



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

***NEWS RELEASE***

***August 12, 2020***

### ARREST REPORT

<b>AGENCY INFO</b>	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 08/11/2020 Hrs: 16:44		OCA 17005182					
	<input checked="" type="checkbox"/> Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) 4871NBN	Arrest Tract 1183	Residence Tract 1183	Arrest Number						
<b>ARRESTEE INFORMATION</b>	Name (Last, First, Middle) MOBLEY AHMAD RASHAD MACK		D.O.B. Mo Date Year	Age 21	Race B	Sex M	Place of Birth FL	Country of Citizenship US			
	Current Address 10669 NORTHWEST GOODMAN DRIVE BRISTOL FL 32321-		Phone	Occupation LABORER		<input type="checkbox"/> Resident <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> Non-Resident					
	Employer's Name		Address		Phone						
	Also Known As (Alias Names)		Hgt 508	Wgt 160	Hair BLACK	Eye BROWN	Skin Tone DARK	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos		Social Security #		OLN	State	Misc. # and Type				
	Nearest Relative Name TENIKA MOBLEY		Address 127 BIRCH AVE SPRING LAKE NC 28390-		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 STREET LILLINGTON						
	Charge # 1 STAT RAPE/SEX OFFENSE	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 36B	Offense Jurisdiction (If not arresting Agency)		Statute# 14-27.7A (A)	Warr Date Mo Date Year 04/25/2018			
	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>	YVR	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 08/11/2020 Hrs: 17:02		Place Confined HARNETT COUNTY DETENTION CENTER			Committing Magistrate R. HOLDER					
	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 \$750,000.00	Trial Date 08/12/2020	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: LEE J D		Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>		Address: 175 BAIN STREET LILLINGTON NC -			Phone: 910-893-9111			
	<b>NARRATIVE</b> ON 08/11/2020, I DEPUTY J.P. COX SERVED THREE WARRANTS FOR ARREST ON AHMAD RASHAD MOBLEY AT THE HARNETT COUNTY DETENTION CENTER AFTER HE WAS ARRESTED AND EXTRADITED FROM FLORIDA. AHMAD WAS PRESENTED TO THE MAGISTRATE ON DUTY AND PROCESSED INTO THE DETENTION CENTER WITHOUT INCIDENT. CLEAR NCIC. I HAVE NO FURTHER TO REPORT.										
<b>STATUS</b>	Arresting Officer Signature/ID # COX JONATHAN PHILLIP JPCO		Date/Time Submitted Mo Date Year 08/11/2020 Hrs: 17:10		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 08/11/2020 Hrs: 16:44		OCA 18000840
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 4871NBN	Arrest Tract 1183	Residence Tract 1183	Arrest Number 202008110002	

<b>ARRESTEE INFORMATION</b>	Name (Last, First, Middle) MOBLEY AHMAD RASHAD MACK		DOB Mo Date Year	Age 21	Race B	Sex M	Place of Birth FL	Country of Citizenship US		
	Current Address 10669 NORTHWEST GOODMAN DRIVE BRISTOL FL 32321-				Occupation LABORER	<input type="checkbox"/> Resident <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> Non-Resident				
	Employer's Name		Address			Phone				
	Also Known As (Alias Names)				Hgt 508	Wgt 160	Hair BLACK	Eye BROWN	Skin Tone DARK	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk
	Scars, Marks, Tattoos				Facial Scars #	OLN	State	Misc. # and Type		

<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 STREET LILLINGTON		
	Charge # 1 STAT RAPE/SEX OFFENSE	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 36B	Offense Jurisdiction (If not arresting Agency)	Statute# 14-27.7A (A)	Warr Date Mo Date Year 03/29/2018
	Charge # 2 INDECENT LIBERTIES WITH CHILD	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 11D	Offense Jurisdiction (If not arresting agency)	Statute# 14-202.1	Warr Date Mo Date Year 03/29/2018
	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>	YVR	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 08/11/2020 Hrs: 17:02	Place Confined HARNETT COUNTY DETENTION CENTER	Committing Magistrate R. HOLDER		
	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 \$750,000.00	Trial Date 08/12/2020	Court of HARNETT	City LILLINGTON
	Assisting Officer Name/ID Number		Released By Name/Dept/ID		Date/Time Released Hrs:

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)

<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"/>
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>COMPLAINANT</b>	Name: ELMORE S	Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>	Address: 175 BAIN STREET LILLINGTON NC -	Phone: 910-893-9111
--------------------	-------------------	---	---	------------------------

**NARRATIVE**

ON 08/11/2020, I DEPUTY J.P. COX SERVED A WARRANT FOR ARREST ON AHMAD RASHAD MOBLEY AT THE HARNETT COUNTY DETENTION CENTER AFTER HE WAS ARRESTED AND EXTRADITED FROM FLORIDA. AHMAD WAS PRESENTED TO THE MAGISTRATE ON DUTY AND PROCESSED INTO THE DETENTION CENTER WITHOUT INCIDENT. CLEAR NCIC. I HAVE NO FURTHER TO REPORT.

<b>STATUS</b>	Arresting Officer Signature/ID # COX JONATHAN PHILLIP JPCO		Date/Time Submitted Mo Date Year 08/11/2020 Hrs: 17:10	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 08/11/2020 Hrs: 16:44		OCA 18001711						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 4871NBN	Arrest Tract 1183	Residence Tract 1183	Arrest Number 202008110002							
<b>ARRESTEE INFORMATION</b>	Name (Last, First, Middle) MOBLEY AHMAD RASHAD MACK			Age 21	Race B	Sex M	Place of Birth FL	Country of Citizenship US				
	Current Address 10669 NORTHWEST GOODMAN DRIVE BRISTOL FL 3232			Occupation LABORER	<input type="checkbox"/> Resident <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> Non-Resident							
	Employer's Name		Address			Phone						
	Also Known As (Alias Names)			Hgt 508	Wgt 160	Hair BLACK	Eye BROWN	Skin Tone DARK	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos			State	Misc. # and Type							
<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 STREET LILLINGTON							
	Charge # 1 STAT RAPE/SEX OFFENSE	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 36B	Offense Jurisdiction (If not arresting Agency)		Statute# 14-27.7A (A)	Warr Date Mo Date Year 03/29/2018				
	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>	YVR	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 08/11/2020 Hrs: 17:02		Place Confined HARNETT COUNTY DETENTION CENTER			Committing Magistrate R. HOLDER						
	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 \$750,000.00		Trial Date 08/12/2020	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
<b>COMPLAINANT</b>	Name: ELMORE S			Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: 175 BAIN STREET LILLINGTON NC -			Phone: 910-893-9111		
	<b>NARRATIVE</b> ON 08/11/2020, I DEPUTY J.P. COX SERVED THREE WARRANTS FOR ARREST ON AHMAD RASHAD MOBLEY AT THE HARNETT COUNTY DETENTION CENTER AFTER HE WAS ARRESTED AND EXTRADITED FROM FLORIDA. AHMAD WAS PRESENTED TO THE MAGISTRATE ON DUTY AND PROCESSED INTO THE DETENTION CENTER WITHOUT INCIDENT. CLEAR NCIC. I HAVE NO FURTHER TO REPORT.											
<b>STATUS</b>	Arresting Officer Signature/ID # COX JONATHAN PHILLIP JPCO			Date/Time Submitted Mo Date Year 08/11/2020 Hrs: 17:10		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						