



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

NEWS RELEASE

February 20, 2020

ARREST REPORT

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000		Date/Time of Arrest Mo Date Year 02/19/2020 Hrs: 22:55		OCA 20001122					
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>		Fingerprint Card Check Digit # (CKN) 3542NBM		Arrest Tract 1183		Residence Tract 1117		Arrest Number			
ARRESTEE INFORMATION	Name (Last, First, Middle) PEELE ANTONIO LAMONT			DOB Mo Date Year		Age 43	Race B	Sex M	Place of Birth NC	Country of Citizenship US		
	Current Address 825 VAN THOMAS DR RALEIGH NC 27615-					Occupation LABORER		<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 210	Hair BLACK	Eye BROWN	Skin Tone MEDIUM	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk		
	Scars, Marks, Tattoos				Social Security #		DOI N		State NC	Misc. # and Type		
	Nearest Relative Name JASEMIN CELIK / GIRLFRIEND				Address 825 VAN THOMAS DR RALEIGH NC 27615-				Phone			
ARREST INFO	If Armed, Type of Weapon		<input type="checkbox"/> On-View	<input type="checkbox"/> Criminal Summons	Place of Arrest							
			<input type="checkbox"/> Order for Arrest	<input type="checkbox"/> Citation	<input type="checkbox"/> Warrant							
	Charge # 1 SECOND DEGREE FORCIBLE RAPE		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 11A	Offense Jurisdiction (If not arresting Agency)		Statute# 14-27.22	Warr Date Mo Date Year 02/19/2020			
	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 02/19/2020 Hrs:22:55		Place Confined HCDC			Committing Magistrate WILLIAMS						
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input checked="" type="checkbox"/> No Bond <input type="checkbox"/> Other		Amt. Bond		Trial Date 02/20/2020	Court of 9999		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)											
	DCI	Status	Quantity	Type Measure	Suspected Type			Check up to 3 types of activity for each				
DRUGS AT ARREST							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"/>
COMPLAINANT	Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>				Address:				Phone:			
	SJ ELMORE, DETECTIVE, HCSO											
NARRATIVE	MR PEELE WAS ARRESTED WHILE IN CUSTODY AT THE HARNETT COUNTY DETENTION CENTER ON THIS CHARGE FROM AN INCIDENT THAT OCCURED IN JANUARY 2020. BOND: DV RELATED NO BOND											
STATUS	Arresting Officer Signature/ID # TEASLEY JOSHUA BENJAMIN JBT				Date/Time Submitted Mo Date Year 02/19/2020 Hrs:23:12		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

Cleared

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 02/19/2020 Hrs: 13:55		OCA 20000672					
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 3537NBU	Arrest Tract 1100	Residence Tract		Arrest Number 1					
ARRESTEE INFORMATION	Name (Last, First, Middle) LUNSFORD IVORY JUNIOR		D O R Mo Date Year	Age 53	Race B	Sex M					
	Current Address 6809 BROWNWOOD DR HOLLY SPRINGS NC 27540-		Phone	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) MIKE LUNSFORD		Hgt 602	Wgt 190	Hair BLACK	Eye BROWN	Skin Tone DARK <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 HAYWOOD LUNSFORD		Address SAME 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 1200 AIRPORT RD BEAVER WV						
	Charge # 1 FAILURE TO REPORT CHANGE OF ADDRESS	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 90Z	Offense Jurisdiction (If not arresting Agency)	Statute# 14-208.11 (A)(2)					
	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					
	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 02/19/2020 Hrs: 18:45		Place Confined HARNETT CO 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 \$150,000.00	Trial Date 02/20/2020	Court of DISTRICT	City LILLINGTON					
	Assisting Officer Name/ID Number BYRD BRIAN PATRICK BPB			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
COM-PLAINANT	Name: STATE OF NC		Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>	Address:			Phone:				
	NARRATIVE 02/19/2020 ABOVE SUBJECT ARRESTED ON OUTSTANDING WARRANT FOR ARREST (20CR 050416) AT SOUTHERN REGIONAL DETENTION CENTER LOCATED IN BEAVER WEST VIRGINIA. LUNSFORD WAS HANDCUFFED IN THE FRONT WITH CHAIN HANDCUFFS AND LEGSHACKLED. THE REAR										
STATUS	Arresting Officer Signature/ID # DAVIES BRANDON ERIC BED		Date/Time Submitted Mo Date Year 02/19/2020 Hrs:18:50		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: 02/19/2020	CASE #: 20000672
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OF THE VEHICLE WAS SEARCHED AT THE BEGINNING OF THE SHIFT THIS DATE.

