



**NEWS RELEASE**

**HARNETT COUNTY SHERIFF'S OFFICE**

**BY**

**SHERIFF WAYNE COATS**

**Wednesday**

**January 15, 2020**

# ARREST REPORT located

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 01/14/2020 Hrs: 13:38		OCA 20000284							
	<input checked="" type="checkbox"/> Taken Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) 3141NBR	Arrest Tract 1183	Residence Tract 1183	Arrest Number								
ARRESTEE INFORMATION	Name (Last, First, Middle) SPRUILL MICHAEL RAVEN		D.O.B. Mo Date Year	Age 42	Race W	Sex F	Place of Birth VA	Country of Citizenship US					
	Current Address 140 KNOTTS ISLAND RD. KNOTTS ISLAND NC 27950-			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) RAVEN		Hgt 504	Wgt 135	Hair OTHER	Eye GREY	Skin Tone FAIR	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 ANDREA ROBERTSON		Address 140 KNOTTS ISLAND RD. KNOTTS ISLAND NC 27950-			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 type="checkbox"/> Warrant	Place of Arrest 175 BAIN ST. LILLINGTON								
	Charge # 1 FAILURE TO APPEAR ON FELONY	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 3	DCI Code 2640	Offense Jurisdiction (If not arresting Agency) CURRITUCK		Statute# 15A-543(B)	Warr Date Mo Date Year 05/08/2019					
	Charge # 2 FAILURE TO APPEAR ON MISDEMEANOR	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 2640	Offense Jurisdiction (If not arresting agency) CURRITUCK		Statute# 15A-543(C)	Warr Date Mo Date Year 05/08/2019					
	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 01/14/2020 Hrs: 14:00		Place Confined HARNETT COUNTY JAIL			Committing Magistrate B. HOYLE							
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other		Amt. Bond \$100,000.00	Trial Date 02/10/2020	Court of CURRITUCK		City KNOTTS ISLAND						
	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"/>
COM- PLAIN- ANT	Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address:				Phone:					
	CURRITUCK COUNTY C.S.C.												
NARRATIVE	TUESDAY, JANUARY 14TH, 2020:												
	ON TUESDAY, JANUARY 14TH, 2020, AT APPROXIMATELY 1:38 P.M., I, DETECTIVE M.E. WEAVER JR., ARRESTED THE DEFENDANT ON A COUNT OF FOUR OUTSTANDING PROBATION VIOLATIONS.  THE DEFENDANT WAS PROVIDED WITH A \$100,000.00 SECURED BOND AND A COURT DATE OF FEBRUARY												
STATUS	Arresting Officer Signature/ID # WEAVER MICHAEL EVAN MEWE			Date/Time Submitted Mo Date Year 01/14/2020 Hrs: 14:06			Supervisor Signature						
	Case Status: <input type="checkbox"/> Further Inv. <input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed		Case Disposition: <input type="checkbox"/> Cleared By Arrest/No Supplement Needed <input checked="" type="checkbox"/> Arrest/No Investigation				Arrestee Signature						

### ARREST REPORT

<b>AGENCY INFO</b>	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000		Date/Time of Arrest Mo Date Year 01/14/2020 Hrs: 10:05		OCA 20000278							
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 3140NBV		Arrest Tract 1174		Residence Tract 1174		Arrest Number						
<b>ARRESTEE INFORMATION</b>	Name (Last, First, Middle) GREEN AARON MICHAEL			D.O.B. Mo Date Year		Age 42	Race W	Sex M	Place of Birth IN	Country of Citizenship US				
	Current Address 109 S. FOURTH ST. SPRING-LAKE NC 28390-				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) N/A				Hgt 507	Wgt 220	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				Social Security #		OLN		State NC	Misc. # and Type Driver's License				
	Nearest Relative Name N/A				Address				Phone					
<b>ARREST INFO</b>	If Armed, Type of Weapon 97		<input type="checkbox"/> On-View	<input type="checkbox"/> Criminal Summons	Place of Arrest 29 N. KELLY CT. LILLINGTON									
			<input checked="" type="checkbox"/> Order for Arrest	<input type="checkbox"/> Citation	<input type="checkbox"/> Warrant									
	Charge # 1 FAILURE TO APPEAR ON FELONY		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 2640	Offense Jurisdiction (If not arresting Agency)			Statute# 15A-543(B)	Warr Date Mo Date Year 06/17/2019				
	Charge # 2		<input type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts	DCI Code	Offense Jurisdiction (If not arresting agency)			Statute#	Warr Date Mo Date Year				
Charge # 3		<input type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts	DCI Code	Offense Jurisdiction (If not arresting agency)			Statute#	Warr Date Mo Date Year					
<b>VEH. INFO.</b>	VYR	Make	Model	Style	Color	Lic/Lis		VIN						
	Vehicle: 1: <input type="checkbox"/> Left at Scene <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured Date/Time _____ Hrs _____ 2: <input type="checkbox"/> Released to other at owners request <input type="checkbox"/> Name of Other _____ 3: <input type="checkbox"/> Impounded <input type="checkbox"/> Place of storage _____ Inventory on File? <input type="checkbox"/>													
<b>CONFINED BOND INFO</b>	Date/Time Confined 01/14/2020 Hrs: 10:45		Place Confined HARNETT COUNTY DETENTION 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 \$10,000.00		Trial Date 02/18/2020		Court of CUMBERLAND COUNTY		City FAYETTEVILLE					
	Assisting Officer Name/ID Number				Released By Name/Dept/ID				Date/Time Released Hrs:					
Status Codes L-Lost S-Stolen R-Recovered D-Damaged Z-Seized B-Burned C-Counterfeit/Forged F-Found (Check "OJ" column if recovered for other jurisdiction)														
<b>DRUGS AT ARREST</b>	DCI	Status	Quantity	Type Measure	Suspected Type				Check up to 3 types of activity for each					
									Possess	Buy	Sale	Mfg.	Importing	Operating
<b>COMPLAINANT</b>	Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>				Address:				Phone:					
	CUMBERLAND COUNTY MAGISTRATE													
<b>NARRATIVE</b>	TUESDAY, JANUARY 14TH, 2020:													
	ON TUESDAY, JANUARY 14TH, 2020, AT APPROXIMATELY 10:45 A.M., I, DETECTIVE M.E. WEAVER JR., SERVED THE DEFENDANT WITH AN OUTSTANDING ORDER FOR ARREST (OFA).  THE DEFENDANT WAS BROUGHT BEFORE THE HONORABLE MAGISTRATE, D. MCLEAN, WHO PROVIDED													
<b>STATUS</b>	Arresting Officer Signature/ID # WEAVER MICHAEL EVAN MEWE			Date/Time Submitted Mo Date Year 01/14/2020 Hrs: 10:50			Supervisor Signature							
	Case Status: <input type="checkbox"/> Further Inv. <input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed			Case Disposition: <input type="checkbox"/> Cleared By Arrest/No Supplement Needed <input checked="" type="checkbox"/> Arrest/No Investigation			Arrestee Signature							

