

**C. Decision Timetable** – R. 3:22-11 directs that the court “shall” determine the petition within 60 days after the hearing, or if no hearing is held, within 60 days after the last permitted filing.

**D. Substantive Standards**

**1. Ineffective Assistance** – **State v. Fritz**, 105 N.J. 42 (1987), adopting *Strickland v. Washington*, 466 U.S. 668 (1984): A defendant must show deficient performance and prejudice affecting the outcome.

**2. Prima Facie & Hearing** – **State v. Preciose**, 129 N.J. 451 (1992): A hearing is required if a defendant presents a prima facie case.

**3. Need for Certifications** – **State v. Cummings**, 321 N.J. Super. 154 (App. Div. 1999): Bald assertions are insufficient; factual claims must be supported by affidavits or certifications based on personal knowledge.

**4. Conflict of Interest** – **State v. Norman**, 151 N.J. 5 (1997): Under the New Jersey Constitution, prejudice from divided loyalties is assessed broadly.

**5. Brady Materiality** – **State v. Knight**, 145 N.J. 233 (1996): Suppression of material evidence affecting credibility or guilt violates due process.

**6. Plea Fairness** – **State v. Bellamy**, 178 N.J. 127 (2003): A plea must be knowing, voluntary, and intelligent, free from coercion.

**IV. ARGUMENT**

**A. The State Has Not Answered and Should Be Compelled or Barred Defendant’s consolidated petitions of May 4, 2025 (original PCR filing date triggering 60-day deadline under**

R. 3:22-9, expiring July 3, 2025) were properly served via JEDS and eCourts. The prosecutor has until July 3, 2025 (deadline already passed; State in procedural default) to answer. Given the volume of prior filings (May–June 2025) and the absence of any interim response, the Court should compel the State's Answer forthwith and make clear that absent a timely filing supported by good cause, the Court will proceed on the papers. R. 3:22-9.

**B. Assignment of OPD Is Mandatory Here** Defendant has never had a PCR assigned counsel. This is his first petition in each matter. No waiver of counsel has been executed. Under R. 3:22-6(a), the Court must assign OPD to represent Defendant on these petitions.

**C. Defendant Has Established Prima Facie Grounds for Relief**

The Certification and Exhibits establish:

- 1. Counsel failed to investigate** civil employment records disproving criminal intent, failed to secure witnesses, and took a plea-first posture—deficient under Fritz.
- 2. Counsel maintained a friendly rapport** with the prosecuting office that materially limited his defense—impermissible under Norman.
- 3. Brady/Giglio violations** occurred when impeaching information about a key accuser's criminal history was not disclosed or used—violative under Knight.
- 4. Coercive jail conditions**—including punitive isolation for requesting a phone call undermined the voluntariness of Defendant's plea—invalid under Bellamy.

These allegations are made under oath and are supported by Exhibits A–G, satisfying Cummings' requirement for competent supporting materials.

**V. RELIEF REQUESTED**

Defendant respectfully requests that the Court:

1. **Compel the State to file its Answer within the remaining period under R. 3:22-9 or by a shorter date set by the Court, or proceed on the papers absent good cause for delay.**
2. **Immediately assign the Office of the Public Defender pursuant to R. 3:22-6(a).**
3. **Set a return date for oral argument and a decision timetable under R. 3:22-11.**
4. Upon review of the unopposed or fully developed record, **grant final relief vacating the pleas and dismissing the charges with prejudice, or, alternatively, vacating the pleas and ordering a new trial.**

Dated: August 11, 2025

Respectfully submitted,

  
**DEVON TYLER BARBER**

Defendant, Pro Se  
325 East Jimmie Leeds Road, Suite 7-333  
Galloway Township, New Jersey  
(609) 665-9350  
DTB33@PM.mc / DEV@Tiller.Earth

**SUPERIOR COURT OF NEW JERSEY**

**LAW DIVISION – CRIMINAL PART**

**Atlantic County, New Jersey**

*State of New Jersey,*

**Plaintiff,**

**v.**

**Devon Tyler Barber,**

**Defendant.**

**Indictment/Accusation Nos.: ATL-22-002313 and ATL-22-002292**

**Docket Nos.: (as assigned by the Criminal Division Manager)**

**EXHIBIT INDEX**

The following exhibits are annexed in support of Defendant's motion to compel the State's Answer, assign counsel, set a decision timetable, and grant post-conviction relief:

**Exhibit A – NJ JEDS and eCourts receipts/docket printouts for filings from May 4, 2025 through July 27, 2025, including:**

- 3344016 (05/04 – ATL-22-002313 PCR petition)
- 3352125 (05/07 – ATL-22-002313 PCR petition)
- 3370560 (05/15 – ATL-22-002313 Motion)
- 3369597 (05/15 – ATL-22-002313 Motion)
- 3370700 (05/16 – ATL-22-002313 PCR supplement)
- 3373818 (05/18 – ATL-22-002313 PCR supplement)
- 3381971 (05/21 – ATL-22-002313 PCR supplement)
- 3384892 (05/22 – ATL-22-002313 PCR supplement)
- 3386111 (05/23 – ATL-22-002313 PCR supplement)
- 3438833 (06/18 – ATL-22-002292 PCR petition)
- 3441478 (06/18 – ATL-22-002313 PCR supplement)
- 3522215 (07/27 – ATL-22-002313 PCR petition)
- 3522209 (07/27 – ATL-22-002292 PCR petition)

**Exhibit B – Current eCourts Activity Logs** (as of August 10, 2025) for each docket, showing no Answer or responsive pleading by the State.

- **Self-Authentication:** Certified printouts from *eCourts* are court-generated records (*N.J.R.E.* 902(d), *R.* 1:32-2(a)).
- **PCR Connection:** Demonstrates procedural default by the State, supporting relief under *R.* 3:22-10(b) and *R.* 1:1-2(a).

**Exhibit C – Employment/W-2/Contract and Payroll Records** obtained from government filings and employer's certified submissions.

- **Self-Authentication:** Certified business/government records (*N.J.R.E.* 902(b), *N.J.R.E.* 803(c)(6)).
- **PCR Connection:** Corroborates that the underlying matter was a civil wage/contract dispute, negating elements of the criminal charge; supports ineffective assistance claim under *R.* 3:22-2(a) for failure to investigate exculpatory evidence.

**Exhibit D – Defense Witness List, Contact Attempts, and Correspondence Log** from the case file.

- **Self-Authentication:** Filed court documents and correspondence logs maintained in official case record (*N.J.R.E.* 902(d), *R.* 1:32-2).
- **PCR Connection:** Establishes that prior counsel failed to contact or present witnesses, supporting ineffective assistance under *R.* 3:22-2(a) and denial of fair trial rights under the Sixth Amendment.

**Exhibit E – Certified Plea and Sentencing Transcript Excerpts** showing “plea-first” approach and lack of developed defense record.

- **Self-Authentication:** Certified court transcripts (*N.J.R.E.* 902(d)).
- **PCR Connection:** Supports claims under *R.* 3:22-2(c) (plea not entered knowingly, voluntarily, or intelligently) and ineffective assistance for failure to investigate before advising plea.

**Exhibit F – Certified Criminal History of Accuser** and withheld impeachment material.

- **Self-Authentication:** Official criminal history printouts and certified court records (*N.J.R.E. 902(d)*).
- **PCR Connection:** Shows *Brady/Giglio* violations — suppression of impeaching evidence materially affecting outcome — supporting relief under *R. 3:22-2(a)* (denial of due process).

**Exhibit G – Defendant's R. 1:4-4 Certifications re-executed from prior unsworn declarations, detailing coercive jail conditions at plea time.**

- **Self-Authentication:** Executed certifications in compliance with *R. 1:4-4(b)* (substitute for affidavit).
- **PCR Connection:** Supports claims of coercion and involuntary plea under *R. 3:22-2(c)* and due process violations.

## **JUDICIAL NOTICE**

*(All Exhibits are public/government records or court-generated documents admissible without extrinsic evidence under N.J.R.E. 902. Judicial notice is requested under N.J.R.E. 201.)*

Defendant respectfully requests that the Court take judicial notice, pursuant to *N.J.R.E. 201(b)(1)-(2)*, of the public records, court-generated documents, and certified submissions listed below. Each exhibit qualifies as self-authenticating under *N.J.R.E. 902* and requires no extrinsic evidence of authenticity for admissibility.

Judicial notice is proper because the facts contained in these exhibits are (a) not subject to reasonable dispute and (b) capable of accurate and ready determination from sources whose accuracy cannot reasonably be questioned.

