE) AND SPECIAL CONDITIONS OF THIS BAIL RECOGNIZANCE.			AS BAIL AGENT I HAVE READ, UNDERSTAND AND AGREE TO THE CONDITIONS (SEE REVERSE) AND SPECIAL CONDITIONS OF THIS BAIL RECOGNIZANCE.
DATE: 4/11/15 SIGNATURE: Karen Gambrel			DATE: SIGNATURE:

Certification of Ownership for Cash Bail Deposited by Someone Other Than Defendant
I, Karen Gambrel, am the lawful owner of the \$4000.00 deposited in lieu of bond on behalf of the defendant in the above entitled case. 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.
Date: 4/11/15
Signature of Lawful Owner of Cash Bail: Karen Gambrel

Defendant Agreement:
I, the defendant, understand and agree that the owner of the bail posted in this case is Karen Gambrel. I also have read, understand, and agree to the Conditions (see reverse) AND Special Conditions of this Bail Recognizance. I further understand that I must appear at all scheduled court appearances.
Court Date: 4/8/15 5:15
Court Time: 7:00 AM/PM
Signature: [Signature] Date: 4/11/15

Date Bail Discharged:	Date Bail Forfeited:	<input type="checkbox"/> Please Notify Court Of Disability Accommodation Needs <input checked="" type="checkbox"/>
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