

COMPLAINT - WARRANT

COMPLAINT NUMBER				<i>THE STATE OF NEW JERSEY</i> <i>VS.</i> JAKE B SAXTON			
1712	W	2021	000318			ADDRESS [REDACTED]	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.				
SALEM CITY MUNICIPAL COURT 129 WEST BROADWAY SALEM NJ 08079-0000 856-935-1734 COUNTY OF: SALEM				DEFENDANT INFORMATION SEX: M EYE COLOR: BROWN DOB: [REDACTED] DRIVER'S LIC. #. [REDACTED] DL STATE: NJ SOCIAL SECURITY #: [REDACTED] SBI #: [REDACTED] TELEPHONE #: [REDACTED] () LIVESCAN PCN #: [REDACTED]			
# of CHARGES 3	CO-DEFTS	POLICE CASE #: I340210001					
COMPLAINANT M D CRESCI NAME: NEW JERSEY STATE POLICE							

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 01/06/2021 in **SALEM CITY**, **SALEM** County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, DID KNOWINGLY CONSPIRE WITH OTHERS TO POSSESS A CONTROLLED DANGEROUS SUBSTANCE TO WIT COCAINE WITH THE INTENT TO DISTRIBUTE. THIS BEING IN VIOLATION OF N.J.S. 2C:5-2A(1). A CRIME OF THE 2ND DEGREE.

WITHIN THE JURISDICTION OF THIS COURT, DID KNOWINGLY POSSESS A CONTROLLED DANGEROUS SUBSTANCE TO WIT COCAINE. THIS BEING IN VIOLATION OF N.J.S 2C:35-10A(1). A CRIME OF THE 3RD DEGREE.

WITHIN THE JURISDICTION OF THIS COURT, DID KNOWINGLY POSSESS A CONTROLLED DANGEROUS SUBSTANCE TO WIT COCAINE WITH THE INTENT OF DISTRIBUTING HEROIN. THIS BEING IN VIOLATION OF N.J.S 2C:35-5B(3). A CRIME OF THE 3RD DEGREE.

in violation of:

Original Charge	1) 2C:5-2A(1) 2C:35-5B(1)	2) 2C:35-10A(1)	3) 2C:35-5B(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: M D CRESCI Date: 10/07/2021

You will be notified of your **Central First Appearance/CJP** date to be held at the **Superior Court** in the county of **SALEM** at the following address: **SALEM COUNTY COURT**
92 MARKET STREET **SALEM NJ 08079-0000**
Date of Arrest: _____ Appearance Date: _____ Time: _____ Phone: **856-878-5050**

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. LINDA LAWHUN JUDICIAL OFFICER 10/07/2021
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: _____ by: _____
(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): _____

ORIGINAL

COMPLAINT – WARRANT (Court Action)

COMPLAINT NUMBER				STATE V.
1712	W	2021	000318	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	

JAKE B SAXTON

FTA Bail Information		Date Bail Set: _____	Amount Bail Set: \$ _____ by: _____	<input type="checkbox"/> Bail Recog. Attached
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Released on Bail (v)	R.O.R.	Committed Default	Committed w/o Bail	Place Committed: _____	Date Referred to County Prosecutor: _____
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Date of First Appearance: _____	<input type="checkbox"/> Advised of Rights by _____	Defendant Desires Counsel: <input type="checkbox"/> Yes <input type="checkbox"/> No
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Prosecuting Attorney Information				Defense Counsel Information					
Name:				Name:					
State	County	Municipal	Other	None	Retained	Public Def	Assigned	Waived	Other

Original Charge	1) 2C:5-2A(1) 2C:35-5B(1)	2) 2C:35-10A(1)	3) 2C:35-5B(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

Related Traffic Tickets and Complaints:

COMPLAINT - WARRANT

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1712	W	2021	000318	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	
<p>SALEM CITY MUNICIPAL COURT 129 WEST BROADWAY SALEM NJ 08079-0000 856-935-1734 COUNTY OF: SALEM</p>				ADDRESS [REDACTED]
# of CHARGES 3	CO-DEFTS	POLICE CASE #: I340210001		DEFENDANT INFORMATION
COMPLAINANT NAME: M D CRESCI				SEX: M EYE COLOR: BROWN DOB: [REDACTED] DRIVER'S LIC. #. [REDACTED] DL STATE: NJ SOCIAL SECURITY #: [REDACTED] SBI #: [REDACTED] TELEPHONE #: [REDACTED] () LIVSCAN PCN #: [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 01/06/2021 in **SALEM CITY**, **SALEM** County, NJ did: WITHIN THE JURISDICTION OF THIS COURT, DID KNOWINGLY CONSPIRE WITH OTHERS TO POSSESS A CONTROLLED DANGEROUS SUBSTANCE TO WIT COCAINE WITH THE INTENT TO DISTRIBUTE. THIS BEING IN VIOLATION OF N.J.S. 2C:5-2A(1). A CRIME OF THE 2ND DEGREE.

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in violation of:

Original Charge	1) 2C:5-2A(1) 2C:35-5B(1)	2) 2C:35-10A(1)	3) 2C:35-5B(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: M D CRESCI Date: 10/07/2021

You will be notified of your **Central First Appearance/CJP** date to be held at the Superior Court in the county of **SALEM** at the following address: SALEM COUNTY COURT
 92 MARKET STREET SALEM NJ 08079-0000
 Date of Arrest: Appearance Date: Time: Phone: 856-878-5050

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. LINDA LAWHUN JUDICIAL OFFICER 10/07/2021
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: _____ by: _____
(if different from judicial officer that issued warrant)

- | | | |
|---|--|--|
| <input type="checkbox"/> Domestic Violence – Confidential | <input type="checkbox"/> Related Traffic Tickets or Other Complaints | <input type="checkbox"/> Serious Personal Injury/ Death Involved |
|---|--|--|

Special conditions of release:
 No phone, mail or other personal contact w/victim
 No possession firearms/weapons
 Other (specify): _____

COMMITMENT

COMPLAINT NUMBER			
1712	W	2021	000318
COURT CODE	PREFIX	YEAR	SEQUENCE NO.