These exhibits directly support one or more grounds for Post-Conviction Relief under *R. 3:22-2*, including but not limited to:

- **Ineffective Assistance of Counsel** (*R. 3:22-2(a)*) – Exhibits C, D, and E demonstrate counsel's failure to investigate, present exculpatory evidence, and properly advise Defendant prior to plea.
- **Denial of Due Process** (*R. 3:22-2(a)*) – Exhibit F establishes suppression of impeachment material in violation of *Brady v. Maryland*, 373 U.S. 83 (1963), and *Giglio v. United States*, 405 U.S. 150 (1972).
- **Involuntary Plea** (*R. 3:22-2(c)*) – Exhibits E and G document coercion, jail conditions, and a plea-first approach inconsistent with a knowing, voluntary, and intelligent plea.
- **Procedural Default by the State** – Exhibits A and B show the State's failure to timely answer, supporting relief under *R. 3:22-10(b)* and the Court's inherent authority under *R. 1:1-2(a)* to prevent injustice.

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## SUPERIOR COURT OF NEW JERSEY

## LAW DIVISION – CRIMINAL PART

## ATLANTIC COUNTY

*State of New Jersey,*

Plaintiff,

v.

**Devon Tyler Barber,**

Defendant.

**Indictment/Accusation Nos.: ATL-22-002313 and ATL-22-002292**

Docket Nos.: (as assigned by the Criminal Division Manager)

**CERTIFICATE OF SERVICE**

I, Devon Tyler Barber, certify as follows:

*I will serve*

1. On August 12, 2025, ~~served~~ the **Notice of Motion, Certification, Memorandum of Law,**

**Proposed Orders A and B, and Exhibit Index** with attached **Exhibits A–G** in the above-captioned matters upon the following:

**a. Atlantic County Prosecutor's Office**

4997 Unami Blvd., Suite 2

Mays Landing, NJ 08330

— Served via NJ eCourts/JEDS (electronic service generated) and by U.S. Mail.

**b. Office of the Public Defender – Atlantic Region**

5914 Main Street, Suite 201

Mays Landing, NJ 08330

— Served via U.S. Mail with assignment request and courtesy copy.

**c. Former Counsel (R. 3:22-13 Notice)**

John W. Tumelty, Esq.

• 539 S. Shore Rd., Marmora, NJ 08223

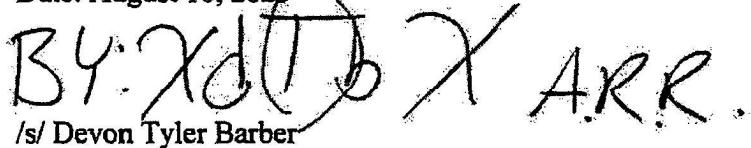
• 1616 Pacific Ave., Suite 318, Atlantic City, NJ 08401

— Served via Certified Mail, Return Receipt Requested.

**2. Certified Mail receipts ("green cards") will be filed upon return.**

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: August 10, 2025

BY XDD X ARR.

/s/ Devon Tyler Barber

325 East Jimmie Leeds Road, Suite 7-333

Galloway Township, New Jersey 08205

Phone: (609) 665-9350

Email: [DTB33@pm.me](mailto:DTB33@pm.me) / [DEV@Tiller.Earth](mailto:DEV@Tiller.Earth)

UNITED STATES DISTRICT COURT  
DISTRICT OF NEW JERSEY – CAMDEN VICINAGE

DEVON TYLER BARBER,  
*Plaintiff, pro se,*

Civil Action No. 22-06206 (KMW-EAP)

RECEIVED

v

SEP 02 2025

JOSEPH HARDEMON, JR., et al.,  
*Defendants.*

AT 8:30 M  
CLERK, U.S. DISTRICT COURT - DNJ

**NOTICE OF MOTION TO REOPEN PURSUANT TO FED. R. CIV. P. 60(b)(6)**

**MEMORANDUM OF LAW IN SUPPORT OF PLAINTIFF'S RULE 60(b)(6) MOTION**

**I. INTRODUCTION**

This case was closed for a **non-merits, procedural** reason: failure to update address under *D.N.J. L. Civ. R.* 10.1(a) during a period when Plaintiff was in custody and without stable housing. Reopening is warranted under *Fed. R. Civ. P. 60(b)(6)* due to extraordinary circumstances and the strong policy favoring resolution on the merits.

**II. GOVERNING RULES**

**A. Rule 60(b)(6) and Rule 60(c)(1).** Rule 60(b)(6) permits relief for “**any other reason that justifies relief**,” available only in **extraordinary circumstances**, and the motion must be made within a **reasonable time**. *Fed. R. Civ. P.* 60(b)(6), 60(c)(1); *Budget Blinds, Inc. v. White*, 536 F.3d 244, 255 (3d Cir. 2008). The Supreme Court recently reaffirmed strict limits and the extraordinary-circumstances requirement for Rule 60(b)(6). See, e.g., *Waetzig v. Halliburton Energy Servs., Inc.*, No. 23-971, slip op. at 4–14 (U.S. Feb. 26, 2025) (clarifying Rule 60(b) reach).

DTB

**B. Local Rule 10.1(a).** Unrepresented parties must notify the Court of any address change within seven days; failure may result in sanctions or administrative termination. *D.N.J. L. Civ. R. 10.1(a).*

### **III. ARGUMENT**

#### **A. Extraordinary Circumstances Warrant Reopening (Rule 60(b)(6)).**

Plaintiff's noncompliance arose while he was under probation/custody and experiencing housing instability that **prevented actual notice** and timely response. The dismissal occurred **before service** and without any merits determination. Those features—lack of notice, non-appearance by defendants, and non-merits closure—constitute the kind of **extraordinary circumstances** appropriate for Rule 60(b)(6) relief within a reasonable time. See *Budget Blinds*, 536 F.3d at 255.

#### **B. No Prejudice; Strong Policy Favoring Merits Determinations.**

Because defendants were never served, **reopening imposes no cognizable prejudice**. The Third Circuit favors decisions on the merits where feasible. See *United States v. \$55,518.05 in U.S. Currency*, 728 F.2d at 194–95.

#### **C. The Court Should Also Consider the Stakes Reflected in the Record.**

Plaintiff's PCR filings and employment records (Exs. A–E) show reputational and economic harms driven by **unreliable hearsay** and disregard of exculpatory work history. While the present motion addresses procedure, these materials underscore why adjudication **on the merits** is warranted now that Plaintiff can participate meaningfully.

8TB

#### IV. CONCLUSION

For the foregoing reasons, the Court should grant relief under *Fed. R. Civ. P. 60(b)(6)*, reopen the matter, update Plaintiff's address, and allow thirty (30) days to file an Amended Complaint.

Respectfully submitted,

*BY: X(T)X Devon Tyler A.R.R.*  
*/s/ Devon Tyler Barber, Pro Se Plaintiff*

c/o 325 East Jimmie Leeds Road, Suite 7-333  
Galloway, NJ 08205  
(609) 665-9350 | [Devon@Tiller.earth](mailto:Devon@Tiller.earth) | [dTb33@pm.me](mailto:dTb33@pm.me)

Dated: August 27, 2025

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CONFIDENTIAL ATL-22-002313 12/27/2022 10:13:11 AM Pg 1 of 25 Trans ID: CRM20221172006  
**APPROVED FOR SENTENCING** Page 1 of 19

