



***HARNETT COUNTY SHERIFF'S  
OFFICE***

***NEWS RELEASE***

***April 1, 2019***

### ARREST REPORT

<b>AGENCY INFO</b>	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 03/29/2019 Hrs: 07:28		OCA 19001824							
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 0210NBF	Arrest Tract 1183	Residence Tract 1147		Arrest Number							
<b>ARRESTEE INFORMATION</b>	Name (Last, First, Middle) PEREZ ARISTEO		DOB Mo Date Year	Age 29	Race W	Sex M	Place of Birth MEXICO	Country of Citizenship MEX					
	Current Address 186 FLETCHER RD COATS NC 27521-		Phone	Occupation		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown		<input type="checkbox"/> Non-Resident					
	Employer's Name		Address		Phone								
	Also Known As (Alias Names)		Hgt 56	Wgt 150	Hair BLACK	Eye BROWN	Skin Tone MEDIUM	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk					
	Scars, Marks, Tattoos		Social Security #		OLN	State NC	Misc. # and Type Driver's License						
	Nearest Relative Name		Address		Phone								
<b>ARREST INFO</b>	If Armed, Type of Weapon		<input type="checkbox"/> On-View <input type="checkbox"/> Order for Arrest	<input type="checkbox"/> Criminal Summons <input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant	Place of Arrest 175 BAIN ST LILLINGTON								
	Charge # 1 FELONY POSSESS SCHEDULE I CONTROLLED SUBSTANCE		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1810	Offense Jurisdiction (If not arresting Agency) ANGIER POLICE DEPARTMENT		Statute# 90-95(A)(3)	Warr Date Mo Date Year 03/29/2019				
	Charge # 2		<input type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts	DCI Code	Offense Jurisdiction (If not arresting agency)		Statute#	Warr Date Mo Date Year				
	Charge # 3		<input type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts	DCI Code	Offense Jurisdiction (If not arresting agency)		Statute#	Warr Date Mo Date Year				
<b>VEH. INFO.</b>	VYR	Make	Model	Style	Color	Lic/Lis	VIN						
	Vehicle: 1: <input type="checkbox"/> Left at Scene <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured Date/Time _____ Hrs _____ 2: <input type="checkbox"/> Released to other at owners request <input type="checkbox"/> Name of Other _____ 3: <input type="checkbox"/> Impounded <input type="checkbox"/> Place of storage _____ Inventory on File? <input type="checkbox"/>												
<b>CONFINED BOND INFO</b>	Date/Time Confined 03/29/2019 Hrs: 07:28		Place Confined HARNETT COUNTY DETENTION CENTER			Committing Magistrate							
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other		Amt. Bond \$5,000.00	Trial Date 03/29/2019	Court of 9999		City LILLINGTON						
Assisting Officer Name/ID Number			Released By Name/Dept/ID				Date/Time Released Hrs:						
<b>Status Codes</b>	L-Lost S-Stolen R-Recovered D-Damaged Z-Seized B-Burned C-Counterfeit/Forged F-Found (Check "OJ" column if recovered for other jurisdiction)												
<b>DRUGS AT ARREST</b>	DCI	Status	Quantity	Type Measure	Suspected Type			Check up to 3 types of activity for each					
								Possess	Buy	Sale	Mfg.	Importing	Operating
								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>COMPLAINANT</b>	Name: CAPSHAW C R		Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>		Address: 55 NORTH BROAD ST WEST ANGIER NC 27501-			Phone: 919-639-2699					
	<b>NARRATIVE</b> ON 03/29/2019, I DEPUTY S.M. CHAVIS #D23 RESPONDED TO THE HARNETT COUNTY DETENTION CENTER FOR A SUBJECT INSIDE THE DETENTION CENTER WHO HAS A WARRANT FOR ARREST.  THE SUBJECT WAS IDENTIFIED AS ARISTEO PEREZ WHO HAS A WARRANT FOR ARREST FOR (F) FELONY POSSESSION OF SCHEDULE 1 CS.												
<b>STATUS</b>	Arresting Officer Signature/ID # CHAVIS SEAN MICHAEL SMCH			Date/Time Submitted Mo Date Year 03/29/2019 Hrs: 08:22		Supervisor Signature							
	Case Status: <input type="checkbox"/> Further Inv. <input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed		Case Disposition: <input checked="" type="checkbox"/> Cleared By Arrest/No Supplement Needed <input type="checkbox"/> Arrest/No Investigation			Arrestee Signature							

# ADDITIONAL NARRATIVE

AGENCY: HARNETT COUNTY SHERIFFS OFFICE	ORI #: NC0430000	Date/Time On Scene: 03/29/2019	CASE #: 19001824
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ARISTEO WAS BROUGHT BEFORE THE MAGISTRATE AND PROCESSED IN BOOKING.  
CLEAR NCIC  
NOTHING FURTHER AT THIS TIME.

