



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

NEWS RELEASE

June 24, 2019

ARREST REPORT

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000		Date/Time of Arrest Mo Date Year 06/21/2019 Hrs: 22:40		OCA 19003628									
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>		Fingerprint Card Check Digit # (CKN) 1089NBX		Arrest Tract 1133		Residence Tract 1133		Arrest Number							
ARRESTEE INFORMATION	Name (Last, First, Middle) FERGUSON HUNTER				Age 20		Race W		Sex M		Place of Birth NC		Country of Citizenship US			
	Current Address 734 COTTON ROAD FUQUAY VARINA NC 27526-				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 600		Wgt 120		Hair RED		Eye BROWN		Skin Tone FAIR		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											
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 734 COTTON RD FUQUAY VARINA									
	Charge # 1 ALL OTHER LARCENY		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd		Counts 1		DCI Code 0690		Offense Jurisdiction (If not arresting Agency) WAKE		Statute# 14-72.11(2)		Warr Date Mo Date Year 06/21/2019			
	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 06/22/2019 Hrs: 12:19		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 \$5,000.00		Trial Date 08/12/2019		Court of WAKE		City RALEIGH							
	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: MCLAMB BRIAN				Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>				Address: 125 N MAIN STREET HOLLY SPRINGS NC 27540-				Phone: 919-557-9111			
	NARRATIVE															
ON 06/22/2019 I DEPUTY A.H. VERRILL ARRESTED HUNTER FERGUSON ON AN OUTSTANDING WAKE COUNTY ORDER FOR ARREST FOR REMOVE/DEST/DEACT COMPO. THE SUSPECT CLEARED NCIC.																
STATUS	Arresting Officer Signature/ID # VERRILL ALEXANDER AHV				Date/Time Submitted Mo Date Year 06/22/2019 Hrs: 12:13				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 06/21/2019 Hrs: 20:01		OCA 19003623
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 1086NBU		Arrest Tract 1183	Residence Tract 1100	Arrest Number

ARRESTEE INFORMATION	Name (Last, First, Middle) BAREFOOT TERRY LEE		D.O.B. Mo Date Year	Age 31	Race W	Sex M	Place of Birth RALEIGH, NC	Country of Citizenship US		
	Current Address 856 JADA ALLEN RD DUNN NC 28334-				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 511	Wgt 172	Hair RED	Eye HAZEL	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 NCDL			

ARREST INFO	If Armed, Type of Weapon		<input type="checkbox"/> On-View	<input type="checkbox"/> Criminal Summons	Place of Arrest 175 BAIN ST LILLINGTON			
			<input type="checkbox"/> Order for Arrest	<input type="checkbox"/> Citation	<input checked="" type="checkbox"/> Warrant			
	Charge # 1 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 06/04/2019
	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"/> 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 06/21/2019 Hrs: 21:15		Place Confined HCJ		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 \$2,000.00		Trial Date 06/24/2019		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)

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: L SCINTA		Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>	Address: DUNN POLICE		Phone:
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NARRATIVE
ON THIS DATE TERRY LEE BAREFOOT WAS SERVED THE ABOVE CHARGE. THE CHARGE WAS TAKEN OUT BY DUNN POLICE DEPARTMENT SCINTA. TERRY LEE BAREFOOT WAS CLEARED NCIC AND NCAWARE

STATUS	Arresting Officer Signature/ID # HILDRETH DAVID JAY DJH		Date/Time Submitted Mo Date Year 06/21/2019 Hrs: 20:15	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