REPORTING OFFICER _____ ID _____

APPROVING SUPERVISOR _____ ID _____

ARREST REPORT

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 02/15/2020 Hrs: 06:15		OCA 19007051							
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 3489NBQ	Arrest Tract 1183	Residence Tract 1140		Arrest Number							
ARRESTEE INFORMATION	Name (Last, First, Middle) WHITEHEAD ROBERT MITCHELL			DOB Mo Date Year	Age 41	Race W	Sex M	Place of Birth NC	Country of Citizenship US				
	Current Address 981 OLD STAGE ROAD SOUTH 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)			Hgt 511	Wgt 205	Hair BROWN	Eye BROWN	Skin Tone LIGHT	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 Driver's License						
Nearest Relative Name			Address			Phone							
ARREST INFO	If Armed, Type of Weapon 97		<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 401 EAST BROAD STREET DUNN								
	Charge # 1 FELONY LARCENY	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 23H	Offense Jurisdiction (If not arresting Agency)			Statute# 14-72(B)	Warr Date Mo Date Year 12/30/2019				
	Charge # 2 POSSESSION OF STOLEN GOODS	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 280	Offense Jurisdiction (If not arresting agency)			Statute# 14-71.1	Warr Date Mo Date Year 12/30/2019				
	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	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 02/15/2020 Hrs:06:15		Place Confined HARNETT COUNTY DETENTION CENTER			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 \$2,000.00		Trial Date 03/03/2020		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"/>	<input type="checkbox"/>
COMPLAINANT	Name: REAGAN J E			Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: 175 BAIN STREET LILLINGTON NC 27546-			Phone: 910-893-9111			
	NARRATIVE FEBRUARY 19, 2020 (WEDNESDAY) ON 02/15/2020 ROBERT WHITEHEAD WAS TAKEN INTO CUSTODY FOR AN OUTSTANDING WARRANT OUT OF HARNETT COUNTY. HE WAS GIVEN A SECURED BOND OF \$2,000.00 AND A COURT DATE OF 03/03/2020.												
STATUS	Arresting Officer Signature/ID # REAGAN JAMES EDWARD JER			Date/Time Submitted Mo Date Year 02/19/2020 Hrs:12:50			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

Cleared

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE			ORI NC0430000		Date/Time of Arrest Mo Date Year 02/19/2020 Hrs: 09:28		OCA 19006203					
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>		Fingerprint Card Check Digit # (CKN) 3532NBR		Arrest Tract 1183		Residence Tract 1128		Arrest Number				
ARRESTEE INFORMATION	Name (Last, First, Middle) FRANK MARILYN HOPE				D.O.B Mo Date Year		Age 27	Race W	Sex F	Place of Birth NC		Country of Citizenship US	
	Current Address 1365 MOUNT OLIVE CH RD LILLINGTON NC 27546-				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 505	Wgt 192	Hair BROWN	Eye BLUE	Skin Tone FAIR	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos				Serial Security # IOLN			State NC	Misc. # and Type				
	Nearest Relative Name BESSIE LEE/MOM				Address PALAMINO HOTEL SANFORD NC 27330-				Phone				
ARREST INFO	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 NC						
	Charge # 1 REMOVE/DEST/DEACT/COMP		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 90Z	Offense Jurisdiction (If not arresting Agency)			Statute# 14-72.11(2)	Warr Date Mo Date Year 10/13/2019			
	Charge # 2 STOLEN PROPERTY OFFENSES (RECEIVING, ETC.)		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 280	Offense Jurisdiction (If not arresting agency)			Statute# 14-71.1	Warr Date Mo Date Year 10/13/2019			
	Charge # 3 FELONY CONSPIRACY		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 90Z	Offense Jurisdiction (If not arresting agency)			Statute# 14-2.4(A)	Warr Date Mo Date Year 10/13/2019			
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 02/19/2020 Hrs: 10:05		Place Confined HARNETT COUNTY JAIL				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 \$5,000.00		Trial Date 02/20/2000		Court of DISTRICT			City LILLINGTON			
	Assisting Officer Name/ID Number TEASLEY JOSHUA BENJAMIN JBT				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"/>	<input type="checkbox"/>
COMPLAINANT	Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>				Address: 175 BAIN ST LILLINGTON NC 27546-				Phone: 910-893-0155				
	<p align="center">*****BUSINESS CRIME*****USE TO CLEAR NCIC*****</p> <p>MS FRANK WAS ARRESTED AT THE MAGISTRATE'S OFFICE IN LILLINGTON NC FOR THESE CHARGES FROM AN INCIDENT WHEREBY LARCENY FROM A MERCHANT (DEACT) AND MISDEMEANOR LARCENY'S OCCURED. SHE WAS POLITE AND COOPERATIVE. SECURED BOND: \$5,000.00</p>												
STATUS	Arresting Officer Signature/ID # ELMORE SPENCER JOE SJE			Date/Time Submitted Mo Date Year 02/19/2020 Hrs:10:00			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 02/18/2020 Hrs: 09:43		OCA 20001093
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 3523NBS	Arrest Tract 1183	Residence Tract 1104		Arrest Number

