



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

***NEWS RELEASE***

***August 20, 2019***

### ARREST REPORT

<b>AGENCY INFO</b>	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000		Date/Time of Arrest Mo Date Year 08/19/2019 Hrs: 23:32		OCA 19004913						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>		Fingerprint Card Check Digit # (CKN) 1721NBF		Arrest Tract 1183		Residence Tract 1164		Arrest Number				
<b>ARRESTEE INFORMATION</b>	Name (Last, First, Middle) MURPHY ROBERT ISRAEL				D.O.B. Mo Date Year		Age 29	Race B	Sex M	Place of Birth NC	Country of Citizenship US		
	Current Address 6902 BROWNWOOD DRIVE HOLLY SPRINGS NC 27540-				Phone		Occupation UNKNOWN OR NOT STATED		<input type="checkbox"/> Resident <input type="checkbox"/> Unknown	<input checked="" type="checkbox"/> Non-Resident			
	Employer's Name				Address				Phone				
	Also Known As (Alias Names) JR				Hgt 602	Wgt 200	Hair	Eye	Skin Tone MBR	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos				Social Security #		OLN		State NC	Misc. # and Type			
Nearest Relative Name				Address				Phone					
<b>ARREST INFO</b>	If Armed, Type of Weapon 40		<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 39 C L WILKINS 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) WAKE		Statute# 14-100	Warr Date Mo Date Year 08/09/2019				
	Charge # 2 MISDEMEANOR LARCENY		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 0690	Offense Jurisdiction (If not arresting agency) WAKE		Statute# 14-72(A)	Warr Date Mo Date Year 08/09/2019				
	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 08/19/2019 Hrs: 11:59		Place Confined HARNETT COUNTY JAI;				Committing Magistrate C MECLEAN						
	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 \$1,500.00		Trial Date 08/23/2019		Court of DISTRICT		City RALEIGH				
	Assisting Officer Name/ID Number				Released By Name/Dept/ID				Date/Time Released Hrs:				
Status Codes (Check "OJ" column if recovered for other jurisdiction) L-Lost S-Stolen R-Recovered D-Damaged Z-Seized B-Burned C-Counterfeit/Forged F-Found													
<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: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>				Address: 114 NORTH MAIN STREET FUQUAY VARINA NC				Phone: 919-552-3191				
	<p>ON 08-19-2019, I ARRESTED ROBERT MURPHY AT THE HARNETT COUNTY JAIL FOR THE ABOVE LISTED CHARGES. SAME WAS PROCESSED AND CLEARED NCAWARE</p>												
<b>STATUS</b>	Arresting Officer Signature/ID # BRITT MICHAEL RUDOLPH MRB				Date/Time Submitted Mo Date Year 08/19/2019 Hrs: 11:59		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 08/19/2019 Hrs: 21:14		OCA 19004911					
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/> Fingerprint Card Check Digit # (CKN) 1719NBB	Arrest Tract 1183	Residence Tract 1104		Arrest Number						
<b>PERSONAL INFORMATION</b>	Name (Last, First, Middle) JACKSON KATHIE DENISE		DOB Mo Date Year	Age 34	Race W	Sex F	Place of Birth NC	Country of Citizenship US			
	Current Address 2406 ERWIN RD ERWIN NC 28339-			Occupation PROFESSIONAL	<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident		Employer's Name				
	Also Known As (Alias Names)		Hgt 410	Wgt 97	Hair BROWN	Eye HAZEL	Skin Tone FAIR	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk			
<b>ARRESTEE II</b>	Scars, Marks, Tattoos		Social Security #	OLN	State NC	Misc. # and Type					
	If Armed, Type of Weapon 97		<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						
<b>ARREST INFO</b>	Charge # 1 IDENTITY THEFT	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1150	Offense Jurisdiction (If not arresting Agency) NC SHP TROOP A DISTRICT 8		Statute# 14-113.20	Warr Date Mo Date Year 08/16/2019			
	Charge # 2 DWLR NOT IMPAIRED REV	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 1620	Offense Jurisdiction (If not arresting agency) NC SHP TROOP A DISTRICT 8		Statute# 20-28(A)	Warr Date Mo Date Year 08/16/2019			
	Charge # 3 RESISTING PUBLIC OFFICER	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 2650	Offense Jurisdiction (If not arresting agency) NC SHP TROOP A DISTRICT 8		Statute# 14-223	Warr Date Mo Date Year 08/16/2019			
<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 08/19/2019 Hrs: 21:25		Place Confined HARNETT COUNTY JAIL			Committing Magistrate D. MCLEAN					
	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 \$7,500.00	Trial Date 08/22/2019	Court of DISTRICT		City BEAUFORT				
	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)										
	DCI	Status	Quantity	Type Measure	Suspected Type		Check up to 3 types of activity for each				
<b>DRUGS AT ARREST</b>						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: WILSON H D		Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>		Address: 5347 US HWY 70 WEST MOREHEAD NC 28557-			Phone: 252-726-5766			
	<b>NARRATIVE</b> ON THIS DATE AND TIME THE DEFENDANT LISTED ABOVE WAS SERVED AND PROCESSED ON THREE OUTSTANDING WFA'S OUT OF CARTERET COUNTY, CONSISTING OF THE ABOVE LISTED CHARGES. THE DEFENDANT WAS PRESENTED TO THE PRESIDING MAGISTRATE, D. MCLEAN WHO ISSUED A SECURED BOND OF \$7,500.00. THE DEFENDANT WAS PLACED INTO THE CUSTODY OF THE HARNETT COUNTY JAIL AT THIS TIME AND WAS CLEAR FROM NCIC AT THIS TIME.										
<b>STATUS</b>	Arresting Officer Signature/ID # ELMORE SPENCER JOE SJE		Date/Time Submitted Mo Date Year 08/19/2019 Hrs: 21:30		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 08/19/2019 Hrs: 19:34		OCA 19004908
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 1718NBF	Arrest Tract 1183	Residence Tract 10		Arrest Number

