



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

NEWS RELEASE

January 17, 2019

ARREST REPORT

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 01/16/2019 Hrs: 11:42		OCA 19000292							
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 9427NAY		Arrest Tract 1183	Residence Tract	Arrest Number							
ARRESTEE INFORMATION	Name (Last, First, Middle) ROGERS GARY EUGENE			D.O.B. Mo Date Year	Age 62	Race W	Sex M	Place of Birth NC	Country of Citizenship US				
	Current Address 1736 WILMINGTON HWY FAYETTEVILLE NC 28306-			Phone	Occupation SELF EMPLOYED		<input type="checkbox"/> Resident <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> Non-Resident						
	Employer's Name			Address			Phone						
	Also Known As (Alias Names)				Hgt 508	Wgt 210	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 #	DOI N	State NC	Misc. # and Type					
	Nearest Relative Name			Address			Phone						
ARREST INFO	If Armed, Type of Weapon 97		<input type="checkbox"/> On-View Order for Arrest <input type="checkbox"/> Criminal Summons Citation <input checked="" type="checkbox"/> Warrant		Place of Arrest 175 BAIN ST. LILLINGTON								
	Charge # 1 OBTAINING MONEY/PROPERTY BY FALSE PRETENSE		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1120	Offense Jurisdiction (If not arresting Agency)		Statute# 14-100	Warr Date Mo Date Year 01/09/2019				
	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 01/16/2019 Hrs: 11:45		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 \$10,000.00		Trial Date 01/17/2019	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"/>	<input type="checkbox"/>
COMPLAINANT	Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>		Address:				Phone:						
	ON THE DATE AND TIME LISTED ABOVE, I DEPUTY D.E. ABNEY MET WITH THE DEFENDANT AT THE HARNETT COUNTY SHERIFF'S OFFICE IN REFERENCE TO TURNING HIMSELF IN ON THE ABOVE LISTED CHARGE. HE WAS TAKEN INTO CUSTODY AND WAS PROCESSED WITHOUT INCIDENT.												
STATUS	Arresting Officer Signature/ID # ABNEY DAVID EDWARD DEA			Date/Time Submitted Mo Date Year 01/16/2019 Hrs: 11:51		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 checked="" 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 01/16/2019 Hrs: 16:18		OCA 19000302
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) 9432NAG	Arrest Tract 1115	Residence Tract 1115	Arrest Number 1	

ARRESTEE INFORMATION	Name (Last, First, Middle) LOOPER DIANNA		D.O.B. Mo Date Year	Age 39	Race W	Sex F	Place of Birth BLUEFIELD WV	Country of Citizenship US	
	Current Address 373 FLOWERS DR SANFORD NC 27332-		Phone	Occupation UNEMPLOYED		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident			
	Employer's Name		Address			Phone			
	Also Known As (Alias Names)				Hgt 503	Wgt	Hair BLACK	Eye BROWN	Skin Tone
	Scars, Marks, Tattoos				Social Security #	OLN	State	Misc. # and Type	

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 373 FLOWERS DR SANFORD			
	Charge # 1 FELONY PROBATION VIOLATION OUT OF COUNTY	<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 01/16/2019	
	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 01/16/2019 Hrs: 18:00		Place Confined HARNETT COUNTY DETENTION CENTER			Committing Magistrate R. HOLDER		
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other		Amt. Bond \$100,000.00		Trial Date 01/17/2019	Court of HARNETT		City LILLINGTON
	Assisting Officer Name/ID Number			Released By Name/Dept/ID			Date/Time Released Hrs:	

Status Codes L-Lost S-Stolen R-Recovered D-Damaged Z-Seized B-Burned C-Counterfeit/Forged F-Found
(Check "OJ" column if recovered for other jurisdiction)

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: THOMAS J R		Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>	Address: 175 BAIN ST LILLINGTON NC 27546-		Phone: 910-893-9111
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NARRATIVE