ARRESTEE INFORMATION	Name (Last, First, Middle) MCCLAIN MARY SHA-NE		DOB Mo Date Year	Age 30	Race B	Sex F	Place of Birth VA	Country of Citizenship US	
	Current Address 615 EAST H ST. 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)			Hgt 503	Wgt 205	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 #		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 301 W. CORNELIUS HARNETT BLVD LILLINGTON			
	Charge # 1 OBTAIN PROPERTY FALSE PRETENSE		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 26A	Offense Jurisdiction (If not arresting Agency) BRUNSWICK COUNTY		Statute# 14-100	Warr Date Mo Date Year 01/31/2020
	Charge # 2 FORGERY OF INSTRUMENT		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 250	Offense Jurisdiction (If not arresting agency) BRUNSWICK COUNTY		Statute# 14-119	Warr Date Mo Date Year 01/31/2020
	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"/> 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"/>						

CONFINED BOND INFO	Date/Time Confined 02/18/2020 Hrs: 10:55		Place Confined HARNETT COUNTY JAIL			Committing Magistrate D. WILLIAMS		
	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 02/21/2020	Court of DISTRICT		City BOLIVIA
	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"/>

COMPLAINANT	Name: GEIGER J R		Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>	Address: 70 STAMP ACT DR BOLIVIA NC 28422-		Phone: 910-253-2777
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NARRATIVE
 ON THIS DATE AND TIME THE DEFENDANT WAS ARRESTED AT THE HARNETT COUNTY COURTHOUSE FOR AN OUTSTANDING WFA OUT OF BRUNSWICK COUNTY FOR OBTAINING PROPERTY BY FALSE PRETENSE AND FORGERY OF INSTRUMENT. THE DEFENDANT WAS SERVED, PROCESSED, AND PRESENTED BEFORE THE MAGISTRATE, D. WILLIAMS WHO ISSUED A SECURED BOND OF \$10,000.00 AND A COURT DATE IN BOLIVIA NORTH CAROLINA ON 02/21/2020. THE DEFENDANT WAS PLACED IN THE HARNETT COUNTY JAIL AND WAS CLEAR NCIC AND NCAWARE.

