



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

NEWS RELEASE

June 17, 2019

Clear NCIC
ARREST REPORT

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 06/16/2019 Hrs: 20:30		OCA 18005542							
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 1024NBM	Arrest Tract 1171	Residence Tract 1171		Arrest Number							
ARRESTEE INFORMATION	Name (Last, First, Middle) SANDERSON MAY CRYSTAL			D.O.B. Mo Date Year	Age 28	Race I	Sex F	Place of Birth NC	Country of Citizenship US				
	Current Address 56 PALOMINA SPRING LAKE NC 28390-			Phone	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 505	Wgt 165	Hair BROWN	Eye BROWN	Skin Tone MDARK	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk				
	Scars, Marks, Tattoos			Identification #	OLN	State	Misc. # and Type						
	Nearest Relative Name			Address			Phone						
ARREST INFO	If Armed, Type of Weapon 99		<input type="checkbox"/> On-View	<input type="checkbox"/> Criminal Summons	Place of Arrest WIRE RD LINDEN								
			<input type="checkbox"/> Order for Arrest	<input type="checkbox"/> Citation	<input checked="" type="checkbox"/> Warrant								
	Charge # 1 LARCENY BY EMPLOYEE	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 5	DCI Code 0690	Offense Jurisdiction (If not arresting Agency)		Statute# 14-74	Warr Date Mo Date Year 03/06/2019					
	Charge # 2 OBTAIN PROPERTY 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 03/06/2019					
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 06/16/2019 Hrs:20:55		Place Confined HARNETT COUNTY DETENTION CENTER						Committee 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 \$20,000.00	Trial Date 06/17/2019	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: TEASLEY J			Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: 175 BAIN ST LILLINGTON NC 27546-			Phone: 910-893-9111			
	NARRATIVE ON 06/16/2019 A FEMALE WAS ARRESTED FOR A WARRANT FOR ARREST OUT OF HARNETT COUNTY. NCIC REMOVAL												
STATUS	Arresting Officer Signature/ID # LETARTE KEVIN JOSEPH KJL			Date/Time Submitted Mo Date Year 06/16/2019 Hrs:21:28			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