<b>ARRESTEE INFORMATION</b>	Name (Last, First, Middle) WAGNER RUSTY DWAYNE		DOB Mo Date Year	Age 30	Race W	Sex M	Place of Birth TENN	Country of Citizenship US	
	Current Address 2809 WOODSIDE DRIVE CLAYTON NC 27527			Occupation ALL OTHER		<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 510	Wgt 200	Hair OTHER	Eye HAZEL	Skin Tone FAR	Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk
	Scars, Marks, Tattoos TAT TATTOOS TAT UR ARM TICKET 17					State NC	Misc. # and Type		

<b>ARREST INFO</b>	If Armed, Type of Weapon 40		<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 FAIL RETURN HIRED MV >\$4000	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1190	Offense Jurisdiction (If not arresting Agency) WAKE	Statute# 14-167	Warr Date Mo Date Year 05/24/2019
	Charge # 2 FAILURE TO APPEAR ON FELONY	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 2640	Offense Jurisdiction (If not arresting agency) WAKE	Statute# 15A-543(B)	Warr Date Mo Date Year 05/24/2019
	Charge # 3 FAILURE TO APPEAR ON MISDEMEANOR	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 2640	Offense Jurisdiction (If not arresting agency) WAKE	Statute# 15A-543(C)	Warr Date Mo Date Year 05/24/2019

<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 08/19/2019 Hrs: 19:49	Place Confined HARNETT COUNTY JAIL	Committing Magistrate D MCLEAN		
	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 \$30,000.00	Trial Date 09/16/2019	Court of DSITRICT	City RALEIGH
	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)

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>COM-PLAINANT</b>	Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>		Address: 6716 SIX FORKS ROAD RALEIGH NC 27615-		Phone:
	M. STYERS RALEIGH OFFICER				

**NARRATIVE**  
 ON 08-19-2019, I ARRESTED RUSTY WAGNER AT THE HARNETT COUNTY JAIL WHERE HIS BONDSWOMAN TURNED HIM BACK IN. HE WAS PROCESSED ON THE LISTED ABOVE OUTSTANDING WARRANT FOR ARREST AND 2 FAILURE TO APPEAR ON A RELEASE ORDER. ALL WERE OUT OF WAKE COUNTY. THE WAKE COUNT CHARGES HE FAILED TO APPEAR ON WERE F- OBTAIN PROPERTY BY FALSE PRETENSE AND M- POSSESSION OF STOLEN GOODS/PROPERTY. HE FAILED TO APPEAR ON 05-24-19 SAME WAS PROCESSED AND CLEARED NCAWARE.

<b>STATUS</b>	Arresting Officer Signature/ID # BRITT MICHAEL RUDOLPH MRB		Date/Time Submitted Mo Date Year 08/19/2019 Hrs: 19:54	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 08/19/2019	Hrs: 10:55	OCA 19004820
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 1714NBV	Arrest Tract 1183	Residence Tract 1116	Arrest Number	

<b>ARRESTEE INFORMATION</b>	Name (Last, First, Middle) COOPER BARBARA CONNER		DOB	Age 63	Race B	Sex F	Place of Birth PA	Country of Citizenship US	
	Current Address 90 VAIL CT. SANFORD NC 27332-		Phone	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 502	Wgt 154	Hair BLACK	Eye BROWN	Skin Tone MDARK	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk	
	Scars, Marks, Tattoos		Social Security #		OLN	State NC	Misc. # and Type		

<b>ARREST INFO</b>	If Armed, Type of Weapon 97		<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 MANUFACTURE SCHEDULE VI CONTROLLED SUBSTANCE	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1810	Offense Jurisdiction (If not arresting Agency)		Statute# 90-95(A)(1)	Warr Date Mo Date Year 08/19/2019
	Charge # 2 EQUIPMENT/PARAPHERNALIA - POSSESSING/CONCEALING	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1834	Offense Jurisdiction (If not arresting agency)		Statute# 90-108(A)(7)	Warr Date Mo Date Year 08/19/2019
	Charge # 3 POSS W/ MANUF/SELL/DEL SCHEDULE VI CONTROLLE	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1810	Offense Jurisdiction (If not arresting agency)		Statute# 90-95(A)(1)	Warr Date Mo Date Year 08/19/2019

