



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

NEWS RELEASE

July 6, 2020

ARREST REPORT

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000		Date/Time of Arrest Mo Date Year 07/05/2020 Hrs: 20:48		OCA 20003781															
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>		Fingerprint Card Check Digit # (CKN) 4562NBS		Arrest Tract 1120		Residence Tract 1120		Arrest Number													
ARRESTEE INFORMATION	Name (Last, First, Middle) GOLDMAN SAMUEL DAVID				Age 18		Race W		Sex M		Place of Birth DURHAM		Country of Citizenship US									
	Current Address 163 PINE HAWK DRIVE SPRING LAKE NC 28390-				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 602		Wgt 165		Hair BLONDE		Eye BLUE		Skin Tone LIGHT		Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk							
	Scars, Marks, Tattoos				OLN				State		Misc. # and Type											
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 0 YORK CT SPRING LAKE													
	Charge # 1 POSS W/INT/SELL/DEL MARIJUANA		<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 07/05/2020									
Charge # 2 MISDEMEANOR POSSESS SCHEDULE VI CONTROLLED SU		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd		Counts 1		DCI Code 35A		Offense Jurisdiction (If not arresting agency)		Statute# 90-95(D)(4)		Warr Date Mo Date Year 07/05/2020										
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 07/05/2020 Hrs: 21:39				Place Confined HARNETT COUNTY DETENTION CENTER				Committing Magistrate T.C. SMITH													
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other				Amt. Bond				Trial Date 07/06/2020		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	
	E		6		3		GM		MARIJUANA		E		<input checked="" type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	
E		6		1		GM		MARIJUANA		E		<input checked="" 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: GODFREY B. T.				Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>				Address: 175 BAIN ST LILLINGTON NC 27546-				Phone: 910-893-9111									
	<p>NARRATIVE</p> <p>ON 07/05/2020 AT APPROXIMATELY 2139 HOURS I ARRESTED SAMUEL GOLDMAN FOR POSSESSION WITH INTENT TO SELL AND DELIVER MARIJUANA, AS WELL AS SIMPLE POSSESSION OF A SCHEDULE VI CONTROLLED SUBSTANCE. I PLACED THE SUBJECT UNDER ARREST, DOUBLE LOCKING THE CUFFS BEHIND HIS BACK. I SEARCHED THE SUBJECT PRIOR TO PLACING HIM IN MY PATROL VEHICLE WITH NEGATIVE RESULTS. I THEN SEARCHED MY VEHICLE AFTER ARRIVING AT THE DETENTION CENTER WITH NEGATIVE RESULTS. I SEARCHED THE HOLDING CELL PRIOR TO PLACING THE SUBJECT INSIDE WITH</p>																					
STATUS	Arresting Officer Signature/ID # GODFREY BRENT TYLER BTG				Date/Time Submitted Mo Date Year 07/05/2020 Hrs:				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:
07/05/2020

CASE #:
20003781

NEGATIVE RESULTS.
A COURT DATE OF 07/06/220 WAS GIVEN WITH A BOND OF \$3,500 SECURED.

REPORTING OFFICER _____

ID _____

APPROVING SUPERVISOR _____

ID _____