STATUS	Arresting Officer Signature/ID # ELMORE SPENCER JOE SJE		Date/Time Submitted Mo Date Year 02/18/2020 Hrs: 10:55		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 02/18/2020 Hrs: 12:00		OCA 20001079						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 3526NGB	Arrest Tract 1138		Residence Tract 1191		Arrest Number						
ARRESTEE INFORMATION	Name (Last, First, Middle) MAIN COREY AUSTIN			D O B		Age 21	Race W	Sex M	Place of Birth NC	Country of Citizenship US			
	Current Address 315 CLAUDE WHITE RD CAMERON NC 28326-				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 511	Wgt 185	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				Social Security #		State NC		Misc. # and Type				
	Nearest Relative Name DOLORES MAIN (MOTHER)				Address 315 CLAUDE WHITE RD CAMERON NC 28326-								
ARREST INFO	If Armed, Type of Weapon 97		<input type="checkbox"/> On-View	<input type="checkbox"/> Criminal Summons	Place of Arrest 301 W. CORNEILUS HARNETT BLVD LILLINGTON								
			<input type="checkbox"/> Order for Arrest	<input type="checkbox"/> Citation	<input checked="" type="checkbox"/> Warrant								
	Charge # 1 POSS WI DELIVER COCAINE		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 35A	Offense Jurisdiction (If not arresting Agency)		Statute# 90-95(A)	Warr Date Mo Date Year 02/07/2020				
	Charge # 2 SELL COCAINE		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 35A	Offense Jurisdiction (If not arresting agency)		Statute# 90-95(A)	Warr Date Mo Date Year 02/07/2020				
Charge # 3 DELIVER COCAINE		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 35A	Offense Jurisdiction (If not arresting agency)		Statute# 90-95(A)(1)	Warr Date Mo Date Year 02/07/2020					
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"/> 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"/>													
CONFINED BOND INFO	Date/Time Confined 02/18/2020 Hrs: 12:45		Place Confined HARNETT COUNTY JAIL			Committing Magistrate D. WILLIAMS							
	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 \$60,000.00		Trial Date 02/19/2020	Court of DISTRICT		City LILLINGTON					
	Assisting Officer Name/ID Number ZIMMERMAN CHRISTOPHER LEE CLZ				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: WINSTEAD B W			Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: 175 BAIN ST. LILLINGTON NC 27546-			Phone: 910-893-9111			
	NARRATIVE												
<p>ON THIS DATE AND TIME THE DEFENDANT WAS ARRESTED AND SERVED ON A WFA FOR THE ABOVE CHARGES. THE DEFENDANT WENT BEFORE MAGISTRATE D. WILLIAMS WHO ISSUED A SECURED BOND OF \$60,000.00 AND A COURT DATE ON 02/19/2020. THE DEFENDANT WAS PLACED IN THE CUSTODY OF THE HARNETT COUNTY JAIL AND WAS CLEAR NCIC AND NCAWARE.</p>													
STATUS	Arresting Officer Signature/ID # ELMORE SPENCER JOE SJE			Date/Time Submitted Mo Date Year 02/18/2020 Hrs: 12:45			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 02/15/2020 Hrs: 01:31		OCA 20000042						
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 6257KHE		Arrest Tract 10	Residence Tract 1109		Arrest Number					
ARRESTEE INFORMATION	Name (Last, First, Middle) JACOBS TYREE			D.O.B. Mo Date Year	Age 36	Race B	Sex M	Place of Birth CUMB CO	Country of Citizenship US			
	Current Address 1724 ROXIE AVENUE FAYETTEVILLE NC 28311-				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 602	Wgt 214	Hair BLACK	Eye BROWN	Skin Tone DRK	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"/> Order for Arrest	<input type="checkbox"/> Criminal Summons <input type="checkbox"/> Citation	<input checked="" type="checkbox"/> Warrant		Place of Arrest 1201 BEAVER CREEK COMMONS DR APEX NC					
	Charge # 1 LARCENY FROM A MERCHANT >\$200 EXIT	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 90Z	Offense Jurisdiction (If not arresting Agency)		Statute# 14-72.11(1)	Warr Date Mo Date Year 01/08/2020				
	Charge # 2 POSSESSION OF STOLEN GOODS	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 280	Offense Jurisdiction (If not arresting agency)		Statute# 14-71.1	Warr Date Mo Date Year 01/08/2020				
	Charge # 3 FELONY CONSPIRACY	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 90Z	Offense Jurisdiction (If not arresting agency)		Statute# 14-2.4(A)	Warr Date Mo Date Year 01/08/2020				
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 02/15/2020 Hrs: 01:31		Place Confined WAKE COUNTY DETENTION CENTER			Committing Magistrate LINARDY						
	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 02/18/2020	Court of 9999		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"/>	<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		
	*****NC87 BUSINESS CORRIDOR*****USE TO CLEAR NCIC***** MR JACOBS WAS ARRESTED BY THE APEX PD ON THESE HARNETT COUNTY CHARGES AND A PLETHORA OF CHARGES FROM A MULTITUDE OF JURISDICTIONS. BOND: \$50,000/SECURE											
STATUS	Arresting Officer Signature/ID # TEASLEY JOSHUA BENJAMIN JBT			Date/Time Submitted Mo Date Year 02/18/2020 Hrs: 11:09		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 02/18/2020 Hrs: 14:19		OCA 19005184						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 3527NBC	Arrest Tract 1118	Residence Tract 1124		Arrest Number						
ARRESTEE INFORMATION	Name (Last, First, Middle) MOORE TAJUAN MALIK			Age 19	Race B	Sex M	Place of Birth NC	Country of Citizenship USA				
	Current Address 832 GRIFFIN RD LILLINGTON NC			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 600	Wgt 170	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 SHEMEKA MOORE			Address 932 GRIFFIN RD LILLINGTON NC									
ARREST INFO	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 1035 MCFARLND RD BROADWAY			
	Charge # 1 BURGLARY/BREAKING AND ENTERING	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 220	Offense Jurisdiction (If not arresting Agency)		Statute# 14-54(B)	Warr Date Mo Date Year 09/10/2019				