### ARREST REPORT

<b>AGENCY INFO</b>	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year Hrs:		OCA 19007400						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 3142NBN	Arrest Tract 1116	Residence Tract 1116		Arrest Number						
<b>ARRESTEE INFORMATION</b>	Name (Last, First, Middle) NANCE DAWN MARIE		D.O.B. Mo Date Year	Age 45	Race W	Sex M	Place of Birth MD	Country of Citizenship US				
	Current Address PALOMINO MOTEL 111 SANFORD NC 27330--		Phone		Occupation LABORER		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident					
	Employer's Name UNEMPLOYED		Address		Phone							
	Also Known As(Alias Names)		Hgt 502	Wgt 145	Hair BROWN	Eye BROWN	Skin Tone FAIR	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					
	Nearest Relative Name TREVOR RADCLIFFE SON		Address OFF MARKS RD CAMERON NC 28326-		Phone							
<b>ARREST INFO</b>	If Armed, Type of Weapon		<input type="checkbox"/> On-View <input type="checkbox"/> Order for Arrest	<input type="checkbox"/> Criminal Summons <input type="checkbox"/> Citation	<input checked="" type="checkbox"/> Warrant		Place of Arrest 14591 NC 27W, SANFORD					
	Charge # 1 LARCENY BY EMPLOYEE	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 11	DCI Code 0690	Offense Jurisdiction (If not arresting Agency)		Statute# 14-74	Warr Date Mo Date Year 01/14/2020				
	Charge # 2 FELONY CONSPIRACY	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 10	DCI Code 2690	Offense Jurisdiction (If not arresting agency)		Statute# 14-2.4(A)	Warr Date Mo Date Year 01/14/2020				
	Charge # 3 POSSESSING/CONCEALING STOLEN PROPERTY	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 10	DCI Code 1330	Offense Jurisdiction (If not arresting agency)		Statute# 14-71.1	Warr Date Mo Date Year 01/14/2020				
<b>VEH. INFO.</b>	VYR	Make	Model	Style	Color	Lic/Lis	VIN					
	Vehicle: 1: <input type="checkbox"/> Left at Scene <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured Date/Time _____ Hrs _____ 2: <input type="checkbox"/> Released to other at owners request <input type="checkbox"/> Name of Other _____ 3: <input type="checkbox"/> Impounded <input type="checkbox"/> Place of storage _____ Inventory on File? <input type="checkbox"/>											
<b>CONFINED BOND INFO</b>	Date/Time Confined 01/14/2020 Hrs: 13:10		Place Confined HARNETT COUNTY DETENTION CENTER			Committing Magistrate JOYLE						
	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 \$75,000.00	Trial Date 01/15/2020	Court of 9999		City LILLINGTON					
	Assisting Officer Name/ID Number BRITT MICHAEL RUDOLPH MRB			Released By Name/Dept/ID			Date/Time Released Hrs:					
<b>DRUGS AT ARREST</b>	Status Codes: L-Lost S-Stolen R-Recovered D-Damaged Z-Seized B-Burned C-Counterfeit/Forged F-Found (Check "OJ" column if recovered for other jurisdiction)											
	DCI	Status	Quantity	Type Measure	Suspected Type			Check up to 3 types of activity for each				
								Possess	Buy	Sale	Mfg.	Importing
<b>COMPLAINANT</b>	Name: JB TEASLEY		Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>		Address: 175 BAIN ST LILLINGTON NC 27546-			Phone: 910-893-0155				
	<b>NARRATIVE</b>											
WESTSIDE/BUSINESS/SANFORD												
MS NANCE WAS ARRESTED FOR THE ELEVEN (11) WARRANTS FOR LARCENY BY EMPLOYEE, CONSPIRACY (F), POSS STOLEN GOODS/PROPERTY (F). SHE WAS GIVEN A \$75000.00/SECURE BOND \$75,000.00												
<b>STATUS</b>	Arresting Officer Signature/ID # TEASLEY JOSHUA BENJAMIN JBT		Date/Time Submitted Mo Date Year 01/14/2020 Hrs: 13:51		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						