<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 08/19/2019	Hrs: 10:50	Place Confined HARNETT COUNTY JAIL	Committing Magistrate B. HOYLE			
	Type Bond <input type="checkbox"/> Written Promise <input checked="" type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other	Amt. Bond \$10,000.00		Trial Date 08/21/2019	Court of DISTRICT		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)						
	DCI	Status	Quantity	Type Measure	Suspected Type		

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>COM-PLAINANT</b>	Name: WINSTEAD B. W.		Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>	Address: 175 BAIN ST. LILLINGTON NC 27546-		Phone: 910-893-9111
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<b>NARRATIVE</b>	ON THE DATE AND TIME LISTED ABOVE, I DEPUTY D.E. ABNEY MET WITH THE DEFENDANT AT THE HARNETT COUNTY SHERIFF'S OFFICE IN REFERENCE TO TURNING HERSELF IN ON THE ABOVE, LISTED CHARGES. SHE WAS TAKEN INTO CUSTODY AND WAS PROCESSED WITHOUT INCIDENT.					
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<b>STATUS</b>	Arresting Officer Signature/ID # ABNEY DAVID EDWARD      DEA		Date/Time Submitted Mo Date Year 08/19/2019	Hrs: 11:05	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		

# ARREST REPORT

<b>AGENCY INFO</b>	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000		Date/Time of Arrest Mo Date Year 08/19/2019 Hrs: 12:40		OCA 19003111						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>		Fingerprint Card Check Digit # (CKN) 1717NBJ		Arrest Tract 1104		Residence Tract 1104		Arrest Number				
<b>ARRESTEE INFORMATION</b>	Name (Last, First, Middle) RAY ROKAYLA SHAREKA				Age 27		Race B	Sex F	Place of Birth NC		Country of Citizenship US		
	Current Address 100 EAST I ST. A ERWIN NC 28339-				Phone		Occupation MERCANTILE		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown		<input type="checkbox"/> Non-Resident		
	Employer's Name				Address		Phone						
	Also Known As (Alias Names) ROK RAY				Hgt 509	Wgt 200	Hair BLACK	Eye BROWN	Skin Tone DARK	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			
Nearest Relative Name				Address		Phone							
<b>ARREST INFO</b>	If Armed, Type of Weapon 97		<input type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons		Place of Arrest 100 A EAST I ST. ERWIN		<input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant						
	Charge # 1 FELONY CONSPIRACY		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 2690	Offense Jurisdiction (If not arresting Agency)		Statute# 14-2.4(A)	Warr Date Mo Date Year 08/14/2019				
	Charge # 2 ACCESSORY AFTER THE FACT		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 2690	Offense Jurisdiction (If not arresting agency)		Statute# 14-7	Warr Date Mo Date Year 08/14/2019				
	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"/> Unsecure 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 08/19/2019 Hrs: 13:25		Place Confined HARNETT COUNTY JAIL				Committing Magistrate B. HOYLE						
	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 \$1,000,000.00		Trial Date 08/21/2019		Court of DSITRICT		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"/>
<b>COMPLAINANT</b>	Name: ELMORE S. J.				Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>				Address: 175 BAIN ST. LILLINGTON NC 27546-				Phone: 910-893-9111
	<p><b>NARRATIVE</b></p> <p>AUGUST 19, 2019 (MONDAY)</p> <p>THE DEFENDANT, ROKAYLA RAY, WAS ARRESTED ON AN OUTSTANDING WARRANT FOR ARREST ON CHARGES OF FELONY CONSPIRACY AND ACCESSORY AFTER THE FACT. THESE CHARGES STEMMED FROM AN INVESTIGATION WHEREBY DEMETRIUS MONTE JOHNSON WAS SHOT AND KILLED. THE DEFENDANT WAS PROCESSED ON THIS WARRANT AND PRESENTED TO THE PRESIDING MAGISTRATE. B.</p>												
<b>STATUS</b>	Arresting Officer Signature/ID # ELMORE SPENCER JOE SJE				Date/Time Submitted Mo Date Year 08/19/2019 Hrs: 13:30		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:  
08/19/2019

CASE #:  
19003111

HOYLE, WHO ISSUED A SECURED BOND OF \$1,000,000.00. THE DEFENDANT WAS PLACED INTO THE CUSTODY OF THE HARNETT COUNTY JAIL AT THIS TIME WITHOUT INCIDENT. THE DEFENDANT WAS ENTERED IN NCIC AND WILL BE REMOVED ON THIS DATE AND TIME.

REPORTING OFFICER

ID

APPROVING SUPERVISOR

ID