	Charge # 2 ALL OTHER LARCENY	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 23H	Offense Jurisdiction (If not arresting agency)		Statute# 14-72(B)(2)	Warr Date Mo Date Year 09/10/2019				
	Charge # 3 STOLEN PROPERTY OFFENSES (RECEIVING, ETC.)	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 2	DCI Code 280	Offense Jurisdiction (If not arresting agency)		Statute# 14-71.1	Warr Date Mo Date Year 09/10/2019				
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 02/18/2200 Hrs: 15:00		Place Confined HARNETT COUNTY DETENTION CENTER			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 \$25,000.00		Trial Date 02/19/2020	Court of HARNETT COUTNY		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"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COM-PLAIN-ANT	Name: DOWDY D.W. Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: 175 BAIN ST LILLINGTON NC 27546-				Phone: 910-893-9111				
	NARRATIVE ON 02/18/2020 AT 1419 HOURS I LOCATED AND ARRESTED TAJUAN MALIK MOORE ON OUTSTANDING WARRANTS. I PLACED HIM IN HANDCUFFS AND DOUBLE LOCKED SAME. HE WAS PLACED IN THE BACK OF MY PATROL CAR WHICH WAS CHECKED FOR CONTRABAND. I THEN TRANSPORTED HIM TO THE HARNETT COUNTY DETENTION CENTER. HE WAS BROUGHT BEFORE THE MAGISTRATE AND GIVEN A \$25,000.00 BOND. HE WAS THEN TURNED OVER TO THE DETENTION STAFF.											
STATUS	Arresting Officer Signature/ID # PRITCHETT ZACHARY SCOTT ZSP			Date/Time Submitted Mo Date Year 02/18/2020 Hrs: 16:36		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 02/18/2020 Hrs: 14:19		OCA 19005162					
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 3527NBC		Arrest Tract 1118	Residence Tract 1124	Arrest Number					
ARRESTEE INFORMATION	Name (Last, First, Middle) MOORE TAIJUAN MALIK			Age 19	Race B	Sex M	Place of Birth NC	Country of Citizenship USA			
	Current Address 832 GRIFFIN RD LILLINGTON NC				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 600	Wgt 170	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 SHEMEKA MOORE			Address 932 GRIFFIN RD LILLINGTON NC			Phone				
ARREST INFO	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 1035 MCFARLND RD BROADWAY						
	Charge # 1 ALL OTHER LARCENY	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 23H	Offense Jurisdiction (If not arresting Agency)	Statute# 14-72(B)	Warr Date Mo Date Year 09/10/2019				
	Charge # 2 STOLEN PROPERTY OFFENSES (RECEIVING, ETC.)	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 280	Offense Jurisdiction (If not arresting agency)	Statute# 14-71.1	Warr Date Mo Date Year 09/10/2019				
	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"/> 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"/>										
CONFINED BOND INFO	Date/Time Confined 02/18/2200 Hrs: 15:00		Place Confined HARNETT COUNTY DETENTION CENTER			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 \$25,000.00		Trial Date 02/19/2020	Court of HARNETT COUTNY	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"/>
COMPLAINANT	Name: DOWDY D.W.			Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: 175 BAIN ST LILLINGTON NC 27546-	Phone: 910-893-9111			
	NARRATIVE ON 02/18/2020 AT 1419 HOURS I LOCATED AND ARRESTED TAIJUAN MALIK MOORE ON OUTSTANDING WARRANTS. I PLACED HIM IN HANDCUFFS AND DOUBLE LOCKED SAME. HE WAS PLACED IN THE BACK OF MY PATROL CAR WHICH WAS CHECKED FOR CONTRABAND. I THEN TRANSPORTED HIM TO THE HARNETT COUNTY DETENTION CENTER. HE WAS BROUGHT BEFORE THE MAGISTRATE AND GIVEN A \$25,000.00 BOND. HE WAS THEN TURNED OVER TO THE DETENTION STAFF.										
STATUS	Arresting Officer Signature/ID # PRITCHETT ZACHARY SCOTT ZSP			Date/Time Submitted Mo Date Year 02/18/2020 Hrs: 16:35		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 02/17/2020 Hrs: 17:54		OCA 20001085					
	Taken <input checked="" type="checkbox"/> Fingerprint Card Check Digit # (CKN) Prints <input checked="" type="checkbox"/> 3515NBP Photos <input checked="" type="checkbox"/>		Arrest Tract 1109		Residence Tract 1109		Arrest Number					
ARRESTEE INFORMATION	Name (Last, First, Middle) LESTER PAUL F JR			D O B Mo Date Year		Age 34	Race B	Sex M	Place of Birth FORT DIX, NJ	Country of Citizenship US		
	Current Address 390 MARKS RD CAMERON NC 28326-					Occupation LABORER		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name			Address				Phone				
	Also Known As (Alias Names) FRANK LESTER				Hgt 601	Wgt 185	Hair BLACK	Eye BROWN	Skin Tone FAIR	Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk		
	Scars, Marks, Tattoos			Social Security #		State NC	Misc. # and Type Driver's License					
Nearest Relative Name ROBERT LESTER			Address 390 MARKS ROAD CAMERON NC 28326-				Phone					
ARREST INFO	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 133 MITTIE HADDOCK DR CAMERON					
	Charge # 1 FIRST DEGREE TRESPASS		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 90Z	Offense Jurisdiction (If not arresting Agency)		Statute# 14-159.12	Warr Date Mo Date Year 02/17/2020			
	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 02/17/2020 Hrs: 19:00		Place Confined HARNETT COUNTY DETENTION CENTER				Committing Magistrate D. WILLIAMS					
	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 \$3,000.00		Trial Date 02/21/2020	Court of DISTRICT		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
COMPLAINANT	Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/> T.W. SWARTZLANDER				Address: 175 BAIN STREET LILLINGTON NC 27546-				Phone: 910-893-9111			
	NARRATIVE ON 02-17-2020 I ARRESTED THE DEFENDANT ON A WARRANT OUT OF HARNETT COUNTY.											
STATUS	Arresting Officer Signature/ID # SWARTZLANDER JR THOMAS TWSW			Date/Time Submitted Mo Date Year 02/17/2020 Hrs: 19:30			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