REPORTING OFFICER \_\_\_\_\_ ID \_\_\_\_\_

APPROVING SUPERVISOR \_\_\_\_\_ ID \_\_\_\_\_

### ARREST REPORT

<b>AGENCY INFO</b>	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 03/29/2019 Hrs: 10:40		OCA 19001829				
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 0214NBM	Arrest Tract 1183	Residence Tract		Arrest Number 1				
<b>INFORMATION</b>	Name (Last, First, Middle) GILBERT JAMEY GLENN		Age 41	Race W	Sex M	Place of Birth DUNN	Country of Citizenship US			
	Current Address 31 SOUTH RAIROAD ST COATS 27521-			Occupation SELF EMPLOYED		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name		Address		Phone					
<b>ARRESTEE INFORMATION</b>	Also Known As (Alias Names)		Hgt 510	Wgt 165	Hair	Eye BROWN	Skin Tone LIGHT	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk		
	Scars, Marks, Tattoos TAT TATTOOS TAT RF ARM KEYGAN 17		Social Security # 245-39-6623	OLN 9986676	State	Misc. # and Type				
<b>ARREST INFO</b>	If Armed, Type of Weapon 40		<input type="checkbox"/> On-View <input checked="" type="checkbox"/> Order for Arrest	<input type="checkbox"/> Criminal Summons <input type="checkbox"/> Citation <input type="checkbox"/> Warrant	Place of Arrest HARNETT JAIL LILLINGTON					
	Charge # 1 Possessing/concealing Stolen Property	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 01	DCI Code 1330	Offense Jurisdiction (If not arresting Agency) WAKE		Statute# 20-106	Warr Date Mo Date Year 02/19/2019		
	Charge # 2 Drug Violations	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 01	DCI Code 1810	Offense Jurisdiction (If not arresting agency)		Statute# 90-95(D)(4)	Warr Date Mo Date Year 02/19/2019		
	Charge # 3	<input type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts	DCI Code	Offense Jurisdiction (If not arresting agency)		Statute#	Warr Date Mo Date Year		
<b>VEH. INFO.</b>	VYR	Make	Model	Style	Color	Lic/Lis	VIN			
	Vehicle: 1: <input type="checkbox"/> Left at Scene <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured Date/Time _____ Hrs _____ 2: <input type="checkbox"/> Released to other at owners request <input type="checkbox"/> Name of Other _____ 3: <input type="checkbox"/> Impounded <input type="checkbox"/> Place of storage _____ Inventory on File? <input type="checkbox"/>									
<b>CONFINED BOND INFO</b>	Date/Time Confined 03/29/2019 Hrs: 11:00		Place Confined HARNETT JAIL		Commitment Magistrate					
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other	Amt. Bond \$20,000.00	Trial Date 04/02/2019	Court of HARNETT		City LILLINGTON				
	Assisting Officer Name/ID Number			Released By Name/Dept/ID			Date/Time Released Hrs:			
<b>DRUGS AT ARREST</b>	Status Codes L-Lost S-Stolen R-Recovered D-Damaged Z-Seized B-Burned C-Counterfeit/Forged F-Found (Check "OJ" column if recovered for other jurisdiction)									
	DCI	Status	Quantity	Type Measure	Suspected Type	Check up to 3 types of activity for each				
					Possess	Buy	Sale	Mfg.	Importing	Operating
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>COMPLAINANT</b>	Name: Complainant <input type="checkbox"/> Victim <input type="checkbox"/>			Address: WAKE COUNTY CLERK OF COURT MAIN ST RALEIGH 27606-			Phone:			
	NARRATIVE ON 3/29/2019 AT 1040 HOURS, SUBJECT WAS SERVED WITH TWO OUTSTANDING ORDER FOR ARREST. SUBJECT WAS GIVEN A \$20,000 SECURED BOND WITH A COURT DATE OF 4/2/2019 ISSUED BY JUDGE LEE. SUBJECT WAS RELEASED TO THE HARNETT COUNTY JAIL									
<b>STATUS</b>	Arresting Officer Signature/ID # HALLMAN BOBBY DEAN BDH		Date/Time Submitted Mo Date Year 03/29/2019 Hrs: 11:00		Supervisor Signature					
	Case Status: <input type="checkbox"/> Further Inv. <input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed		Case Disposition: <input checked="" type="checkbox"/> Cleared By Arrest/No Supplement Needed <input type="checkbox"/> Arrest/No Investigation			Arrestee Signature				