<b>Adult Presentence Report Superior Court of New Jersey, ATLANTIC County</b>																									
<p>This report shall remain confidential and copies thereof shall not be made nor the disclosure of the contents of such report be made to third persons except as may be necessary in subsequent court proceedings involving the sentence imposed or disposition made.</p>																									
Last Name BARBER		First Name DEVON		Middle Name T																					
Also Known As		Sex <input checked="" type="checkbox"/> M <input type="checkbox"/> F	Date of Birth 12/31/1997	Age 24	Place of Birth GALLOWAY, NJ																				
Race WHITE		Social Security Number 138-04-6917		Driver's License Number NJ-B05431658312972																					
Address 309 NEW LEAF CT GALLOWAY		State NJ		Zip Code 08205	Residence Phone (856) 532-5255																				
Indictment / Accusation / Complaint Number 22-09-01413-I		PROMIS Number 22 002292-001	SPN 128412	SBI Number 542255G	FBI Number C71MLM9T2																				
<p>Original Charges</p> <p>1. AGG ASSAULT-ATTEMPT/CAUSE SIGNIFICANT BODILY INJURY, 2C:12-1B(7), DEG:3;          2. POSS OF WEAPON FOR UNLAWFUL PURPOSE- OTHER WEAPON, 2C:39-4D, DEG:3;          3. UNLAWFUL POSS WEAP - OTHER WEAPONS, 2C:39-5D, DEG:4;</p> <p>W-2022-003006-0180 (Cont...)</p>			<p>Final Charges</p> <p>1. AGG ASSAULT-ATTEMPT/CAUSE SIGNIFICANT BODILY INJURY, 2C:12-1B(7), DEG:3;          MDCS 10/26/22 = N, NPB          ***Multiple Indictments: 1 of 2***</p> <p>Marijuana Sealing:</p>																						
<p>Plea Agreement / Special Factors 3 Years Probation - Credit Time Served.          Defendant Released on plea date - Level 3 Monitoring - Restitution - Mental Health Evaluation and follow up - Anger Management. No contact victim - TASC evaluation and follow up - waive right to appeal. Remaining counts/charges to be (Cont...)</p>			<p>Mandatory Minimum Sentence Pursuant to N.J.S.A. 2C:</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%; text-align: center;"><input type="checkbox"/> 11-3</td> <td style="width: 25%; text-align: center;"><input type="checkbox"/> 11-5</td> <td style="width: 25%; text-align: center;"><input type="checkbox"/> 12-2</td> <td style="width: 25%; text-align: center;"><input type="checkbox"/> 13-1</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> 14-6</td> <td style="text-align: center;"><input type="checkbox"/> 15-2</td> <td style="text-align: center;"><input type="checkbox"/> 17-1</td> <td style="text-align: center;"><input type="checkbox"/> 20-11</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> 29-6</td> <td style="text-align: center;"><input type="checkbox"/> 35-3</td> <td style="text-align: center;"><input type="checkbox"/> 35-4</td> <td style="text-align: center;"><input type="checkbox"/> 35-5</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> 35-6</td> <td style="text-align: center;"><input type="checkbox"/> 35-7</td> <td style="text-align: center;"><input type="checkbox"/> 35-8</td> <td style="text-align: center;"><input type="checkbox"/> 39-10</td> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/> 43-6</td> <td style="text-align: center;"><input type="checkbox"/> 43-7</td> <td style="text-align: center;"><input type="checkbox"/> 43-7.1</td> <td style="text-align: center;"><input type="checkbox"/> 43-7.2</td> </tr> </table>			<input type="checkbox"/> 11-3	<input type="checkbox"/> 11-5	<input type="checkbox"/> 12-2	<input type="checkbox"/> 13-1	<input type="checkbox"/> 14-6	<input type="checkbox"/> 15-2	<input type="checkbox"/> 17-1	<input type="checkbox"/> 20-11	<input type="checkbox"/> 29-6	<input type="checkbox"/> 35-3	<input type="checkbox"/> 35-4	<input type="checkbox"/> 35-5	<input type="checkbox"/> 35-6	<input type="checkbox"/> 35-7	<input type="checkbox"/> 35-8	<input type="checkbox"/> 39-10	<input type="checkbox"/> 43-6	<input type="checkbox"/> 43-7	<input type="checkbox"/> 43-7.1	<input type="checkbox"/> 43-7.2
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Offense Date 07/11/2022	Arrest Date 07/11/2022	Plea / Conviction Date 10/26/2022	Sentence Date 01/04/2023	<input checked="" type="checkbox"/> Pending Charges <input type="checkbox"/> Detainers																					
Status <input type="checkbox"/> ROR <input checked="" type="checkbox"/> Pretrial <input type="checkbox"/> Bail <input type="checkbox"/> Jail Release		Bail Amount .00	Date Bail Posted	Interpreter Needed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Language																				
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			<input type="checkbox"/> Public Defender <input checked="" type="checkbox"/> Private <input type="checkbox"/> Assigned																						
Sentencing Judge Pamela D'Arcy, J.S.C.			Defense Attorney JOHN W TUMELTY <table style="float: right;"> <tr> <td>Phone Number</td> <td>(609) 390-4600</td> </tr> </table>			Phone Number	(609) 390-4600																		
Phone Number	(609) 390-4600																								
Assistant Prosecutor PAIGE JEDLICKA			Address 539 SHORE ROAD PALERMO NJ 08223																						
Comments Defendant was arrested on 7/11/2022 and lodged at ACJF until released on pretrial conditions on 10/26/2022.																									
Probation Officer Carly Wright		Date Prepared	Team Leader / Supervisor LUKE WEPY		Date Approved																				

CONFIDENTIAL ATL-22-002313 12/27/2022 10:13:11 AM Pg 2 of 25 Trans ID: CRM20221172006  
Page 2 of 19**APPROVED FOR SENTENCING****Additional Information**

LAST NAME	FIRST NAME	MIDDLE NAME
BARBER	DEVON	T
INDICTMENT/ACCUSATION / COMPLAINT NUMBER	PROMIS NUMBER	SBI #
22-09-01413-I	22 002292-001	542255G

Additional Info, Page 1

ADULT PRESENTENCE REPORT: ORIGINAL CHARGES

DP01. SIMPLE ASSAULT-PURPOSELY/KNOWINGLY CAUSE BOD. INJURY, 2C:12-1A(1), DEG:DP;

DP02. RESIST ARR/ELUD-PREVENTS OFFICER FROM EFFECTING ARREST, 2C:29-2A(1), DEG:DP;

ADULT PRESENTENCE REPORT: PLEA AGREEMENT

dismissed.

VCCA: \$100 (min), SSCP: \$75, LETF: \$30, PSF: \$ \_\_\_\_/month, DNA Sample

Total: \$205 + PSF (on this indictment only)

CONFIDENTIAL ATL-22-002313 12/27/2022 10:13:11 AM Pg 3 of 25 Trans ID: CRM20221172006  
Page 3 of 19**APPROVED FOR SENTENCING****Offense Information**

Last Name BARBER	First Name DEVON	Middle Name T
Indictment / Accusation / Complaint Number 22-09-01413-I	PROMIS Number 22 002292-001	SBI Number 542255G

Summary of State's Allegations

**Disclaimer for Use in Post-Sentence Proceedings:**

This summary of the State's Allegations includes descriptions of charges of which the defendant may not have been found guilty by a jury or may not have pled guilty to. No inference of guilt or wrongdoing should be drawn from dismissed charges. This section must be read in conjunction with the final charges and the "Defendant's Version."

-----  
According to discovery materials:

On 7/11/2022 at approximately 1700 hours, Galloway Township Police responded to Aloe Avenue for a disturbance involving Devon Barber with an unknown weapon attacking a Joseph Hardemon. Upon arrival, Officers observed several males and Devon in the driveway. Devon was holding a crowbar in his left hand. It was also discovered that Devon had an active warrant (0180 W 2022 002993) for his arrest stemming from earlier in the day with Devon and Hardemon.

When Officers exited their vehicle, they ordered Devon to drop the crowbar to which he complied. Officers approached Devon and patted him down for additional weapons, which came up negative. At that time, one Officer grabbed Devon's arm advising him that he was being placed in handcuffs and Devon began yelling, advising he was the victim and asking why he was being arrested. Devon was visibly pulling away from the Officer's control and was advised that he was being detained at that time. Devon began walking away from the Officer while the Officer was grabbing both of his hands attempting to place him in  
(Cont...)

## Special Factors Relative to Offense

See Victim Page for additional information.

Defendant's Version (Complete only upon application for PTI and after conviction) Defendant to rely on statement given at time of plea.		
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Victim Statement(s) Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If No, Check Reason <input checked="" type="checkbox"/> No Response <input type="checkbox"/> Not Applicable	Date Request Made 10/26/2022
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Revised: 09/2017, CN: 10693

ATL202293707 Dec 27, 2022 10:13:12 AM

CONFIDENTIAL ATL-22-002313 12/27/2022 10:13:11 AM Pg 4 of 25 Trans ID: CRM20221172006  
Page 4 of 19**APPROVED FOR SENTENCING****Additional Information**

LAST NAME BARBER	FIRST NAME DEVON	MIDDLE NAME T
INDICTMENT / ACCUSATION / COMPLAINT NUMBER 22-09-01413-I	PROMIS NUMBER 22 002292-001	SBI # 542255G

Additional Info, Page 1

**SUMMARY OF STATE'S ALLEGATIONS (CONT. OFFENSE INFORMATION: 1 )****Disclaimer for Use in Post-Sentence Proceedings:**

This summary of the State's Allegations includes descriptions of charges of which the defendant may not have been found guilty by a jury or may not have pled guilty to. No inference of guilt or wrongdoing should be drawn from dismissed charges. This section must be read in conjunction with the final charges and "the Defendant's Version."

handcuffs. They began demanding Devon to get on the ground, but he continued to ignore Officers' commands and was pulling away. One Officer attempted to sweep Devon's legs out in order to place him into custody, but Devon dropped his hands out of the Officer's control and began running away from them. Officers were able to grab hold of Devon a short while later and were able to place him into custody.

