



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

NEWS RELEASE

February 1, 2019

ARREST REPORT

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000		Date/Time of Arrest Mo Date Year 01/30/2019 Hrs: 09:51		OCA 18006389						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>		Fingerprint Card Check Digit # (CKN) 9586NAF		Arrest Tract 1183		Residence Tract 1183		Arrest Number				
ARRESTEE INFORMATION	Name (Last, First, Middle) QUICK GLORIA LATASHA			D O B Mo Date Year		Age 27	Race B	Sex F	Place of Birth NC		Country of Citizenship US		
	Current Address 2363 BUNNLEVEL ERWIN RD. ERWIN NC 28339-				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) UNK				Hgt 505	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 #		State NC	Misc. # and Type Driver's License					
Nearest Relative			Address				Phone						
ARREST INFO	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 DEPARTMENT OF SOCIAL SERVICES LILLINGTON						
	Charge # 1 1ST DEGREE SEX OFFENSE CHILD		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 9	DCI Code 1790	Offense Jurisdiction (If not arresting Agency)		Statute# 14-27.4(A) (1)	Warr Date Mo Date Year 01/28/2019				
	Charge # 2 SEX OFFENSE - PARENTAL ROLE		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 9	DCI Code 1790	Offense Jurisdiction (If not arresting agency)		Statute# 14-27.7	Warr Date Mo Date Year 01/28/2019				
	Charge # 3 INDECENT LIBERTIES WITH CHILD		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 9	DCI Code 1780	Offense Jurisdiction (If not arresting agency)		Statute# 14-202.1	Warr Date Mo Date Year 01/28/2019				
VEH. INFO.	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"/>												
CONFINED BOND INFO	Date/Time Confined 01/30/2019 Hrs: 10:24		Place Confined HARNETT COUNTY JAIL			Committing Magistrate C. SMITH							
	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 01/31/2019	Court of HARNETT COUNTY		City LILLINGTON					
Assisting Officer Name/ID Number ELMORE SPENCER SE			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)												
DRUGS AT ARREST	DCI	Status	Quantity	Type Measure	Suspected Type			Check up to 3 types of activity for each					
								Possess	Buy	Sale	Mfg.	Importing	Operating
COMPLAINANT	Name: S. ELMORE			Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: 175 BAIN ST. LILLINGTON NC 27546-			Phone: 910-893-9111			
	<p>NARRATIVE</p> <p>ON 01-30-2019 AT APPROXIMATELY 9:51 A.M., I, DETECTIVE M.E. WEAVER JR., ARRESTED THE DEFENDANT, GLORIA QUICK. AT THE DEPARTMENT OF SOCIAL SERVICES, IN LILLINGTON. MS. QUICK WAS ARRESTED IN REGARDS TO THE FOLLOWING OUTSTANDING WARRANTS FOR ARREST (WFA):</p> <p>I F-FIRST DEGREE SEX OFFENSE (CHILD) (X9)</p> <p>II F- SEX OFFENSE-PARENTAL ROLE. (X9)</p>												
STATUS	Arresting Officer Signature/ID # WEAVER MICHAEL EVAN MEWE			Date/Time Submitted Mo Date Year 01/30/2019 Hrs: 10:43		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

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 01/30/2019 Hrs: 07:30		OCA 19000559							
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 9585NAJ	Arrest Tract	Residence Tract		Arrest Number							
ARRESTEE INFORMATION	Name (Last, First, Middle) POE MATTHEW DEAN		DOB Mo Date Year	Age 41	Race W	Sex M	Place of Birth SANFORD NC	Country of Citizenship US					
	Current Address HOMELESS BROADWAY NC 27505-			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 507	Wgt 135	Hair BLACK	Eye	Skin Tone FAIR	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk				
	Scars, Marks, Tattoos			Social Security #		State NC		Misc. # and Type					
	Nearest Relative Name		Address			Phone							
ARREST INFO	If Armed, Type of Weapon		<input type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant		Place of Arrest 2672 NC 24-87 CAMERON								
	Charge # 1 BREAK OR ENTER A MOTOR VEHICLE	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 2690	Offense Jurisdiction (If not arresting Agency)		Statute# 14-56	Warr Date Mo Date Year 01/30/2019					
	Charge # 2 ALL TRAFFIC (EXCEPT DWI)	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 4010	Offense Jurisdiction (If not arresting agency)		Statute# 20-111(2)	Warr Date Mo Date Year 01/30/2019					
	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					
VEH. INFO.	VYR 1996	Make NISSAN	Model PICKUP	Style	Color BLACK	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"/>												
CONFINED BOND INFO	Date/Time Confined 01/30/2019 Hrs: 10:34		Place Confined HCDC		Committing Magistrate SMITH								
	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 01/31/2019		Court of 9999		City LILLINGTON				
	Assisting Officer Name/ID Number COLLINS CHRISTOPHER MANDRICK CMC			Released By Name/Dept/ID			Date/Time Released Hrs:						
DRUGS AT ARREST	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"/>
COMPLAINANT	Name: JB TEASLEY			Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: 175 BAIN ST LILLINGTON NC 27546-			Phone: 910-893-0155			
	NARRATIVE ON JANUARY 30, 2019 A VICTIM FOUND MR. POE IN THIER VEHICLE 'GOING THROUGH IT'. MR POE DEPARTED IN HIS VEHICLE AND WAS LOCATED AT 133 MITTIE HADDOCK A SHORT TIME LATER. HE WAS ARRESTED FOR AN OUTSTANDING OFA AND SERVED A WARRANT FOR THIS INCIDENT. SECURE BOND: \$10000.00												
STATUS	Arresting Officer Signature/ID # TEASLEY JOSHUA BENJAMIN JBT			Date/Time Submitted Mo Date Year 01/30/2019 Hrs: 10:29			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

