



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

NEWS RELEASE

June 18, 2019

ARREST REPORT

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 06/17/2019 Hrs: 08:52		OCA 19003503							
	Taken Prints <input type="checkbox"/> Fingerprint Card Check Digit # (CKN) 1032NBP	Arrest Tract	Residence Tract	Arrest Number									
ARRESTEE INFORMATION	Name (Last, First, Middle) HOPKINS CASEY TURNER		DOB Mo Date Year	Age 30	Race W	Sex F	Place of Birth	Country of Citizenship					
	Current Address 805 COLEY FARM FUQUAY VARINA NC 27526-		Phone	Occupation CLS C SUSPENDED NEG NCIC		<input 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 105	Hair BROWN	Eye BROWN	Skin Tone	Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk					
	Scars, Marks, Tattoos		State NC	Misc. # and Type									
	Nearest Relative Name		Address		Phone								
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 1203 BUD HAWKINS RD DUNN								
	Charge # 1 POSSESS METHAMPHETAMINE	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 001	DCI Code 1810	Offense Jurisdiction (If not arresting Agency)		Statute# 90-95(A)(3)	Warr Date Mo Date Year 06/17/2019					
	Charge # 2 POSSESS SCHEDULE III CONTROLLED SUBSTANCE	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 001	DCI Code 1810	Offense Jurisdiction (If not arresting agency)		Statute# 90-95(A)(3)	Warr Date Mo Date Year 06/17/2019					
	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 06/17/2019 Hrs: 12:00		Place Confined HC 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 \$25,000.00	Trial Date	Court of DISTRICT		City LILLINGTON						
STATUS CODES	Assisting Officer Name/ID Number PEREZ MATTHEW ALEJANDRO		Released By Name/Dept/ID MAP		Date/Time Released Hrs:								
	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						
	L	Z	.5	GM	AMPHETAMINES/METHAMPHETAMINES		L	<input checked="" type="checkbox"/> Possess <input type="checkbox"/> Buy <input type="checkbox"/> Sale <input type="checkbox"/> Mfg. <input type="checkbox"/> Importing <input type="checkbox"/> Operating					
	H	Z	4	DU	OTHER NARCOTICS		H	<input checked="" type="checkbox"/> Possess <input type="checkbox"/> Buy <input type="checkbox"/> Sale <input type="checkbox"/> Mfg. <input type="checkbox"/> Importing <input type="checkbox"/> Operating					
COMPLAINANT	Name: Complainant <input type="checkbox"/> Victim <input type="checkbox"/>				Address:				Phone:				
	NARRATIVE ON THE DATE AND TIME SHOWN SUSPECT CASEY TURNER HOPKINS WAS ARRESTED AND CHARGED WITH FELONY POSSESSION OF METHAMPHETAMINE AND MISD. POSSESSION OF SCHEDULE 3 NARCOTICS WHICH WAS SUBOXONE SUSPECT WAS TAKEN TO THE HC JAIL AND PROCESSED ON THE WARRANT THE ITEMS WERE PLACED INTO EVIDENCE WITHOUT INCIDENT.												
STATUS	Arresting Officer Signature/ID # CARROLL CHRISTOPHER J CJC		Date/Time Submitted Mo Date Year 06/17/2019 Hrs: 11:03		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 06/17/2019 Hrs: 13:02		OCA 19003510						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 1035NBD	Arrest Tract 1183	Residence Tract 1183	Arrest Number							
ARRESTEE INFORMATION	Name (Last, First, Middle) LOCKLEAR BRANDON JAMES			Age 21	Race W	Sex M	Place of Birth					
	Current Address 105 E. POPE ST. COATS NC 27521-			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 510	Wgt 170	Hair BROWN	Eye BLUE	Skin Tone LIGHT				
	Scars, Marks, Tattoos			Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk	State NC			Misc. # and Type				
	Nearest Relative Name			Address		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 175 BAIN STREET LILLINGTON							
	Charge # 1 BREAK OR ENTER A MOTOR VEHICLE	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 4	DCI Code 2690	Offense Jurisdiction (If not arresting Agency)		Statute# 14-56					
	Charge # 2 MISDEMEANOR LARCENY	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 3	DCI Code 0690	Offense Jurisdiction (If not arresting agency)		Statute# 14-72(A)					
	Charge # 3 ATTEMPT BREAK/ENTER A MOTOR VEHICLE	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 2	DCI Code 2690	Offense Jurisdiction (If not arresting agency)		Statute# 14-56					
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 06/17/2019 Hrs: 13:02		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 \$50,000.00	Trial Date 06/21/2019	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"/>
							<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:				
	SUBJECT WAS ARRESTED FOR FIVE COUNTS OF FELONY BREAKING AND ENTERING A MOTOR VEHICLE, THREE COUNTS OF MISDEMEANOR LARCENY, AND TWO COUNTS OF ATTEMPTED BREAKING AND ENTERING A MOTOR VEHICLE											
STATUS	Arresting Officer Signature/ID # EASON WALTER LEE WLE			Date/Time Submitted Mo Date Year 06/17/2019 Hrs: 15:00		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

Cleared missing

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 06/17/2019 Hrs: 16:15		OCA 1900 35/4
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 1039NBK	Arrest Tract 1174	Residence Tract 1174 1174	Arrest Number	