Victim Joseph Hardemon advised that when Devon punched him in the face (right cheek), he stumbled back injuring his right foot when he fell on it. Joseph's foot was swollen, and he was immobilized.

CONFIDENTIAL ATL-22-002313 12/27/2022 10:13:11 AM Pg 5 of 25 Trans ID: CRM20221172006  
Page 5 of 19

## APPROVED FOR SENTENCING

## Multiple Charges Sheet

Last Name BARBER	First Name DEVON	Middle Name T			
Indictment / Accusation / Complaint Number 22-10-01440-I	PROMIS Number 22 002313-001				
Original Charges 1. TERRORISTIC THREATS-THREAT TO COMMIT CRIME OF VIOLENCE, 2C:12-3A, DEG:3;	Final Charges 1. TERRORISTIC THREATS-THREAT TO COMMIT CRIME OF VIOLENCE, 2C:12-3A, DEG:3;  ***Multiple Indictments: 2 of 2***				
Plea Agreement / Special Factors See Face Sheet for plea.  VCCA: \$50, SSCP: \$75, PSF: \$____/month, DNA Sample  Total: \$125 + PSF (on this indictment only)	Mandatory Minimum Sentence Pursuant to N.J.S.A. 2C:  <input type="checkbox"/> 11-3 <input type="checkbox"/> 11-5 <input type="checkbox"/> 12-2 <input type="checkbox"/> 13-1 <input type="checkbox"/> 14-6 <input type="checkbox"/> 15-2 <input type="checkbox"/> 17-1 <input type="checkbox"/> 20-11 <input type="checkbox"/> 29-6 <input type="checkbox"/> 35-3 <input type="checkbox"/> 35-4 <input type="checkbox"/> 35-5 <input type="checkbox"/> 35-6 <input type="checkbox"/> 35-7 <input type="checkbox"/> 35-8 <input type="checkbox"/> 39-10 <input type="checkbox"/> 43-6 <input type="checkbox"/> 43-7 <input type="checkbox"/> 43-7.1 <input type="checkbox"/> 43-7.2				
Offense Date 07/11/2022	Arrest Date 10/26/2022	Plea / Conviction Date 10/26/2022	Sentence Date 01/04/2023		
Status <input type="checkbox"/> ROR <input checked="" type="checkbox"/> Pretrial Release <input type="checkbox"/> Bail <input type="checkbox"/> Jail _____	Bail Amount .00		Date Bail Posted		
Jail Time Credit		Gap Time Credit			
From (Date) 07/11/2022	To (Date) 10/26/2022	Total Jail Time Credit Days 108	From (Date)	To (Date)	Total Gap Time Credit Days
Prosecutor Name and Address (If Different)			Attorney Name and Address (If Different)		
Comments					

CONFIDENTIAL ATL-22-002313 12/27/2022 10:13:11 AM Pg 6 of 25 Trans ID: CRM20221172006  
Page 6 of 19**APPROVED FOR SENTENCING****Offense Information**

Last Name BARBER	First Name DEVON	Middle Name T
Indictment / Accusation / Complaint Number 22-10-01440-I	PROMIS Number 22 002313-001	SBI Number 542255G

Summary of State's Allegations

**Disclaimer for Use in Post-Sentence Proceedings:**

This summary of the State's Allegations includes descriptions of charges of which the defendant may not have been found guilty by a jury or may not have pled guilty to. No inference of guilt or wrongdoing should be drawn from dismissed charges. This section must be read in conjunction with the final charges and the "Defendant's Version."

**According to discovery materials:**

The defendant was working for the victim, Joseph Hardemon, and his partnered LLC Oak Tree Investments. They are currently in the process of rehabbing a local residence located at 1525 Aloe Street, Egg Harbor (Galloway), NJ. The defendant believed he was owed money and was attempting to take ownership of the property through his Sovereign Citizenship. The defendant had sent several threatening harassing communications through LLC's Facebook page and to the victim, Joseph Hardemon.

## Special Factors Relative to Offense

See Victim Page for additional information.

Defendant's Version (Complete only upon application for PTI and after conviction)  
Defendant to rely on statement given at time of plea.

Victim Statement(s) Attached

Yes  No

If No, Check Reason

No Response

Not Applicable

Date Request Made

10/26/2022

Revised: 09/2017, CN: 10693

ATL202293707 Dec 27, 2022 10:13:12 AM

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## APPROVED FOR SENTENCING

## Court History

LAST NAME		FIRST NAME		MIDDLE NAME	
BARBER		DEVON		TP	
SBI #	FBI #	PENDING CHARGES		ACTIVE BENCH WARRANTS	DETAINERS
542255G	C71MLM9T2	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO

## DISCUSSION OF PRIOR COURT HISTORY AND PENDING CHARGES

A review of the defendant's adult arrest record reveals 6 known arrests/complaints across 3 states; Ohio, Florida, and New Jersey with no noted PRIOR convictions. The instant matters will represent the defendant's 1st and 2nd known indictable convictions.

The defendant has pending charges out of Atlantic County Central Municipal Court for Harassment with no scheduled events. He also has an active bench warrant out of Belmont County, Ohio for Failure to Appear. A voicemail was left (740-695-7933) for an update on the status of the warrant.

No juvenile court history or domestic violence case list was located for this defendant in New Jersey.

## COURT HISTORY

DATE	PLACE	OFFENSE	COURT	DISPOSITION
***** ADULT. *****				
05/10/2019	BELMONT CO, OH	NO CHARGES LISTED		BENCH WARRANT - FTA
06/12/2021	PALM BEACH, FL	5002360876 1. TRESPASSING - FAIL TO LEAVE PROPERTY UPON ORDER BY OWNER 2. RESIST OFFICER - OBSTRUCT WO VIOLENCE		NO DISPO AVAILABLE
07/11/2022	ATLANTIC COUNTY CENT	ATL 22 002313-001 22-10-01440-I W-2022-002993-0180 1. TERRORISTIC THREATS-THREAT TO COMMIT CRIME OF VIOLENCE, 2C:12-3A, DEG:3;	Superior	Disp Date: 10/26/2022 Disp: GUILTY CT: 1; Pending SE: 01/04/2023 ***Present Case***
07/11/2022	ATLANTIC COUNTY CENT	ATL 22 002292-001 22-09-01413-I W-2022-003006-0180 1. AGG ASSAULT-ATTEMPT/CAUSE SIGNIFICANT BODILY INJURY, 2C:12-1B(7), DEG:3; 2. POSS OF WEAPON FOR UNLAWFUL PURPOSE-OTHER WEAPON, 2C:39-4D, DEG:3; 3. UNLAWFUL POSS WEAP - OTHER WEAPONS, 2C:39-5D,	Superior	Disp Date: 10/26/2022 Disp: GUILTY CT: 1; Pending SE: 01/04/2023 ***Present Case***

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Page 8 of 19**APPROVED FOR SENTENCING****Court History Continued**

LAST NAME	FIRST NAME	MIDDLE NAME
BARBER	DEVON	T

**COURT HISTORY**

DATE	PLACE	OFFENSE	COURT	DISPOSITION
		DEG:4; W-2022-003006-0180 DP01. SIMPLE ASSAULT-PURPOSELY/KNOWIN GLY CAUSE BOD. INJURY, 2C:12-1A(1); DP02. RESIST ARR/ELUD-PREVENTS OFFICER FROM EFFECTING ARREST, 2C:29-2A(1);		
08/24/2022	ATLANTIC COUNTY CENTRAL MC	S-2022-002991-0180 1.HARASSMENT-COMMUNICATI ON IN MANNER TO CAUSE ALARM, 2C:33-4A;	Municipal	Pending: No Scheduled Events

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### Court History - Charges Not Resulting in Conviction

Last Name	First Name	Middle Name
BARBER	DEVON	T

The arrest(s) not resulting in conviction contained in this section shall not be considered by the court unless the prosecutor has established that there is a factual basis to consider this information when sentencing the defendant. See State v. K.S., 220 N.J. 190, 199 (2015).