### ARREST REPORT

<b>AGENCY INFO</b>	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 03/29/2019 Hrs: 14:56		OCA 19001833						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 0218NBT	Arrest Tract 1183	Residence Tract 1183		Arrest Number						
<b>ARRESTEE INFORMATION</b>	Name (Last, First, Middle) BAKER CLAY THOMAS		Age 24	Race W	Sex M	Place of Birth NC	Country of Citizenship US					
	Current Address 662 BAILEY ROAD COATS NC 27521-			Occupation UNEMPLOYED		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident						
	Employer's Name		Address			Phone						
	Also Known As (Alias Names)		Hgt 511	Wgt 185	Hair BROWN	Eye BLUE	Skin Tone LIGHT	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk				
	Scars, Marks, Tattoos		Social Security #		State NC	Misc. # and Type						
Nearest Relative Name		Address										
<b>ARREST INFO</b>	If Armed, Type of Weapon		<input type="checkbox"/> On-View <input type="checkbox"/> Order for Arrest	<input type="checkbox"/> Criminal Summons <input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant	Place of Arrest 175 BAIN ST LILLINGTON							
	Charge # 1 OBTAIN PROPERTY FALSE PRETENSE	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1120	Offense Jurisdiction (If not arresting Agency)		Statute# 14-100	Warr Date Mo Date Year 03/06/2019				
	Charge # 2 FORGERY OF INSTRUMENT	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1015	Offense Jurisdiction (If not arresting agency)		Statute# 14-119	Warr Date Mo Date Year 03/06/2019				
	Charge # 3 UTTERING FORGED INSTRUMENT	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1015	Offense Jurisdiction (If not arresting agency)		Statute# 14-120	Warr Date Mo Date Year 03/06/2019				
<b>VEH. INFO.</b>	VYR	Make	Model	Style	Color	Lic/Lis	VIN					
	Vehicle: 1: <input type="checkbox"/> Left at Scene <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured Date/Time _____ Hrs _____ 2: <input type="checkbox"/> Released to other at owners request <input type="checkbox"/> Name of Other _____ 3: <input type="checkbox"/> Impounded <input type="checkbox"/> Place of storage _____ Inventory on File? <input type="checkbox"/>											
<b>CONFINED BOND INFO</b>	Date/Time Confined 03/29/2019 Hrs: 15:15		Place Confined HARNETT COUNTY DETENTION CENTER			Committing Magistrate						
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other		Amt. Bond \$15,000.00	Trial Date 04/01/2019	Court of 9999		City LILLINGTON					
	Assisting Officer Name/ID Number			Released By Name/Dept/ID			Date/Time Released Hrs:					
<b>Status Codes</b>	L-Lost S-Stolen R-Recovered D-Damaged Z-Seized B-Burned C-Counterfeit/Forged F-Found (Check "OJ" column if recovered for other jurisdiction)											
<b>DRUGS AT ARREST</b>	DCI	Status	Quantity	Type Measure	Suspected Type		Check up to 3 types of activity for each					
							Possess	Buy	Sale	Mfg.	Importing	Operating
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>COMPLAINANT</b>	Name: SHAVER K E		Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address:		Phone:				
	<p>ON 03/29/2019 I, DEPUTY C A MARCO, WAS DISPATCHED TO THE HARNETT COUNTY DETENTION CENTER TO SERVE A WARRANT ON AN INMATE.</p> <p>CLAY THOMAS BAKER WAS SERVED AND BROUGHT BEFORE THE MAGISTRATE WITHOUT INCIDENT.</p> <p>FIRST APPEARANCE WAS SET FOR 04/01/2019. A SECURED BOND OF \$15,000.00 WAS GIVEN.</p>											
<b>STATUS</b>	Arresting Officer Signature/ID # MARCO CHRISTOPHER CAMA			Date/Time Submitted Mo Date Year 03/29/2019 Hrs: 15:45		Supervisor Signature						
	Case Status: <input type="checkbox"/> Further Inv. <input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed		Case Disposition: <input type="checkbox"/> Cleared By Arrest/No Supplement Needed <input checked="" type="checkbox"/> Arrest/No Investigation				Arrestee Signature					

# ADDITIONAL NARRATIVE

AGENCY: HARNETT COUNTY SHERIFFS OFFICE	ORI #: NC0430000	Date/Time On Scene: 03/29/2019	CASE #: 19001833
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CLEAR NCIC

NOTHING FUTHER AT THIS TIME

REPORTING OFFICER

ID

APPROVING SUPERVISOR

ID