ON 01-16-2019 I DEPUTY COLLINSWORTH RESPONDED TO THE HARNETT COUNTY JAIL FOR AN INDIVIDUAL WITH AN OUT STANDING ARREST WARRANT OUT OF HARNETT COUNTY (19CR 050190). I ARRIVED AT THE JAIL AND BROUGHT A MS. DIANNA LOOPER BEFORE MAGISTRATE R. HOLDER. MAGISTRATE R. HOLDER ISSUED A \$100000 SECURE BOND. MS. LOOPER HAS A COURT DATE OF 01-17-2019 AT THE HARNETT COUNTY COURT HOUSE. MS. LOOPER WAS FURTHER PROCESSED AND HANDED OVER TO THE JAIL STAFF.

STATUS	Arresting Officer Signature/ID # COLLINSWORTH JAMES JNC		Date/Time Submitted Mo Date Year 01/16/2019 Hrs: 18:10		Supervisor Signature	
	Case Status: <input type="checkbox"/> Further Inv. <input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed		Case Disposition: <input checked="" type="checkbox"/> Cleared By Arrest/No Supplement Needed <input type="checkbox"/> Arrest/No Investigation		Arrestee Signature	

ARREST REPORT *cleared*

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 01/09/2019 Hrs: 09:09		OCA 18000969
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 0466SLB		Arrest Tract 10	Residence Tract 10	Arrest Number

ARRESTEE INFORMATION	Name (Last, First, Middle) FIELDS CHAD AARON		DOB Mo Date Year	Age 42	Race W	Sex F	Place of Birth	Country of Citizenship US	
	Current Address 96 DAYS CT SANFORD NC 27332-			Phone	Occupation UNEMPLOYED		<input type="checkbox"/> Resident <input checked="" type="checkbox"/> Unknown	<input type="checkbox"/> Non-Resident	
	Employer's Name			Address			Phone		
	Also Known As (Alias Names) CHAD			Hgt 510	Wgt 200	Hair	Eye HAZEL	Skin Tone FAIR	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk
	Scars, Marks, Tattoos			Social Security #	DOB	State NC	Misc. # and Type		
	Nearest Relative Name UNK			Address			Phone		

ARREST INFO	If Armed, Type of Weapon		<input type="checkbox"/> On-View	<input type="checkbox"/> Criminal Summons	Place of Arrest MOORE COUNTY			
			<input type="checkbox"/> Order for Arrest	<input type="checkbox"/> Citation	<input checked="" type="checkbox"/> Warrant			
	Charge # 1 SAFE CRACKING	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 2690	Offense Jurisdiction (If not arresting Agency)		Statute# 14-89.1	Warr Date Mo Date Year 01/02/2019
	Charge # 2 LARCENY AFTER BREAK/ENTER	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 0690	Offense Jurisdiction (If not arresting agency)		Statute# 14-72(B)(2)	Warr Date Mo Date Year 01/02/2019
Charge # 3 LARCENY	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 0600	Offense Jurisdiction (If not arresting agency)		Statute# 14-72(B)	Warr Date Mo Date Year 01/02/2019	

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 01/09/2019 Hrs:	Place Confined	Committing Magistrate				
	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	Court of		City	
	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"/>
						<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
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NARRATIVE
 CHAD FIELDS WAS IDENTIFIED AS THE PERSON THAT BROKE INTO A SECURE LOCKED CONTAINER AND TOOK AN ELECTRONIC DEVICE IN FEBRUARY 2018. HE WAS ARRESTED IN MOORE COUNTY AND SERVED THIS WARRANT; BOND: \$10,000.00 SECURE.

STATUS	Arresting Officer Signature/ID # TEASLEY JOSHUA BENJAMIN JBT		Date/Time Submitted Mo Date Year 01/15/2019 Hrs:11:59	Supervisor Signature	
	Case Status: <input type="checkbox"/> Further Inv. <input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed	Case Disposition: <input checked="" type="checkbox"/> Cleared By Arrest/No Supplement Needed <input type="checkbox"/> Arrest/No Investigation		Arrestee Signature	