Date	Place	Case Identifier	Court	Disposition
***** ADULT. *****				
02/19/2019	GALLOWAY TWP	ATL 19 000630-001	Superior	Disp Date: 05/15/2019 Disp: DISMISSED

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APPROVED FOR SENTENCING Uniform Defendant Intake - Superior Court of New Jersey									
Last Name BARBER			First Name DEVON			Middle Name T			
Also Known As			SPN 128412	SBI # 542255G			Driver's License Number NJ-B05431658312972		
Date of Birth 12/31/1997	Age 24	Place of Birth GALLOWAY, NJ	Social Security Number 138-04-6917	Sex <input checked="" type="checkbox"/> M <input type="checkbox"/> F	Race WHITE				
Height 6'0"	Weight 150	Eye Color BROWN	Hair Color BROWN	Distinguishing Marks				Hispanic or Latinx No	
Alien Status		Citizenship <input checked="" type="checkbox"/> US <input type="checkbox"/> Other		Other Citizenship (Nationality)			Interpreter Needed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Language	
Attorney's Name JOHN W TUMELTY			Complaint Date 07/11/2022	Arrest Date 07/11/2022	Veteran <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Active Military Duty <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
Police Agency GALLOWAY TOWNSHIP POLICE DEPT.			County ATLANTIC	Court of Filing SUPERIOR					
Commitment No.	Initial Bail Amount \$ .00	Initial Bail Type <input type="checkbox"/> Full Cash/Bond <input type="checkbox"/> 10% Cash <input type="checkbox"/> Full Cash <input checked="" type="checkbox"/> Other				Bail/Release Status <input type="checkbox"/> ROR <input checked="" type="checkbox"/> Pretrial Release <input type="checkbox"/> Bail <input type="checkbox"/> Jail			
Charges 1. AGG ASSAULT-ATTEMPT/CAUSE SIGNIFICANT BODILY INJURY, 2C:12-1B(7), DEG:3; 2. POSS OF WEAPON FOR UNLAWFUL PURPOSE-OTHER WEAPON, 2C:39-4D, (Cont...)			Complaint Numbers W-2022-003006-0180 W-2022-003006-0180	PROMIS Numbers 22 002292-001			Indictment/Acc.Number 22-09-01413-I		
Codefendants' Names			Complaint Numbers	PROMIS Numbers			Indictment/Acc.Number		
Criminal History									
Prior Record <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			Pending Charges <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No						
Residence									
Number of Years In County: 24	NJ: 24	US: 24	Residence Status <input type="checkbox"/> Rent <input type="checkbox"/> Own <input checked="" type="checkbox"/> Other			How Long at Current Address LIFE			
Address 309 NEW LEAF CT GALLOWAY NJ							Zip Code 08205		
Name of Cohabitant SHERRI/RICHARD BARBER			Relationship to Defendant PARENTS			Residence Phone (856) 532-5255	Emergency Phone (609) 569-3800		
Prior Address							Zip Code		
Name of Cohabitant			Relationship to Defendant			How Long at This Address			
Marital Status <input checked="" type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Separated <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed <input type="checkbox"/> Civil Union <input type="checkbox"/> Domestic Partnership					Number of Dependents 0		Pay Support <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Does the Defendant have primary care of children or other dependents? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A			If Yes, has the Defendant made alternate care arrangements? <input type="checkbox"/> Yes <input type="checkbox"/> No			Has alternate care information been obtained or referral made? <input type="checkbox"/> Yes <input type="checkbox"/> No			
Defendant Supplemental Contact SHERRI BARBER			Relationship to Defendant MOTHER			Telephone Number (609) 569-3800			
Contact Person's Address 309 NEW LEAF CT			GALLOWAY NJ			Zip Code 08205			
Comments As of this writing, attempts to reach the above supplemental contact have been (Cont...)									

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Page 11 of 19**APPROVED FOR SENTENCING****Additional Information**

LAST NAME	FIRST NAME	MIDDLE NAME
BARBER	DEVON	T
INDICTMENT / ACCUSATION / COMPLAINT NUMBER	PROMIS NUMBER	SBI #
22-09-01413-I	22 002292-001	542255G

Additional Info, Page 1

**CHARGE LIST**

Charges	Complaint Numbers	Promis Numbers	Indictment/Acc#
DEG:3;			
3. UNLAWFUL POSS WEAP - OTHER WEAPONS, 2C:39-5D, DEG:4;			
DP01. SIMPLE ASSAULT-PURPOSELY/KNOWINGLY CAUSE BOD. INJURY, 2C:12-1A(1), DEG:DP;			
DP02. RESIST ARR/ELUD-PREVENTS OFFICER FROM EFFECTING ARREST, 2C:29-2A(1), DEG:DP;			
1. TERRORISTIC THREATS-THREAT TO COMMIT CRIME OF VIOLENCE, 2C:12-3A, DEG:3;	W-2022-002993-0180	22 002313-001	22-10-01440-I

**RESIDENCE: COMMENTS**

unsuccessful. Any information received will be attached.

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<b>APPROVED FOR SENTENCING Uniform Defendant Intake: Superior Court of NJ</b>				
LAST NAME BARBER		FIRST NAME DEVON	MIDDLE NAME T	
<b>3. Defendant's Health Status</b>				
REPORTED PHYSICAL HEALTH <input checked="" type="checkbox"/> GOOD <input type="checkbox"/> POOR	REPORTED MENTAL HEALTH <input checked="" type="checkbox"/> GOOD <input type="checkbox"/> POOR	DRUG / ALCOHOL USE <input checked="" type="checkbox"/> PRESENT <input type="checkbox"/> PAST <input type="checkbox"/> NONE	USE AT TIME OF OFFENSE <input type="checkbox"/> YES <input type="checkbox"/> NO	
<b>4. Physical Appearance / Additional Comments</b>				
PHYSICAL APPEARANCE DESCRIPTION The defendant reported to be in good overall mental and physical health.				
MEDICATION / FREQUENCY Denied				
<b>5. Substance Abuse History</b>				
SUBSTANCE USED Marijuana	FREQUENCY Couple Times Per Week	METHOD OF INGESTION Smoke	INITIAL USE Age: 17	LAST USE 3 Days Ago
<b>6. Medical / Mental Health / Substance Abuse: Treatment History &amp; Insurance Coverage</b>				
TREATMENT FACILITIES Denied	LOCATIONS	DATES OF TREATMENT		
DIAGNOSIS / COMMENTS The defendant acknowledged the above use of marijuana. He was referred to TASC for an evaluation scheduled 11/10/22 with Brenda Vandunk. Per attached TASC evaluation, the client meets the ASAM Criteria's 3rd Edition for Level 1 Outpatient Services. A supportive self-help network, such as AA/NA, or other alternative supportive networks, (Cont....)				
ADULT DIAGNOSTIC TREATMENT CENTER EVALUATION ORDERED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	DATE ORDERED	COPY RECEIVED <input type="checkbox"/> YES <input type="checkbox"/> NO		
PSYCHOLOGICAL EVALUATION ORDERED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	DATE ORDERED	COPY RECEIVED <input type="checkbox"/> YES <input type="checkbox"/> NO		
REFERRED FOR SUBSTANCE ABUSE EVALUATION? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	TASC <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	OTHER AGENCY		
HEALTH INSURANCE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	INSURED'S NAME Parents	POLICY NUMBER		
INSURANCE CARRIER Horizon NAME AND ADDRESS				
COMMENTS				

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Page 13 of 19**APPROVED FOR SENTENCING****Additional Information**

LAST NAME	FIRST NAME	MIDDLE NAME
BARBER	DEVON	T
INDICTMENT / ACCUSATION / COMPLAINT NUMBER	PROMIS NUMBER	SBI #
22-09-01413-I	22 002292-001	542255G

Additional Info, Page 1

**MEDICAL / MENTAL TREATMENT HISTORY: DIAGNOSIS / COMMENTS**

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would also be beneficial to assist in maintaining abstinence and recovery. When asked about prior CDS/alcohol use he advised that he disclosed that information to the TASC evaluator in depth. Barber has never been required to attend treatment and/or counseling for any addictions.