AGENCY INFO

Agency Name: HARNETT COUNTY SHERIFFS OFFICE
 ORI: NC0430000
 Date/Time of Arrest: 02/17/2020 Hrs: 15:30
 OCA: 20001083

Taken Prints Fingerprint Card Check Digit # (CKN): 3513NBA
 Photos
 Arrest Tract: 1183
 Residence Tract: 1100
 Arrest Number:

ARRESTEE INFORMATION

Name (Last, First, Middle): PAGE CRYSTAL MICHELLE
 Age: 45 Race: W Sex: F Place of Birth: LEE CO NC Country of Citizenship: US
 Current Address: 1801 BYPASS 72 NC GREENWOOD SC Mo Date Year: Phone: Occupation: LABORER
 Employer's Name: IHOP Address: GREENWOOD SC Phone: Resident Unknown Non-Resident
 Also Known As (Alias Names): CRYSTAL
 Scars, Marks, Tattoos: Hgt: 504 Wgt: 150 Hair: BROWN Eye: GREEN Skin Tone: LIGHT Consumed Drug/Alcohol: Yes No Unk
 Nearest Relative Name: SUSAN DRIGGERS Address: SANFORD NC State: NC Misc. # and Type:

ARREST INFO

If Armed, Type of Weapon: On-View Order for Arrest Criminal Summons Citation Warrant
 Place of Arrest: 175 BAIN STREET LILLINGTON

Charge #	Fel	Misd	Counts	DCI Code	Offense Jurisdiction (If not arresting Agency)	Statute#	Warr Date
Charge # 1 ALL OTHER OFFENSES	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1	90Z		15A-543(B)	09/17/2019
Charge # 2 ALL OTHER OFFENSES	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1	90Z		15A-543(C)	09/17/2019
Charge # 3	<input type="checkbox"/>	<input type="checkbox"/>					

VEH. INFO.

VYR: Make: Model: Style: Color: Lic/Lis: VIN:

Vehicle: 1: Left at Scene Secured Unsecured Date/Time: Hrs:
 2: Released to other at owners request Name of Other:
 3: Impounded Place of storage:

CONFINED BOND INFO

Date/Time Confined: 02/17/2020 Hrs: 16:00 Place Confined: HARNETT JAIL
 Type Bond: Written Promise Unsecured Secured No Bond Other
 Amt. Bond: \$22,000.00 Trial Date: 03/10/2020 Court of: HARNETT City: LILLINGTON
 Assisting Officer Name/ID Number: Released By Name/Dept/ID: Committing Magistrate: W DEAGON
 Inventory on File?

STATUS Codes

L-Lost S-Stolen R-Recovered D-Damaged Z-Seized B-Burned C-Counterfeit/Forged F-Found
 Date/Time Released: Hrs:

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"/>	<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: District Court Harnett Complainant Victim
 Address: LILLINGTON NC Phone:

NARRATIVE

SUBJECT CRYSTAL MICHELLE PAGE PRESENTED HERSELF THIS DATE AND WAS SERVED TWO ORDERS FOR ARREST FOR FAILURE TO APPEAR REFERENCE POSSESSION OF METH AND ALSO DWI. SHE WAS PLACED IN THE HARNETT JAIL ON A \$22,000 SECURED BOND. COURT DATE IS 03/10/2020 DISTRICT HARNETT. WILLIAM DEAGON WAS PRESIDING MAGISTRATE. NO NCIC DCI HIT.

STATUS

Arresting Officer Signature/ID #: WOOD BENJAMIN LLOYD BLW Date/Time Submitted: 02/17/2020 Hrs: 16:30 Supervisor Signature:
 Case Status: Further Inv. Inactive Closed
 Case Disposition: Cleared By Arrest/No Supplement Needed Arrest/No Investigation
 Arrestee Signature:

ARREST REPORT

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 02/17/2020 Hrs: 12:02		OCA 20001078				
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 3511NBX	Arrest Tract 1183	Residence Tract 1130		Arrest Number				
ARRESTEE INFORMATION	Name (Last, First, Middle) SCRIVEN TARCHA MARIE		D.O.B. Mo Date Year	Age 43	Race B	Sex F	Place of Birth NC	Country of Citizenship US		
	Current Address 707 W. NORTHINGTON ST. LILLINGTON NC 27546-			Occupation PROFESSIONAL		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Also Known As (Alias Names)		Hgt 503	Wgt 138	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		State NC	Misc. # and Type				
Nearest Relative Name SCRIVEN, DORETCH (MOTHER)			Address FUQUAY-VARINA NC			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 175 BAIN ST. LILLINGTON					
	Charge # 1 ROBBERY WITH DANGEROUS WEAPON	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 120	Offense Jurisdiction (If not arresting Agency)		Statute# 14-87	Warr Date Mo Date Year 01/24/2020		
	Charge # 2 SECOND DEGREE KIDNAPPING	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 100	Offense Jurisdiction (If not arresting agency)		Statute# 14-39	Warr Date Mo Date Year 01/24/2020		
	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 02/17/2020 Hrs: 12:50		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 \$150,000.00		Trial Date 02/18/2020	Court of DISTRICT		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
COMPLAINANT	Name: MAYER K E			Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: 237 NORTH MCKINLEY ST COATS NC 27521-			Phone: 910-893-9111
	NARRATIVE ON THIS DATE AND TIME THE DEFENDANT ABOVE TURNED HERSELF INTO THE HARNETT COUNTY JAIL ON AN OUTSTANDING WFA SECURED BY A COATS POLICE OFFICER, K. E. MAYER, FOR ROBBERY WITH A DANGEROUS WEAPON AND SECOND DEGREE KIDNAPPING. THE DEFENDANT WENT BEFORE THE MAGISTRATE, C. SMITH WHO ISSUED A SECURED BOND OF \$150,000.00 AND A FIRST APPEARANCE IN COURT ON 02/18/2020. THE DEFENDANT WAS PLACED IN THE HARNETT COUNTY JAIL WITHOUT INCIDENT AND WAS CLEAR NCIC AND NCAWARE.									
STATUS	Arresting Officer Signature/ID # ELMORE SPENCER JOE SJE			Date/Time Submitted Mo Date Year 02/17/2020 Hrs: 12:50			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 02/17/2020 Hrs: 20:45		OCA 20000560						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 3516NBL	Arrest Tract 1130	Residence Tract 1110		Arrest Number						
ARRESTEE INFORMATION	Name (Last, First, Middle) SIMS ROBERT WADE		Age 55	Race W	Sex M	Place of Birth NC						
	Current Address 251 HOLDER RD LILLINGTON NC 27546-		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 510	Wgt 220	Hair BROWN	Eye BLUE	Skin Tone LIGHT					
	Scars, Marks, Tattoos TAT TATTOOS TAT RF ARM SPIDER WEB 17		Social Security	State NC	Misc. # and Type Driver's License							
	Nearest Relative Name		Address		Phone							
ARREST INFO	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 POSSESSION OF FIREARM BY FELON	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 2	DCI Code 520	Offense Jurisdiction (If not arresting Agency)		Statute# 14-415.1					
	Charge # 2 LARCENY OF A FIREARM	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 23H	Offense Jurisdiction (If not arresting agency)		Statute# 14-72(B)					
	Charge # 3 POSSESS STOLEN FIREARM	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 280	Offense Jurisdiction (If not arresting agency)		Statute# 14-71.1					
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 02/17/2020 Hrs: 21:00		Place Confined HARNETT COUNTY DETENTION CENTER			Committing Magistrate T. SMITH						
	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 \$100,000.00	Trial Date 02/18/2020	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"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COMPLAINANT	Name: KLINGMAN M B			Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: 175 BAIN ST LILLINGTON NC 27546-			Phone: 910-893-9111		
	NARRATIVE ROBERT WADE SIMS WAS PROCESSED AND TAKEN BEFORE MAGISTRATE T. SMITH CHARGED WITH 2 COUNTS OF POSSESSION OF FIREARM BY FELON, LARCENY OF FIREARM, POSSESS STOLEN FIREARM, AND OBTAIN PROPERTY FALSE PRETENSES. HE WAS GIVEN \$100,000.00 SECURED BOND.											
STATUS	Arresting Officer Signature/ID # IVEY MARTY WARREN MWI			Date/Time Submitted Mo Date Year 02/17/2020 Hrs: 21:00			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 02/17/2020 Hrs: 14:46		OCA 20000338					
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 3514NBT	Arrest Tract 1135	Residence Tract 1135		Arrest Number					
ARRESTEE INFORMATION	Name (Last, First, Middle) MCKOY LUCAS DEVON		D O B Age 19	Race B	Sex M	Place of Birth UNKNOWN	Country of Citizenship US				
	Current Address 120 CRESTVIEW CT ANGIER NC 27501-		Phone	Occupation LABORER		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown	<input type="checkbox"/> Non-Resident				
	Employer's Name GRASS GROWERS		Address CLAYTON NC		Phone						
	Also Known As (Alias Names)		Hgt 604	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					
	Nearest Relative Name		Address		Phone						
ARREST INFO	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 356 W.CHURCH STREET ANGIER						
	Charge # 1 BREAKING OR ENTERING	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 220	Offense Jurisdiction (If not arresting Agency) ANGIER PD		Statute# 14-54(B) Warr Date Mo Date Year 02/11/2020				
	Charge # 2 LARCENY AFTER BREAK/ENTER	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 23H	Offense Jurisdiction (If not arresting agency) ANGIER PD		Statute# 14-72(B)(2) Warr Date Mo Date Year 02/11/2020				
	Charge # 3 POSSESSION OF STOLEN GOODS	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 280	Offense Jurisdiction (If not arresting agency) ANGIER PD		Statute# 14-71.1 Warr Date Mo Date Year 02/11/2020				
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 02/17/2020 Hrs: 14:24		Place Confined HARNETT DETENTION CENTER		Committing Magistrate W. DEAGAN						
	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 02/18/2020	Court of DISTRICT		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"/>	
COMPLAINANT	Name: ENNIS K J		Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>	Address: 175 BAIN STREET LILLINGTON NC 27546-			Phone: 910-893-9111				
	NARRATIVE ON 2-17-2020 THIS DETECTIVE WAS NOTIFIED BY ANGIER PD, OFFICER CAPSHAW, HE HAD ARRESTED, LUCAS DEVON MCKOY ON MY OUTSTANDING WARRANTS OF BREAKING AND OR ENTERING, LARCENY OF BREAKING AND OR ENTERING, POSSESSION OF STOLEN GOODS, 12 COUNTS OF LARCENY OF FIREARM AND POSSESSION OF STOLEN FIREARMS. LUCAS MCKOY WENT BEFORE MAGISTRATE D. WILLIAMS AND RECEIVED A 50,000 SECURED BOND WOTH A FIRST APPEARANCE OF 2-18-2020.										
STATUS	Arresting Officer Signature/ID # ENNIS KEVIN JAY KJE		Date/Time Submitted Mo Date Year 02/17/2020 Hrs: 17:41		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: 02/17/2020	CASE #: 20000338
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LUCAS DEVON MCKOY WAS ENTERED INTO NCIC AS WANTED BY THIS AGENCY. THIS ARREST REPORT WILL REMOVE MUCAS MCKOY FROM NCIC. NOTHING FURTHER

