



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

NEWS RELEASE

June 10, 2019

ARREST REPORT

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000		Date/Time of Arrest Mo Date Year 06/07/2019 Hrs: 17:57		OCA 19003305						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 0922NBT		Arrest Tract 1183		Residence Tract 1183		Arrest Number					
ARRESTEE INFORMATION	Name (Last, First, Middle) ALLEN TIMOTHY EUGENE			Age 41		Race W	Sex M	Place of Birth NC	Country of Citizenship US				
	Current Address 251 SMITH LUCAS LN DUNN NC 28334-			Phone		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) TIMMY			Hgt 59	Wgt 140	Hair BROWN	Eye GREEN	Skin Tone LIGHT	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk				
	Scars, Marks, Tattoos TAT TATTOOS TAT FARM DEATH AND LIFE WORDING 19 TAT TATTOOS TAT ARM TRIBAL 40 TAT TATTOOS TAT BACK TIMMY 45			Social Security # 241-55-0305		OLN 9792491		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 175 BAIN ST LILLINGTON					
	Charge # 1 LARCENY BY EMPLOYEE		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 2	DCI Code 0690	Offense Jurisdiction (If not arresting Agency)		Statute# 14-74	Warr Date Mo Date Year 06/07/2019				
	Charge # 2 FELONY 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 06/07/2019				
	Charge # 3 MISDEMEANOR LARCENY		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 0690	Offense Jurisdiction (If not arresting agency)		Statute# 14-72(A)	Warr Date Mo Date Year 06/07/2019				
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 06/07/2019 Hrs: 17:57		Place Confined HARNETT COUNTY DETENTION CENTER						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 \$30,000.00		Trial Date 06/10/2019		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
COMPLAINANT	Name: KNODEL M			Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: 175 BAIN ST LILLINGTON NC 27546-			Phone: 910-893-9111			
	NARRATIVE ON 06/07/2019 AT 1757 HOURS I SERVED A WARRANT FOR ARREST ON TIMOTHY ALLEN FELONY LARCENY AND LARCENY BY EMPLOYEE 2 COUNTS AND MISDEMEANOR LARCENY AND FELONY POSSESSION OF STOLEN GOODS AND MISDEMEANOR POSSESSION OF STOLEN GOODS. CLEAR NCIC												
STATUS	Arresting Officer Signature/ID # MCKINNON PATRICK JOSEPH PJM			Date/Time Submitted Mo Date Year 06/07/2019 Hrs: 17:57			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:
06/07/2019

CASE #:
19003305

NOTHING FOLLOWS

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 06/08/2019 Hrs: 12:10	OCA 19003314
	Taken <input checked="" type="checkbox"/> Fingerprint Card Check Digit # (CKN) Prints <input checked="" type="checkbox"/> 0928NBS Photos <input checked="" type="checkbox"/>	Arrest Tract 1141	Residence Tract 1141	Arrest Number

ARRESTEE INFORMATION	Name (Last, First, Middle) CARTER THOMAS EBEN		Age 25	Race W	Sex M	Place of Birth NC	Country of Citizenship US
	Current Address 556 LIPSCOMB RD ANGIER NC 27501-		Mo Date Year	Occupation SELF EMPLOYED	<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 180	Hair BROWN	Eye BLUE	Skin Tone FAIR	Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk
	Scars, Marks, Tattoos	Social Security #	OLN	State	Misc. # and Type		

ARREST INFO	If Armed, Type of Weapon	<input type="checkbox"/> On-View	<input type="checkbox"/> Criminal Summons	Place of Arrest 556 LIPSCOMB RD ANGIER			
		<input checked="" type="checkbox"/> Order for Arrest	<input type="checkbox"/> Citation	<input type="checkbox"/> Warrant			
	Charge # 1 COURT VIOLATION	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 2640	Offense Jurisdiction (If not arresting Agency)	Statute# 15A-543(B)	Warr Date Mo Date Year 05/14/2019
	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

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 06/08/2019 Hrs:12:10	Place Confined HARNETT COUNTY JAIL	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 06/11/2019	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)

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: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>	Address: LILLINGTON NC	Phone:
	CLERK OF SUPERIOR COURT		

NARRATIVE

ON 06/08/2019, THOMAS CARTER WAS ARRESTED ON A HARNETT COUNTY ORDER FOR ARREST (POSS STOLEN GOODS)(18CR054443). HE WAS TAKEN BEFORE THE MAGISTRATE, GIVEN A BOND OF \$10,000 SECURED, AND GIVEN A COURT DATE OF 06/11/2019 IN DISTRICT COURT OF LILLINGTON. CLEAR NCIC.

STATUS	Arresting Officer Signature/ID # WERBELOW JOHN ASHLEY JAW	Date/Time Submitted Mo Date Year 06/08/2019 Hrs:12:39	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

Cleared

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 06/08/2019 Hrs: 22:50		OCA 19003320						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 0931NBS	Arrest Tract 1164	Residence Tract 1164	Arrest Number 1							
ARRESTEE INFORMATION	Name (Last, First, Middle) ELLIOT FANTASIA CHYNIQUE		Age 18	Race B	Sex F	Place of Birth NC	Country of Citizenship US					
	Current Address 171 LEONARD DR LILLINGTON NC			Occupation LABORER	<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident							
	Employer's Name WENDY'S		Address 210 N ANGIER NC			Phone						
	Also Known As (Alias Names)		Hgt 507	Wgt 160	Hair BLACK	Eye	Skin Tone DARK	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk				
	Scars, Marks, Tattoos		Social Security #		State NC	Misc. # and Type						
	Nearest Relative Name						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 171 LEONARD DR LILLINGTON							
	Charge # 1 LARCENY OF A FIREARM	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 0690	Offense Jurisdiction (If not arresting Agency) DUNN	Statute# 14-72(B)	Warr Date Mo Date Year 06/07/2019					
	Charge # 2 LARCENY OF MOTOR VEHICLE	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 0710	Offense Jurisdiction (If not arresting agency) DUNN	Statute# 14-72(A)	Warr Date Mo Date Year 06/07/2019					
	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 06/08/2019 Hrs: 23:30		Place Confined HARNETT COUNTY JAIL									
	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 \$30,000.00	Trial Date 06/11/2019	Court of DISTRICT	City LILLINGTON						
	Assisting Officer Name/ID Number ODOM STORM TRISTIAN STO			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-PLAINANT	Name: JACOBS Z.			Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: 401 EAST BROAD ST. DUNN NC 28334-			Phone: 910-892-2399		
	ON 6/8/19 AT 2250 HOURS (HRS) I RESPONDED TO THE HARNETT COUNTY JAIL IN REFERENCE TO WARRANT SERVICE. UPON MY ARRIVAL I SEVERED, FANTASIA ELLIOT OUT OF DUNN CITY JURISDICTION. DISPATCH WAS ADVISED TO INFORM DUNN PD TO REMOVE SUBJECT FROM NCIC											
STATUS	Arresting Officer Signature/ID # NOWELL WILLIAM TIMOTHY WTN			Date/Time Submitted Mo Date Year 06/09/2019 Hrs: 12:12		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						