THE STATE OF NEW JERSEY

VS.

JAKE B SAXTON

SALEM CITY MUNICIPAL COURT
 129 WEST BROADWAY
 SALEM NJ 08079-0000
 856-935-1734 COUNTY OF: **SALEM**

ADDRESS [REDACTED]
 [REDACTED]

# of CHARGES 3	CO-DEFTS	POLICE CASE #: I340210001
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DEFENDANT INFORMATION
 SEX: **M** EYE COLOR: **BROWN** DOB: [REDACTED]
 DRIVER'S LIC. #: [REDACTED] DL STATE: **NJ**
 SOCIAL SECURITY #: [REDACTED] SBI #: [REDACTED]
 TELEPHONE #: [REDACTED] ()
 LIVSCAN PCN #:

COMPLAINANT **M** **D CRESCI**
 NAME: **NEW JERSEY STATE POLICE**

To any Law Enforcement Official of New Jersey, You are commanded to transport this defendant to the Warden of this county who is required to keep the defendant in custody until a release or detention decision is made.

Offense	Aux Offense	Drug Code	Degree	Offense Description
1. _____	_____	_____	_____	_____
2. _____	_____	_____	_____	_____
3. _____	_____	_____	_____	_____
4. _____	_____	_____	_____	_____

Commitment Reason:

You will be notified of your **Central First Appearance/CJP** date to be held at the Superior Court in the county of **SALEM**
 at the following address: SALEM COUNTY COURT
 92 MARKET STREET SALEM NJ 08079-0000

Date of Arrest: _____ Phone: 856-878-5050

 Signature and Title of Judicial Officer Issuing Warrant Date

COMMITMENT

Affidavit of Probable Cause

COMPLAINT NUMBER				<p><i>THE STATE OF NEW JERSEY</i></p> <p><i>VS.</i></p> <p>JAKE B SAXTON</p>
1712	W	2021	000318	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	
<p>SALEM CITY MUNICIPAL COURT 129 WEST BROADWAY SALEM NJ 08079-0000 856-935-1734 COUNTY OF: SALEM</p>				ADDRESS [REDACTED] [REDACTED]
# of CHARGES 3	CO-DEFTS	POLICE CASE #: I340210001		DEFENDANT INFORMATION SEX: M EYE COLOR: BROWN DOB: [REDACTED] DRIVER'S LIC. #. [REDACTED] DL STATE: NJ SOCIAL SECURITY #: [REDACTED] SBI #: [REDACTED] TELEPHONE #: [REDACTED] () LIVESCAN PCN #:
COMPLAINANT M D CRESCI NAME: NEW JERSEY STATE POLICE				

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:
 ON 1/27/21 AND 2/10/21 JAKE SAXTON WAS IN POSSESSION OF CDS COCAINE, AND DISTRIBUTED SAME TO A COOPERATING WITNESS. BETWEEN 1/6/21 AND 10/7/21 SAXTON HAS CONSPIRED WITH OTHER CO-CONSPIRATORS TO DISTRIBUTE CRACK COCAINE IN SALEM CITY.

Affidavit of Probable Cause

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1712	W	2021	000318
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THE STATE OF NEW JERSEY

VS.

JAKE B SAXTON

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

OBSERVATIONS

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

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: M D CRESCI LAW ENFORCEMENT OFFICER Date: 10/06/2021

Affidavit of Probable Cause

Preliminary Law Enforcement Incident Report

COMPLAINT NUMBER				THE STATE OF NEW JERSEY	
1712	W	2021	000318	VS.	
COURT CODE	PREFIX	YEAR	SEQUENCE NO.	JAKE B SAXTON	
SALEM CITY MUNICIPAL COURT 129 WEST BROADWAY SALEM NJ 08079-0000 856-935-1734 COUNTY OF: SALEM				ADDRESS [REDACTED] PENNSAUKEN [REDACTED]	
# of CHARGES 3	CO-DEFTS	POLICE CASE #: I340210001		DEFENDANT INFORMATION	
COMPLAINANT M D CRESCI NAME: NEW JERSEY STATE POLICE				SEX: M EYE COLOR: BROWN DOB: [REDACTED]	DL STATE: NJ
				DRIVER'S LIC. # [REDACTED]	SBI #: [REDACTED]
				SOCIAL SECURITY #: [REDACTED]	TELEPHONE #: [REDACTED]
				LIVESCAN PCN #: [REDACTED]	

Purpose: The Preliminary Law Enforcement Incident Report (PLEIR) is intended to document basic information known to the officer at the time of its preparation. It is recognized that additional relevant information will emerge as an investigation continues. The PLEIR shall be in addition to, not in lieu of, any regular police arrest, incident, or investigation reports. Note that the PLEIR is specific to each defendant charged in an investigation.

- The complaining officer personally observed the offense.
- The offense/incident was recorded on some type of electronic/surveillance. Select all items that <u>apply</u>:
 - Surveillance Camera
 - Other/Explain POLE CAM
- Physical evidence was seized/recovered. Select all items that <u>apply</u>:
 - CDS: Select all items that <u>apply</u>:
 - *Cocaine
- The case involves CDS and the evidence was recovered. Select all items that <u>apply</u>:
 - Controlled Purchase
- The case involves a search warrant(s).

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: M D CRESCI LAW ENFORCEMENT OFFICER Date: 10/06/2021

Preliminary Law Enforcement Incident Report

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7/20/2018