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 01/30/2019 Hrs: 11:15		OCA 19000563			
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 9587NAB	Arrest Tract	Residence Tract 1116		Arrest Number			
ARRESTEE INFORMATION	Name (Last, First, Middle) MURCHISON JALEN VESTO		DOB Mo Date Year	Age 18	Race B	Sex M	Place of Birth SANFORD, NC	Country of Citizenship US	
	Current Address 224 KATHLEEN TERRACE SANFORD NC 27332- Phone			Occupation STUDENT		<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 190	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 TAT TATTOOS TAT L WRS WRIST, LEFT 18			Social Security #		State NC	Misc. # and Type Driver's C License		
Name		Address			Phone				
ARREST INFO	If Armed, Type of Weapon		<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 10637 NC27W LILLINGTON NC		
	Charge # 1 Contempt Of Court perjury court Violations	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 2640	Offense Jurisdiction (If not arresting Agency)		Statute# 15A-543(B)	Warr Date Mo Date Year 12/04/2018	
	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	
VEH. INFO.	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"/>								
CONFINED BOND INFO	Date/Time Confined 01/30/2019 Hrs: 11:45		Place Confined HARNETT COUNTY JAIL			Committing Magistrate CHERYL SMITH			
	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 \$10,000.00		Trial Date 02/05/2019	Court of HARNETT		City LILLINGTON	
	Assisting Officer Name/ID Number			Released By Name/Dept/ID			Date/Time Released Hrs:		
DRUGS AT ARREST	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		
Name: STATE OF NC		Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address:			Phone:	
NARRATIVE	DEFENDANT SERVED OUTSTANDING ORDER FOR ARREST FOR FAILING TO APPEAR IN HARNETT COUNTY DISTRICT COURT. DEFENDANT PLACED INTO THE HARNETT COUNTY JAIL UNDER A \$10,000 SECURE BOND.								
	Arresting Officer Signature/ID # SMITH JEFFREY MARK JMS		Date/Time Submitted Mo Date Year 01/30/2019 Hrs: 11:55			Supervisor Signature			
STATUS	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

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 01/31/2019 Hrs: 11:40		OCA 19000153
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 9595NAE	Arrest Tract 1130	Residence Tract 1123		Arrest Number

ARRESTEE INFORMATION	Name (Last, First, Middle) NAYLOR JAMES FRANKLIN		DOB Mo Date Year	Age 32	Race W	Sex M	Place of Birth NC	Country of Citizenship US		
	Current Address 151 KANGAROO LN SPRING LAKE NC 28390-				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 56	Wgt 175	Hair BROWN	Eye BLUE	Skin Tone FAIR	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk
	Scars, Marks, Tattoos				State NC	Misc. # and Type				

ARREST INFO	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 LARCENY OF MOTOR VEHICLE	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 0710	Offense Jurisdiction (If not arresting Agency)		Statute# 14-72(A)	Warr Date Mo Date Year 01/31/2019
	Charge # 2 POSSESS STOLEN AUTOMOBILE	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1330	Offense Jurisdiction (If not arresting agency)		Statute# 20-106	Warr Date Mo Date Year 01/31/2019
	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

VEH. INFO.	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"/>						

CONFINED BOND INFO	Date/Time Confined 01/31/2019 Hrs: 11:40	Place Confined HARNETT COUNTY SHERIFF'S OFFICE	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 \$15,000.00	Trial Date 02/01/2019	Court of DISTRICT		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)

DRUGS AT ARREST	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"/>

COM-PLAINANT	Name: Complainant <input type="checkbox"/> Victim <input checked="" type="checkbox"/>		Address:	Phone:
	MIZELL HEATHER CHRISTINE		702 LAKE AVE. SPRING LAKE NC 28390-	

NARRATIVE
 JAMES FRANKLIN NAYLOR WAS SERVED WITH ONE HARNETT COUNTY WARRANT FOR ARREST FOR LARCENY OF MOTOR VEHICLE AND POSSESSION OF STOLEN MOTOR VEHICLE 19CR 050385.