APPROVED FOR  
SENTENCING Page 14 of 19  
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Uniform Defendant Intake: Superior Court of NJ			
LAST NAME BARBER	FIRST NAME DEVON	MIDDLE NAME T	
<b>7. Employment</b>			
CURRENT EMPLOYER'S NAME AND ADDRESS P.F. Chang's, Quarter at Tropicana, 2801 Pacific Ave #101, Atlantic City, NJ			
OCCUPATION Food Runner	YEARS / MOS. 1 month	PHONE (609) 348-4600	
SKILLS	SALARY \$13 HR	IF UNEMPLOYED, HOW LONG	HOW SUPPORTED Family/Job
PREVIOUS EMPLOYER'S NAME AND ADDRESS Joe's Painting & Renovation LLC (3 Years)			FROM      TO
EMPLOYMENT VERIFICATION AND WORK HISTORY The defendant advised he start's his new job at P.F. Chang's on 11/23/22.			
<b>8. Financial Status</b>			
Net Monthly Income	\$ .00		
Spousal / Cohabitant Contribution	\$ .00		
Unemployment / Disability	\$ .00		
Social Security	\$ .00		
Veterans Administration	\$ .00		
Pension	\$ .00		
Public Assistance / Subsidies	\$ .00		
Child Support / Alimony	\$ .00		
Food Stamps	\$ .00		
Housing Subsidies	\$ .00		
Trust Fund Income	\$ .00		
Institutional Wages	\$ .00		
Income From Rental Properties	\$ .00		
TOTAL MONTHLY INCOME		\$ .00	
House(s) / Land Market Value	\$ .00		
Value of All Motor Vehicles	\$ .00		
Cash	\$ .00		
Current Balance Checking Accts.	\$ .00		
Current Balance Savings Accts.	\$ .00		
Civil Judgment Awards / Pending	\$ .00		
Current Value of Stocks / Bonds	\$ .00		
Face Value of CDs / IRAs / 401Ks	\$ .00		
Money Market Accounts	\$ .00		
Retrievable Bail Amt. & Location	\$ .00		
Other Assets	\$ .00		
Other Assets	\$ .00		
		TOTAL ASSETS \$ .00	
Rent	\$ .00		
Mortgage	\$ .00		
Property Taxes	\$ .00		
Child Support / Alimony	\$ .00		
PAID THROUGH PROBATION DEPT.	<input type="checkbox"/> YES	<input type="checkbox"/> NO	
Vehicle Loans & Insurance	\$ .00		
Household Utilities	\$ .00		
Other Household Expenses	\$ .00		
Other Loans & Expenses	\$ .00		
TOTAL MONTHLY PAYMENTS		\$ .00	
Mortgage Loan Balances			
Vehicle Loan Balances			
Support Arrearage			
Medical / Dental / Hospital Debts			
Attorney Fees			
Fines Owed to Other Courts			
Credit Card Balances			
Civil Judgments Owed			
Other Debts and Expenses			
		TOTAL DEBTS \$ .00	
FINANCIAL COMMENTS INCLUDING DEFENDANT'S REPORTED ABILITY TO PAY COURT IMPOSED ASSESSMENTS PER MONTH:			
<input type="checkbox"/> I WISH TO BE REPRESENTED BY <input type="checkbox"/> PUBLIC DEFENDER <input checked="" type="checkbox"/> PRIVATE COUNSEL			
WARNING REGARDING CONFIDENTIALITY At the direction of the Assignment Judge acting on his or her own initiative, or in response to a valid grand jury subpoena with the approval of the Assignment Judge, this page (UDIR-3) may be produced to a grand jury and a prosecutor.			
<b>CERTIFICATION</b>			
I certify that the foregoing statements made by me in the above Financial Statement are true. If I have indicated above that I wish to be represented by a public defender, I am submitting this Financial Statement in support of my application to establish indigency, and I am aware that if any statements made by me in the Financial Statement are willfully false, I am subject to punishment as provided by R. 1:4-4(b).			
DEFENDANT'S SIGNATURE			DATE
INTERVIEWER'S SIGNATURE		TITLE	
DATE			

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Page 15 of 19**APPROVED FOR****SENTENCING Uniform Defendant Intake: Superior Court of NJ**

LAST NAME BARBER	FIRST NAME DEVON	MIDDLE NAME T
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**9. Family History**

PARENTAL  
The defendant was born to married parents, Richard and Sherri Barber. He advised he has four siblings, three sisters and one brother. His father is the Chief of Police in Galloway Township, New Jersey and his mother is disabled. Devon advised he had a good childhood free from any abuse/neglect or parental drug/alcohol abuse inside his home growing up.

MARITAL/CHILDREN The defendant is single with no children.
---

HOME/NEIGHBORHOOD/ENVIRONMENT  
The defendant resides with his parents and two siblings in a home in Galloway Township, New Jersey. He reported the residence to be in good condition with two small non-aggressive dogs. Devon further reported that his father is the Chief of Police in Galloway Township, NJ and has firearms inside the residence.

<b>10. Military Service History</b>			
BRANCH N/A	DISCHARGE <input type="checkbox"/> HONORABLE <input type="checkbox"/> GENERAL <input type="checkbox"/> OTHER	SERVICE PERIOD	
COMMENTS			

<b>11. Education</b>				
LAST SCHOOL YEAR COMPLETED (1-20) 12	GRADUATE <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> GED	YEAR GRADUATED 2016	CURRENTLY IN SCHOOL <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	MAJOR / SPECIAL TRAINING
LAST SCHOOL ATTENDED Cedar Creek High School, Egg Harbor City, NJ				AGE LAST ATTENDED
COMMENTS The defendant reported that he attended Atlantic Cape Community College after high school for roughly three months, but he did not complete this schooling.				

<b>12. Other Information/Comments</b>				
COMMENTS The defendant can read and write in English.				

CONFIDENTIAL ATL-22-002313 12/27/2022 10:13:11 AM Pg 16 of 25 Trans ID: CRM20221172006  
Page 16 of 19**APPROVED FOR SENTENCING****Case Analysis**

LAST NAME BARBER	FIRST NAME DEVON	MIDDLE NAME T
INDICTMENT / ACCUSATION / COMPLAINT NUMBER 22-09-01413-I	PROMIS NUMBER 22 002292-001	SBI # 542255G

## ASSESSMENT OF FACTORS CONTRIBUTING TO PRESENT OFFENSE (N.J.S.A. 2C:44-1)

In reference to the present offenses, defendant to rely on statement given at time of plea.

## ASSESSMENT OF DEFENDANT'S PERSONALITY, PROBLEMS &amp; THE POTENTIAL FOR PROBATION AS A DISPOSITION, NOTING POTENTIALLY AVAILABLE COMMUNITY RESOURCES FOR ASSISTANCE

The defendant is a twenty-four-year-old male and lifelong resident of Galloway Township, New Jersey. He is a high school graduate, single with no children. Barber advised on the day of his PSI interview that he secured employment at P.F. Chang's in Tropicana.

The defendant reported to be in good overall mental and physical health. He acknowledged the present use of marijuana. He was referred to TASC for an evaluation scheduled 11/10/22 with Brenda Vandunk. Per attached TASC evaluation, the client meets the ASAM Criteria's 3rd Edition, for Level 1 Outpatient Services. A supportive self-help network, such as AA/NA, or other alternative supportive networks, would also be beneficial to assist in maintaining abstinence and recovery. Barber has never been required to attend treatment and/or counseling for any addictions.

As an adult, the defendant has six known arrests/complaints across 3 states: Ohio, Florida, and New Jersey, with no noted prior convictions. The instant matters will represent the defendant's first and second known indictable convictions.

Barber has pending charges out of Atlantic County Central Municipal Court for Harassment with no scheduled events. He also has an active bench warrant out of Belmont County, Ohio for Failure to Appear. A voicemail was left (740-695-7933) for an update on the status of the BW.

Barber has a minimal prior offense record, and he is not viewed as a significant threat to the community if he is released under probation supervision. If sentenced in accordance with the proposed plea agreement, conditions of probation may include random urine screens, obtain/maintain gainful employment, TASC evaluation and follow recommendations, mental health evaluation and follow up, anger management, and paying mandatory fines/fees and restitution.

TEAM LEADER / PROBATION OFFICER Carly Wright	TEAM LEADER / PROBATION OFFICER SIGNATURE	DATE
SUPERVISOR LUKE WEPY	SUPERVISOR SIGNATURE	DATE

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## APPROVED FOR SENTENCING



## Victim #1

1. Case Information					
Defendant's Last Name BARBER		Defendant's First Name DEVON		Defendant's Middle Name T	
Indictment / Accusation / Complaint Number 22-09-01413-I		PROMIS / GAVEL Number 22-002292-001		SBI Number 542255G	
2. Victim Personal Information					
Victim's Last Name Hardemon		Victim's First Name Joseph		Victim's Middle Name	
Address: Street *****			City *****	State *****	Zip Code *****
Home / Business Phone *****	Cell Phone Number *****	E-mail Address *****			
Date of Birth	Current Age	Juvenile at Time of Offense <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Age at Time of Offense	Current Offense Includes DV or Sex Offense <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Relationship to Defendant (if any) None
3. Victim Statement					
Victim Contacted for Statement <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date Victim Contacted 10/26/2022	Victim Witness Advocate Contacted <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Date Victim Witness Advocate Contacted	
Victim Responded <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Victim Statement / Letter Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If Yes, please see Attachments (redaction required). If No, please see Victim Statement section below. Did the Victim express interest in attending sentencing? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown			
Victim Statement (Please redact all victim personal identifiers from the description as this section is not redacted) No response received.					
4. Victim Medical Information					
Did the Victim report any medical issues associated with the present offense? If Yes, please complete the section below.			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Description of Reported Medical Issues Associated With the Present Offense (Please redact all victim personal identifiers from the description as this section is not redacted) Per discovery, victim Joseph advised that when Devon punched him in the face (right cheek), he stumbled back injuring his right foot when he fell on it. Joseph's foot was swollen, and he was immobilized.					
5. Restitution					
Victim Restitution Requested?	If Yes, Amount Requested <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No .00	Prosecutor Restitution Recommended? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No .00	If Yes, Amount Recommended <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No .00	Joint & Several Recommended? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If Yes, Name(s) of Co-Defendant(s) (Last Name, First Name, Middle Initial)
Restitution Amount Payable to Victim (See Address Above) .00		Restitution Amount Payable to VCCO .00		VCCO Claim Number	
Restitution Payee/ Payee Name .00	Restitution Amount Payable to "OTHER" Payee Type Please Specify "OTHER" Payee Type				Payee Name
Payee Address: Street			City		State Zip Code
Payee Telephone	Reference Number	Comments			