REPORTING OFFICER _____ ID _____

APPROVING SUPERVISOR _____ ID _____

ARREST REPORT

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 02/17/2020 Hrs: 10:28		OCA 19006208					
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 3510NBM	Arrest Tract 1172	Residence Tract 1172	Arrest Number						
ARRESTEE INFORMATION	Name (Last, First, Middle) COLLINS MATTHEW ARNOLD		DOB Mo Date Year	Age 35	Race W	Sex M	Place of Birth NC	Country of Citizenship US			
	Current Address 4844 MCLEAN CHAPEL CHURCH RD BUNNLEVEL NC			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 160	Hair BROWN	Eye HAZEL	Skin Tone FAIR	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk			
	Scars, Marks, Tattoos		Social Security #	DOB	State NC	Misc. # and Type					
	Nearest Relative Name		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 4844 MCLEAN CHAPEL CHURCH RD BUNNLEVEL						
	Charge # 1 BREAKING AND OR ENTERING	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 220	Offense Jurisdiction (If not arresting Agency)		Statute# 14-54(A)	Warr Date Mo Date Year 12/20/2019			
	Charge # 2 LARCENY AFTER BREAK/ENTER	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 23H	Offense Jurisdiction (If not arresting agency)		Statute# 14-72(B)(2)	Warr Date Mo Date Year 12/20/2019			
	Charge # 3 POSSESSION OF STOLEN GOODS	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 280	Offense Jurisdiction (If not arresting agency)		Statute# 14-71.1	Warr Date Mo Date Year 12/20/2019			
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 02/17/2020 Hrs:		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 \$15,000.00		Trial Date 02/18/2020	Court of DISTRICT		City LILLINGTON			
	Assisting Officer Name/ID Number ZIMMERMAN CHRISTOPHER LEE CLZ			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: WEAVER M E		Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>		Address: 175 BAIN ST. LILLINGTON NC 27546-			Phone: 910-893-9111			
	NARRATIVE ON FEBRUARY 17, 2020 THE DEFENDANT, MATTHEW COLLINS, WAS ARRESTED ON A HARNETT COUNTY WFA FOR BREAKING AND ENTERING, LARCENY AFTER BREAKING AND ENTERING, AND POSSESSION OF STOLEN GOODS. THE DEFENDANT WENT BEFORE THE PRESIDING MAGISTRATE, C. SMITH, WHO ISSUED A SECURED BOND OF \$15,000.00 AND A FIRST APPEARANCE IN DISTRICT COURT ON FEBRUARY 18, 2020. THE DEFENDANT WAS PLACED IN THE HARNETT COUNTY JAIL AT THIS TIME. THE DEFENDANT WAS ENTERED IN NCIC AND WILL BE REMOVED FROM NCIC AND NCAWARE ON THIS DATE.										
STATUS	Arresting Officer Signature/ID # ELMORE SPENCER JOE SJE		Date/Time Submitted Mo Date Year 02/17/2020 Hrs:11:40		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					