STATUS	Arresting Officer Signature/ID # DOWDY DAVID WILSON DWD		Date/Time Submitted Mo Date Year 01/31/2019 Hrs: 12:00	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

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 01/31/2019 Hrs: 10:20		OCA 19000577				
	<input checked="" type="checkbox"/> Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) 959NAX	Arrest Tract 1183	Residence Tract 1116		Arrest Number				
ARRESTEE INFORMATION	Name (Last, First, Middle) CRAWFORD ADAM DEVON		DOB Mo Date Year	Age 20	Race B	Sex M	Place of Birth NC	Country of Citizenship US		
	Current Address 579 NICOLE DRIVE SANFORD NC 27332-			Occupation UNEMPLOYED		<input type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name		Address			Phone				
	Also Known As (Alias Names)			Hgt 68	Wgt 185	Hair BLACK	Eye BROWN	Skin Tone MDARK	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk	
	Scars, Marks, Tattoos TAT TATTOOS TAT HAND WORDS 71		Social Security #		State NC	Misc. # and Type				
	Nearest Relative Name		Address			Phone				
ARREST INFO	If Armed, Type of Weapon		<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 COURT HOUSE LILLINGTON, NC					
	Charge # 1 PROBATION VIOLATION	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 2640	Offense Jurisdiction (If not arresting Agency)		Statute# 15A-543(B)	Warr Date Mo Date Year 01/28/2019		
	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		
VEH. INFO.	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"/>									
CONFINED BOND INFO	Date/Time Confined 01/31/2019 Hrs: 11:15		Place Confined HARNETT COUNTY DENTENTION CENTER			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 \$50,000.00		Trial Date 02/25/2019	Court of SUPERIOR		City LILLINGTON		
	Assisting Officer Name/ID Number			Released By Name/Dept/ID			Date/Time Released Hrs:			
DRUGS AT ARREST	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		
								<input type="checkbox"/> Possess <input type="checkbox"/> Buy <input type="checkbox"/> Sale <input type="checkbox"/> Mfg. <input type="checkbox"/> Importing <input type="checkbox"/> Operating		
COM-PLAINANT	Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>		Address: LILLINGTON NC				Phone:			
	Name: CLERK OF SUPERIOR COURT									
NARRATIVE	ARRESTED DEFENDANT IN SUPERIOR COURT ON A ORDER FOR ARREST FOR FAILURE TO APPEAR IN SUPERIOR COURT ON MONDAY 01-28-2019 FOR PROBATION VIOLATION. DEFENDANT WAS PLACED IN THE HCDC UNDER A \$50,000.00 SECURED BOND, COURT DATE 02-25-2019									
STATUS	Arresting Officer Signature/ID # GUNTER JAMES FOSTER JFG		Date/Time Submitted Mo Date Year 01/31/2019 Hrs: 11:15		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

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 01/31/2019 Hrs: 17:24		OCA 19000586						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 9597NAT	Arrest Tract 1183	Residence Tract 1100		Arrest Number						
ARRESTEE INFORMATION	Name (Last, First, Middle) DAVIS ANTWAN ISAIAH		DOB Mo Date Year	Age 21	Race B	Sex M	Place of Birth NC	Country of Citizenship USA				
	Current Address 1608 FAYETTE AVE FAYETTEVILLE NC 28301-			Occupation UNEMPLOYED		<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 510	Wgt 170	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 #		State NC	Misc. # and Type					
	Nearest Relative Name		Address			Phone						
ARREST INFO	If Armed, Type of Weapon		<input type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input checked="" type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input type="checkbox"/> Warrant									
	Charge # 1 Parole & Probation Violations	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 2660	Offense Jurisdiction (If not arresting Agency)		Statute# 15A-1345	Warr Date Mo Date Year 01/28/2019				
	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				
VEH. INFO.	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"/>											
CONFINED BOND INFO	Date/Time Confined 01/31/2019 Hrs: 18:00		Place Confined HCSO 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 \$50,000.00		Trial Date 02/01/2019	Court of SUPERIOR		City LILLINGTON				
	Assisting Officer Name/ID Number			Released By Name/Dept/ID			Date/Time Released Hrs:					
DRUGS AT ARREST	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"/>
COMPLAINANT	Name: KELLY S.B.		Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>		Address: 175 BAIN ST LILLINGTON NC 27546-			Phone: 910-893-9111				
	NARRATIVE THE ABOVE NAMED SUSPECT WAS TAKEN INTO CISTODY IN SUPERIOR COURT IN HARNETT COUNTY FOR THE CHARGE OF FEL. PROB. VIOL. OUT OF COUNTY. I TRANSPORTED SUSPECT ANTWAN DAVIS TO THE COUNTY JAIL AND TOOK HIM BEFORE MAGISTRATE D. MCLEAN. A BOND OF \$50,000.00 SECURED HAD ALREADY BEEN SET. I PROCESSED MR DAVIS INTO THE COUNTY JAIL											
STATUS	Arresting Officer Signature/ID # KELLY SCOTT BRYON SBK			Date/Time Submitted Mo Date Year 01/31/2019 Hrs: 18:00		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					