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## APPROVED FOR SENTENCING



## Victim #2

1. Case Information					
Defendant's Last Name BARBER		Defendant's First Name DEVON		Defendant's Middle Name T	
Indictment / Accusation / Complaint Number 22-10-01440-I		PROMIS / GAVEL Number 22-002313-001		SBI Number 542255G	
2. Victim Personal Information					
Victim's Last Name Hardemon		Victim's First Name Joseph		Victim's Middle Name A	
Address: Street * * * *			City * * * *	State * * * *	Zip Code * * * *
Home / Business Phone * * * *		Cell Phone Number * * * *	E-mail Address * * * *		
Date of Birth	Current Age	Juvenile at Time of Offense <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Age at Time of Offense	Current Offense Includes DV or Sex Offense <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Relationship to Defendant (if any) None
3. Victim Statement					
Victim Contacted for Statement <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Date Victim Contacted 10/26/2022	Victim Witness Advocate Contacted <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Date Victim Witness Advocate Contacted
Victim Responded <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Victim Statement / Letter Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Did the Victim express interest in attending sentencing? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown	
Victim Statement (Please redact all victim personal identifiers from the description as this section is not redacted) No response received.					
4. Victim Medical Information					
Did the Victim report any medical issues associated with the present offense? If Yes, please complete the section below.			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Description of Reported Medical Issues Associated With the Present Offense (Please redact all victim personal identifiers from the description as this section is not redacted)					
5. Restitution					
Victim Restitution Requested? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		If Yes, Amount Requested .00	Prosecutor Restitution Recommended? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If Yes, Amount Recommended .00	Joint & Several Recommended? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Restitution Amount Payable to Victim (See Address Above) .00		Restitution Amount Payable to VCCO .00		VCCO Claim Number	
Restitution Payee / I .00	Restitution Amount Payable to "OTHER" .00	Please Specify "OTHER" Payee Type			Payee Name
Payee Address: Street			City		State Zip Code
Payee Telephone		Reference Number	Comments		

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## APPROVED FOR SENTENCING



## Victim #3

1. Case Information					
Defendant's Last Name BARBER		Defendant's First Name DEVON		Defendant's Middle Name T	
Indictment / Accusation / Complaint Number 22-10-01440-I		PROMIS / GAVEL Number 22-002313-001		SBI Number 542255G	
2. Victim Personal Information					
Victim's Last Name Hardemon		Victim's First Name Joseph		Victim's Middle Name	
Address: Street * * * *			City * * * *	State * * * *	Zip Code * * * *
Home / Business Phone * * * *	Cell Phone Number * * * *	E-mail Address * * * *			
Date of Birth	Current Age	Juvenile at Time of Offense <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Age at Time of Offense	Current Offense Includes DV or Sex Offense <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Relationship to Defendant (If any) None
3. Victim Statement					
Victim Contacted for Statement <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Date Victim Contacted 10/26/2022	Victim Witness Advocate Contacted <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Date Victim Witness Advocate Contacted	
Victim Responded <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Victim Statement / Letter Attached <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Did the Victim express interest in attending sentencing? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unknown			
Victim Statement (Please redact all victim personal identifiers from the description as this section is not redacted) No response received.					
4. Victim Medical Information					
Did the Victim report any medical issues associated with the present offense? If Yes, please complete the section below.			<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
Description of Reported Medical Issues Associated With the Present Offense (Please redact all victim personal identifiers from the description as this section is not redacted)					
5. Restitution					
Victim Restitution Requested? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If Yes, Amount Requested .00	Prosecutor Restitution Recommended? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If Yes, Amount Recommended .00	Joint & Several Recommended? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	If Yes, Name(s) of Co-Defendant(s) (Last Name, First Name, Middle Initial)
Restitution Amount Payable to Victim (See Address Above) .00		Restitution Amount Payable to VCCO .00		VCCO Claim Number	
Restitution Payee # .00	Restitution Amount Payable to "OTHER" Please Specify "OTHER" Payee Type			Payee Name	
Payee Address: Street			City		State
Payee Telephone	Reference Number	Comments			

Holding Cell CONFIDENTIAL ATL-22-002313 12/27/2022 10:13:11 AM Pg 20 of 25 Trans ID: CRM20221172006

# Superior Court of New Jersey

## ATLANTIC COUNTY ORDER FOR PRESENTENCE INVESTIGATION

TEAM: DACJ COMMITMENT # 284791CASE / DEF.# See BelowDEFENDANT Devon BarberIND. / ACC. / CO.# 

LKA-309 New Leaf Court

DATE ORDERED 10-26-22

Callaway NJ 08320

SENTENCE DATE 12-7-22

(609)569-3800

8:45 AM COURTROOM # 3

Email: Devon3Homeimprovement@gmail.com

PLEAD ORIG. GUILTY (a) PIJURY TRIAL RETRAXIT GUILTY NON-JURY TRIAL 

DEFENDANT:

FOUND GUILTY TO: 22-09-14137 CT-1 Agg ASSAULT 3° 6T30020002292.00122-10-14407 CT-1 Terroristic threats 3° 6T3002000233.001Rmg. cts/charges To Be DismissedDSTASC  MDCE  DL ABSTRACT  AVENEL  DEFENDANT MAY APPLY TO PTI BAIL: CONTINUED  MODIFIED / SET  NCWV; ROR/fw; PTS Release OrderTASC-11-10-22 at 9:00am w/ Brenda VanDunkALSTAttorney: ThunellClerk: DeCiccoProsecutor: SchafflerCSR: CSMARTThunell  
P.J.C.R. / J.S.C.

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**NOTICE:** This is a public document, which means the document as submitted will be available to the public upon request. Therefore, do not enter personal identifiers on it, such as Social Security number, driver's license number, vehicle plate number, insurance policy number, active financial account number, active credit card number or military status.



**New Jersey Judiciary  
Plea Form**

County ATL  
Prosecutor File Number 13003272

Defendant's Name: Devon T BARBER  
before Judge: Millics

List the charges to which you are pleading guilty:

Ind./Acc./Comp.#	Count	Nature of Offense	Degree	Statutory Maximum		
				Time	Fine	VCCO Assmt*
22-09-1413	1	Agg Ass	3rd	Max 5	15000	ncr
22-10-14400	1	Terroristic Threat	3rd	Max 5	15000	ncr
				Max 5	15000	ncr
				Total 10y 2	30000	200

Your total exposure as the result of this plea is:

Please Circle  
Appropriate  
Answer

2. a. Did you commit the offense(s) to which you are pleading guilty?  Yes  No

b. Do you understand that before the judge can find you guilty, you will have to tell the judge what you did that makes you guilty of the particular offense(s)?  Yes  No

3. Do you understand what the charges mean?  Yes  No

4. Do you understand that by pleading guilty you are giving up certain rights? Among them are:

a. The right to a jury trial in which the State must prove you guilty beyond a reasonable doubt?  Yes  No

b. The right to remain silent?  Yes  No

c. The right to confront the witnesses against you?  Yes  No

d. Do you understand that by pleading guilty **you are not waiving** your right to appeal (1) the denial of a motion to suppress physical evidence (R. 3:5-7(d)) or (2) the denial of acceptance into a pretrial intervention program (PTI) (R. 3:28-6(d))?  Yes  No

e. Do you further understand that by pleading guilty **you are waiving** your right to appeal the denial of all other pretrial motions except the following:  Yes  No

\* Victims of Crime Compensation Office Assessment

Revised Form Promulgated by 12/29/2020 Third Supplement to Directive #01-18, CN 10079

Defendant's Initials TD  
page 1 of 3

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5. Do you understand that if you plead guilty:

- You will have a criminal record?  Yes  No
- Unless the plea agreement provides otherwise, you could be sentenced to serve the maximum time in confinement, to pay the maximum fine and to pay the maximum Victims of Crime Compensation Office Assessment?  Yes  No
- You must pay a minimum Victims of Crime Compensation Office assessment of \$50 (\$100 minimum if you are convicted of a crime of violence) for each count to which you plead guilty? (Penalty is \$30 if offense occurred between January 9, 1986 and December 22, 1991 inclusive. \$25 if offense occurred before January 1, 1986.)  Yes  No
- If the offense occurred on or after February 1, 1993 but was before March 13, 1995, and you are being sentenced to probation or a State correctional facility, you must pay a transaction fee of up to \$1.00 for each occasion when a payment or installment payment is made? If the offense occurred on or after March 13, 1995 and the sentence is to probation, or the sentence otherwise requires payments of financial obligations to the probation division, you must pay a transaction fee of up to \$2.00 for each occasion when a payment or installment payment is made?  Yes  No
- If the offense occurred on or after August 2, 1993 you must pay a \$75 Safe Neighborhood Services Fund assessment for each conviction?  Yes  No
- If the offense occurred on or after January 5, 1994 and you are being sentenced to probation, you must pay a fee of up to \$25 per month for the term of probation?  Yes  No
- If the crime occurred on or after January 9, 1997 you must pay a Law Enforcement Officers Training and Equipment Fund penalty of \$30?  Yes  No
- You will be required to provide a DNA sample, which could be used by law enforcement for the investigation of criminal activity, and pay for the cost of testing?  Yes  No
- Computer Crime Prevention Fund Penalty, N.J.S.A. 2C:43-3.8 (L. 2009, c. 143). If the crime involves a violation of N.J.S.A. 2C:24-4b(3) (causes or permits child to engage in sexual act that is to be photographed or exhibited), if the crime was committed on or after February 1, 2018, N.J.S.A. 2C:24-4b(4) (photographs or films a child in sexual act), if the crime was committed on or after February 1, 2018, N.J.S.A. 2C:24-4b(5)(b) (knowingly possessing or knowingly viewing child pornography), N.J.S.A. 2C:24-4.1 (leader of a child pornography network), if the crime was committed on or after February 1, 2018, N.J.S.A. 2C:34-3 (selling, distributing or exhibiting obscene material to a person under age 18) or an offense involving computer criminal activity in violation of any provision of Title 2C, chapter 20, you will be assessed a mandatory penalty as listed below for each offense for which you pled guilty?
  - \$2,000 in the case of a 1st degree crime
  - \$1,000 in the case of a 2nd degree crime
  - \$ 750 in the case of a 3rd degree crime
  - \$ 500 in the case of a 4th degree crime
  - \$ 250 in the case of a disorderly persons or petty disorderly persons offense
 Total CCPF Penalty \$ \_\_\_\_\_

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6. Do you understand that the court could, in its discretion, impose a minimum time in confinement to be served before you become eligible for parole, which period could be as long as one half of the period of the custodial sentence imposed?  Yes  No

7. Did you enter a plea of guilty to any charges that require a mandatory period of parole ineligibility or a mandatory extended term?  Yes  No

a. If you are pleading guilty to such a charge, the minimum mandatory period of parole ineligibility is \_\_\_\_\_ years and \_\_\_\_\_ months (fill in the number of years/months) and the maximum period of parole ineligibility can be \_\_\_\_\_ years and \_\_\_\_\_ months (fill in the number of years/months) and this period cannot be reduced by good time, work, or minimum custody credits.

b. If you are pleading guilty to such a charge, the minimum mandatory extended term is \_\_\_\_\_ years and \_\_\_\_\_ months (fill in the number of years/months) and the maximum mandatory extended term can be \_\_\_\_\_ years and \_\_\_\_\_ months (fill in the number of years/months).

8. Are you pleading guilty to a crime that contains a presumption of imprisonment which means that it is almost certain that you will go to state prison?  Yes  No

9. Are you presently on probation or parole?

a. Do you realize that a guilty plea may result in a violation of your probation or parole?  Yes  No  Yes  No  NA

10. Are you presently serving a custodial sentence on another charge?

a. Do you understand that a guilty plea may affect your parole eligibility?  Yes  No  Yes  No  NA

11. Do you understand that if you have plead guilty to, or have been found guilty on other charges, or are presently serving a custodial term and the plea agreement is silent on the issue, the court may require that all sentences be made to run consecutively?  Yes  No  NA

12. List any charges the prosecutor has agreed to recommend for dismissal:  
Ind/Acc/Compl.# Count Nature of Offense and Degree  
0209-1413 411 other counts

13. Specify any sentence the prosecutor has agreed to recommend:

3 years PROBATION - credit TIME SERVED  
Defendant released on plea date - 10/06/23  
MONITORING - Probation - MENTAL  
HEALTH EVAL + FOLLOW UP - ANGER MGT  
NO CONTACT VICTIM - TASC eval + Follow up  
Waive right to appeal

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14. Has the prosecutor promised that he or she will NOT:

- Speak at sentencing?  Yes  No

- Seek an extended term of confinement?  Yes  No

If yes, was this promise or agreement part of a negotiated plea where the prosecutor represents you are otherwise eligible to receive a mandatory extended term for repeat drug offenders and the prosecutor has agreed to request a period of incarceration or parole ineligibility that is less than what would be required for an extended term?

- Seek a stipulation of parole ineligibility?  Yes  No

15. Are you aware that you must pay restitution if the court finds there is a victim who has suffered a loss and if the court finds that you are able or will be able in the future to pay restitution?  Yes  No  NA

16. Do you understand that if you are a public office holder or employee, you can be required to forfeit your office or job by virtue of your plea of guilty?  Yes  No  NA

17. a. Are you a citizen of the United States?  Yes  No

If you have answered "No" to this question, you must answer Questions 17b – 17f. If you have answered "Yes" to this question, proceed to Question 18

b. Do you understand that if you are not a citizen of the United States, this guilty plea may result in your removal from the United States and/or stop you from being able to legally enter or re-enter the United States?  Yes  No

c. Do you understand that you have the right to seek individualized advice from an attorney about the effect your guilty plea will have on your immigration status?  Yes  No

d. Have you discussed with an attorney the potential immigration consequences of your plea? If the answer is "No," proceed to question 17e. If the answer is "Yes," proceed to question 17f.  Yes  No

e. Would you like the opportunity to do so?  Yes  No

f. Having been advised of the possible immigration consequences and of your right to seek individualized legal advice on your immigration consequences, do you still wish to plead guilty?  Yes  No

18. a. Do you understand that pursuant to the rules of the Interstate Compact for Adult Offender Supervision if you are residing outside the State of New Jersey at the time of sentencing, or upon entry of a guilty plea if a guilty plea is a condition of admission to the Pretrial Intervention Program, that return to your residence may be delayed pending acceptance of the transfer of your supervision by your state of residence?  Yes  No

b. Do you also understand that pursuant to the same Interstate Compact transfer of your supervision to another state may be denied or restricted by that state at any time after sentencing, or upon entry of a guilty plea if a guilty plea is a condition of admission to the Pretrial Intervention Program, if that state determines you are required to register as a sex offender in that state or if New Jersey has required you to register as a sex offender?  Yes  No

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19. Have you discussed with your attorney the legal doctrine of merger?  Yes  No  NA

20. Are you giving up your right at sentence to argue that there are charges you pleaded guilty to for which you cannot be given a separate sentence?  Yes  No  NA

21. List any other promises or representations that have been made by you, the prosecutor, your defense attorney, or anyone else as a part of this plea of guilty:

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22. Have any promises other than those mentioned on this form, or any threats, been made in order to cause you to plead guilty?  Yes  No

23. a. Do you understand that the judge is not bound by any promises or recommendations of the prosecutor and that the judge has the right to reject the plea before sentencing you and the right to impose a more severe sentence?  Yes  No

b. Do you understand that if the judge decides to impose a more severe sentence than recommended by the prosecutor, that you may take back your plea?  Yes  No

c. Do you understand that if you are permitted to take back your plea of guilty because of the judge's sentence, that anything you say in furtherance of the guilty plea cannot be used against you at trial?  Yes  No

24. Are you satisfied with the advice you have received from your lawyer?  Yes  No

25. Do you have any questions concerning this plea?  Yes  No

Date 10/26/22 Defendant s/ BARBER, DEVON

Defense Attorney s/

Prosecutor s/ dkl for Paige Jedlicka

This plea is the result of the judge's conditional indications of the maximum sentence he or she would impose independent of the prosecutor's recommendation. Accordingly, the "Supplemental Plea Form for Non-Negotiated Pleas" has been completed.