CLEAR NCIC

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 06/14/2019 Hrs: 11:50		OCA 19000974							
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 1508SLK	Arrest Tract 10	Residence Tract 10	Arrest Number								
ARRESTEE INFORMATION	Name (Last, First, Middle) BACELAN NAURIS		DOR Mo Date Year	Age 20	Race W	Sex M	Place of Birth ROMANIA	Country of Citizenship ROMANIA					
	Current Address 44 MAGNOLIA LANDING DR CAMERON NC 28326-		Phone	Occupation		<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 510	Wgt 160	Hair BROWN	Eye BROWN	Skin Tone MLIGHT	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk					
	Scars, Marks, Tattoos		Social Security #		State	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 MOORE COUNTY						
	Charge # 1 LARCENY BY REMOVE/DEST/DEACT/COMP	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 0690	Offense Jurisdiction (If not arresting Agency)		Statute# 14-72.11(2)	Warr Date Mo Date Year 03/21/2019					
	Charge # 2 POSSESSING/CONCEALING STOLEN PROPERTY	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1330	Offense Jurisdiction (If not arresting agency)		Statute# 14-71.1	Warr Date Mo Date Year 03/21/2019					
	Charge # 3 ATT 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 03/21/2019					
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 06/14/2019 Hrs: 11:21		Place Confined MCDC		Committing Magistrate								
	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 \$1,500.00		Trial Date 07/02/2019		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
								<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					
	NARRATIVE *****BUSINESS 87 CORRIDOR *****USE CLEAR NCIC** MR NAURIS WAS ARRESTED ON HCSO WARRANTS FOR THE ABOVE CHARGES. HE WAS GIVEN A \$15,000 UNSECURE BOND AND A COURT DATE OF JULY 2, 2019 BY MOORE COUNTY MAGISTRATE WRIGHT												
STATUS	Arresting Officer Signature/ID # TEASLEY JOSHUA BENJAMIN JBT		Date/Time Submitted Mo Date Year 06/15/2019 Hrs: 01:52		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 06/14/2019 Hrs: 10:30		OCA 19003420					
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 0993NBD	Arrest Tract 1183	Residence Tract	Arrest Number						
ARRESTEE INFORMATION	Name (Last, First, Middle) MCARTHUR JIMMY EARL		D.O.B. Mo Date Year	Age 46	Race B	Sex M	Place of Birth WAKE CO	Country of Citizenship US			
	Current Address 331 JERIBEC WILLOW SPRINGS NC 27592-		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 602	Wgt 200	Hair BLACK	Eye BROWN	Skin Tone MDARK	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 175 BAIN STREET LILLINGTON						
	Charge # 1 BURGLARY-NON-FORCED ENTRY	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 0520	Offense Jurisdiction (If not arresting Agency)		Statute# 14-54(A)	Warr Date Mo Date Year 06/13/2019			
	Charge # 2 ALL OTHER LARCENY	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 0690	Offense Jurisdiction (If not arresting agency)		Statute# 14-72(B)(2)	Warr Date Mo Date Year 06/13/2019			
	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 06/14/2019 Hrs: 11:00		Place Confined HARNETT 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 \$5,000.00	Trial Date 06/17/2019	Court of HARNETT		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"/>
						<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: MCKINNON P J		Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>		Address: 175 BAIN STREET LILLINGTON NC 27546-			Phone: 910-893-9111			
	NARRATIVE SUBJECT JIMMY EARL MCARTHUR WAS SERVED WARRANT FOR ARREST FOR FELONY BREAKING AND ENTERING AND LARCENY AFTER BREAKING AND ENTERING. HE WAS PLACED IN THE HARNETT JAIL ON \$5000 SECURED BOND BY MAGISTRATE D MCLEAN. NO NCIC DCI HIT.										
STATUS	Arresting Officer Signature/ID # WOOD BENJAMIN LLOYD BLW		Date/Time Submitted Mo Date Year 06/14/2019 Hrs: 12:00		Supervisor Signature						
	Case Status: <input type="checkbox"/> Further Inv. <input type="checkbox"/> Inactive <input 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