ARRESTEE INFORMATION	Name (Last, First, Middle) BRAY LAUREN HUDSON		Age 22	Race W	Sex F	Place of Birth CHAPEL HILL NC	Country of Citizenship US	
	Current Address 3110 OVERHILLS RD BUNNLEVEL 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 505	Wgt 110	Hair BROWN	Eye BROWN	Skin Tone LIGHT	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			

ARREST INFO	If Armed, Type of Weapon		<input type="checkbox"/> On-View	<input type="checkbox"/> Criminal Summons	Place of Arrest 3110 OVERHILLS RD BUNNLEVEL		
			<input checked="" type="checkbox"/> Order for Arrest	<input type="checkbox"/> Citation	<input 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
	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 04/24/2019

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 06/17/2019 Hrs: 16:15	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 \$30,000.00	Trial Date	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)

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 type="checkbox"/> Victim <input type="checkbox"/>	Address:	Phone:

NARRATIVE
SUBJECT ARRESTED FOR PROBATION VIOLATION. CLEARED THROUGH NCIC

STATUS	Arresting Officer Signature/ID # CLUTTER JASON PAUL JPC	Date/Time Submitted Mo Date Year 06/17/2019 Hrs: 16:18	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

located

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 06/17/2019 Hrs: 16:02		OCA 19003518						
	Taken <input checked="" type="checkbox"/> Fingerprint Card Check Digit # (CKN) Prints <input checked="" type="checkbox"/> 1042NBK Photos <input checked="" type="checkbox"/>	Arrest Tract 1161		Residence Tract 1161		Arrest Number						
ARRESTEE INFORMATION	Name (Last, First, Middle) SENER SAMUEL MARTIN JR			D.O.B.	Age 26	Race W	Sex M	Place of Birth NC	Country of Citizenship US			
	Current Address 441 BERNICE TART LN DUNN NC			Phone	Occupation DISABLED		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident					
	Employer's Name			Address			Phone					
	Also Known As(Alias Names) LITTLE G			Hgt 509	Wgt 200	Hair BROWN	Eye BROWN	Skin Tone MLIGHT	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					
	Nearest Relative Name			Address			Phone					
ARREST INFO	If Armed, Type of Weapon 40		<input type="checkbox"/> On-View	<input type="checkbox"/> Criminal Summons	Place of Arrest 441 BERNICE TART LN DUNN							
			<input checked="" type="checkbox"/> Order for Arrest	<input type="checkbox"/> Citation <input type="checkbox"/> Warrant								
	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) WAYNE		Statute# 15A-1345	Warr Date Mo Date Year 06/11/2019				
	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"/> 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 06/17/2019 Hrs: 19:00		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 \$25,000.00	Trial Date 06/26/2019	Court of DISTRICT		City GOLDSBORO					
	Assisting Officer Name/ID Number VERRILL ALEXANDER HORACE AHV			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"/>
COM-PLAIN-ANT	Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: GOLDSBORO NC				Phone:				
	WAYNE COUNTY CLERK OF COURT											
NARRATIVE	ON 06-17-2019, I ARRESTED SAMUEL SENTER JR FOR THE ABOVE LISTED CHARGE. SAME WAS ENTERED NCIC AND A HIT REQUEST WAS SENT. SAME WAS PROCESSED AND CLEARED NOAWARE.											
	*****NCIC ENTERED NEEDS REMOVAL BY ENTERING AGENCY*****											
STATUS	Arresting Officer Signature/ID # BRITT MICHAEL RUDOLPH MRB			Date/Time Submitted Mo Date Year 06/19/2019 Hrs: 19:00			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 06/17/2019 Hrs: 17:53		OCA 19003517					
	Taken Prints Photos <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 1041NBY	Arrest Tract 1183	Residence Tract 1100		Arrest Number					
ARRESTEE INFORMATION	Name (Last, First, Middle) MANGUM CHRISTOPHER GATTIS			Age 26	Race W	Sex M	Place of Birth NC	Country of Citizenship US			
	Current Address 24 EULA COURT ANGIER NC 27501-			Occupation UNEEMPLOYED		<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 511	Wgt 150	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 LF ARM SKULL WITH SNAKE 18			Social Security #		State NC	Misc. # and Type Driver's License				
ARREST INFO	If Armed, Type of Weapon 97		<input type="checkbox"/> On-View	<input type="checkbox"/> Criminal Summons		Place of Arrest 175 BAIN STREET LILLINGTON					
			<input type="checkbox"/> Order for Arrest	<input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant							
	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 06/17/2019			
	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 06/17/2019			
Charge # 3 POSSESSION OF STOLEN GOODS	<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 06/17/2019				
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 06/17/2019 Hrs: 18:56		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 \$50,000.00		Trial Date 06/21/2019	Court of DISTRICT					
	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
COMPLAINANT	Name: WILKES C			Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: 100 WEST F STREET ERWIN NC 28339-			Phone: 910-897-5122	
	<p>NARRATIVE</p> <p>JUNE 17, 2019 (MONDAY) ON THIS DATE CHRISTOPHER MANGUM WAS TAKEN INTO CUSTODY FOR WARRANTS OUT OF HARNETT COUNTY. THESE CHARGES STEM FROM ERWIN POLICE OCA 19-1827. HE WAS GIVEN A SECURED BOND OF \$50,000.00 AND A COURT DATE OF 06/21/2019.</p>										
STATUS	Arresting Officer Signature/ID # REAGAN JAMES EDWARD JER			Date/Time Submitted Mo Date Year 06/17/2019 Hrs: 18:57		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					