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000		Date/Time of Arrest Mo Date Year 06/14/2019 Hrs: 14:57		OCA 19003452						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>		Fingerprint Card Check Digit # (CKN) 0996NBY		Arrest Tract 1106		Residence Tract 1106		Arrest Number				
ARRESTEE INFORMATION	Name (Last, First, Middle) NEWMAN MATTHEW MICHAEL				D.O.B. Mo Date Year		Age 39	Race W	Sex M	Place of Birth NY		Country of Citizenship USA	
	Current Address 95 ASPEN AVE A SPRING LAKE NC				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 509	Wgt 190	Hair BLONDE	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	Misc. # and Type			
	Nearest Relative Name				Address				Phone				
ARREST INFO	If Armed, Type of Weapon		<input type="checkbox"/> On-View		<input type="checkbox"/> Criminal Summons		Place of Arrest 95 ASPEN AVE SPRING LAKE						
			<input type="checkbox"/> Order for Arrest		<input type="checkbox"/> Citation		<input checked="" type="checkbox"/> Warrant						
	Charge # 1 PAROLE & PROBATION VIOLATIONS		<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 06/12/2019			
	Charge # 2 All Other		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 2690	Offense Jurisdiction (If not arresting agency)			Statute# 14-196.3	Warr Date Mo Date Year 06/05/2019			
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 06/14/2019 Hrs: 15:40		Place Confined HARNETT COUNTY DETENTION CENTER				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 \$30,500.00		Trial Date 06/17/2019		Court of HARNETT COUNTY			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 type="checkbox"/> Victim <input type="checkbox"/>				Address:				Phone:				
	<p>Z.S. PRITCHETT A-22 OCA# 19003452</p> <p>WARRANT FOR ARREST - 19CR 052028 CYBERSTALKING- MISDEMEANOR</p> <p>ORDER FOR ARREST- 18CCRS000260 PROBATION VIOLATION- FELONY</p>												
STATUS	Arresting Officer Signature/ID # PRITCHETT ZACHARY SCOTT ZSP				Date/Time Submitted Mo Date Year 06/14/2019 Hrs: 16:00		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 06/15/2019 Hrs: 03:25		OCA 19003462						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 1005NBS	Arrest Tract 1124	Residence Tract 1124		Arrest Number						
ARRESTEE INFORMATION	Name (Last, First, Middle) MURCHISON JAMAR CORDERO			D.O.B. Mo Date Year	Age 30	Race B	Sex M	Place of Birth SANFORD NC	Country of Citizenship US			
	Current Address 505 OAKWOOD AVE SANFORD NC 27330-			Occupation UNEEMPLOYED		<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 506	Wgt 140	Hair BLACK	Eye BROWN	Skin Tone DRK	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 C License				
	Nearest Relative Name			Address			Phone					
ARREST INFO	If Armed, Type of Weapon		<input type="checkbox"/> On-View	<input type="checkbox"/> Criminal Summons	Place of Arrest 832 GRIFFIN RD LILLINGTON							
			<input type="checkbox"/> Order for Arrest	<input type="checkbox"/> Citation	<input checked="" type="checkbox"/> Warrant							
	Charge # 1 BREAK/ENTER TERRORIZE/INJURE	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 0510	Offense Jurisdiction (If not arresting Agency)		Statute# 14-54(A1)	Warr Date Mo Date Year 06/15/2019				
	Charge # 2 DOMESTIC CRIMINAL TRESPASS	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 2670	Offense Jurisdiction (If not arresting agency)		Statute# 14-134.3	Warr Date Mo Date Year 06/15/2019				
Charge # 3 ASSAULT ON A FEMALE	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 0810	Offense Jurisdiction (If not arresting agency)		Statute# 14-33(B)(2)	Warr Date Mo Date Year 06/15/2019					
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 06/15/2019 Hrs:05:00		Place Confined HARNETT COUNTY DETENTION CENTER			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 \$40,000.00		Trial Date 06/17/2019	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)											
	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: 175 BAIN STREET LILLINGTON NC 27546-				Phone: 910-893-9111				
	Name: T.W SWARTZLANDER											
NARRATIVE	ON 06-15-2019 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 06/15/2019 Hrs:06:45		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 06/16/2019 Hrs: 02:30		OCA 19003482						
	Taken Prints <input checked="" type="checkbox"/> Photos <input type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 1018NBB		Arrest Tract 1109		Residence Tract 1109		Arrest Number					
ARRESTEE INFORMATION	Name (Last, First, Middle) FREDERICK ANDRAE LAVARES			DOB Mo Date Year		Age 18	Race B	Sex M	Place of Birth NC	Country of Citizenship US			
	Current Address 18301 NC HWY 27W CAMERON NC 28326-			Phone		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 150	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			#	State NC	Misc. # and Type							
	Nearest Relative			Address			Phone						
ARREST INFO	If Armed, Type of Weapon 03		<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 PLANTATION DR CAMERON								
	Charge # 1 POSSESS STOLEN FIREARM		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1330	Offense Jurisdiction (If not arresting Agency)		Statute# 14-71.1	Warr Date Mo Date Year 06/16/2019				
	Charge # 2 CARRYING CONCEALED GUN		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 1530	Offense Jurisdiction (If not arresting agency)		Statute# 14-269(A1)	Warr Date Mo Date Year 06/16/2019				
	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 06/16/2019 Hrs: 03:00		Place Confined HARNETT COUNTY DETENTION CENTER			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 \$15,000.00		Trial Date 06/17/2019	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
COMPLAINANT	Name: ALLEN M J			Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: 175 BAINST LILLINGTON NC 27546-			Phone: 910-893-9111			
	NARRATIVE ON 06/16/2019 A MALE WAS ARRESTED FOR A WARRANT FOR ARREST OUT OF HARNETT COUNTY.												
STATUS	Arresting Officer Signature/ID # LETARTE KEVIN JOSEPH KJL			Date/Time Submitted Mo Date Year 06/16/2019 Hrs: 03:30			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							