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 06/21/2019 Hrs: 15:42		OCA 19003619						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 1084NBF		Arrest Tract 1111	Residence Tract 1100	Arrest Number						
ARRESTEE INFORMATION	Name (Last, First, Middle) SMITH IVAN LYNNEL			DOB Mo Date Year	Age 24	Race B	Sex M	Place of Birth MOORE COUNTY	Country of Citizenship US			
	Current Address 3133 CAMERON DRIVE CAMERON 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 53	Wgt 185	Hair BLACK	Eye BROWN	Skin Tone DARK	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk		
	Scars, Marks, Tattoos TAT TATTOOS ASIAN WORDS 10				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"/> Order for Arrest	<input type="checkbox"/> Criminal Summons <input type="checkbox"/> Citation	<input checked="" type="checkbox"/> Warrant	Place of Arrest 19805 HWY27 WEST CAMERON						
	Charge # 1 POSS WINT/SELL/DEL MARIJUANA	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1810	Offense Jurisdiction (If not arresting Agency)		Statute# 90-95(A)	Warr Date Mo Date Year 06/21/2019				
	Charge # 2 CONSPIRE SELL OR DELIVER MARIJUANA	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1890	Offense Jurisdiction (If not arresting agency)		Statute# 90-98	Warr Date Mo Date Year 06/21/2019				
	Charge # 3 SIMPLE POSSESSION SCHEDULE II CONTROLLED SUBS	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 1810	Offense Jurisdiction (If not arresting agency)		Statute# 90-95(D)(2)	Warr Date Mo Date Year 06/21/2019				
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 06/21/2019 Hrs: 17:30		Place Confined 175 BAIN STREET LILLINGTON NC			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 \$75,000.00		Trial Date 06/24/2019	Court of DISTRICT		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					
E	Z	12GRAMS	GM	MARIJUANA		E	<input checked="" type="checkbox"/> Possess	<input checked="" type="checkbox"/> Buy	<input type="checkbox"/> Sale	<input type="checkbox"/> Mfg.	<input type="checkbox"/> Importing	<input type="checkbox"/> 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: KNIGHT JOHN			Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: 175 BAIN STREET LILLINGTON NC			Phone: 910-893-9111		
	NARRATIVE IVAN SMITH WAS ARRESTED ON 06-21-2019 FOR PWISD MARIJUANA, CONSP SELL/DELIVER MARIJUANA AND SIMPLE POSSES SCHEDULE CS MISDEMEANOR. HE WAS PLACED IN THE JAIL UNDER A \$75,000.00 DOLLAR BOND. HE WAS CLEARED THROUGH NCIC.											
STATUS	Arresting Officer Signature/ID # KNIGHT JOHN CUMMINGS JCK			Date/Time Submitted Mo Date Year 06/21/2019 Hrs: 17:45		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

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000		Date/Time of Arrest Mo Date Year 06/21/2019 Hrs: 15:42		OCA 19003619					
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 1085NBB		Arrest Tract 1111		Residence Tract 1100		Arrest Number				
ARRESTEE INFORMATION	Name (Last, First, Middle) THOMPSON JAHID NY-SHAUN			DOB Mo Date Year		Age 26	Race B	Sex M	Place of Birth NJ	Country of Citizenship US		
	Current Address 506 GOLDSTON BLVD SANFORD			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 175	Hair BLACK	Eye BROWN	Skin Tone MEDIUM	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 checked="" type="checkbox"/> On-View <input type="checkbox"/> Order for Arrest		<input type="checkbox"/> Criminal Summons <input type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest 19805 NC 27 W CAMERON					
	Charge # 1 POSS WINT/SELL/DEL MARIJUANA		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1810	Offense Jurisdiction (if not arresting Agency)		Statute# 90-95(A)	Warr Date Mo Date Year 06/21/2019			
	Charge # 2 CONSPIRE SELL OR DELIVER MARIJUANA		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1890	Offense Jurisdiction (if not arresting agency)		Statute# 90-98	Warr Date Mo Date Year 06/21/2019			
	Charge # 3 SELL OR DELIVER SCHEDULE VI CONTROLLED SUBS		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1810	Offense Jurisdiction (if not arresting agency)		Statute# 90-95(A)(1)	Warr Date Mo Date Year 06/21/2019			
VEH. INFO.	VYR 2004	Make LEXUS	Model	Style	Color WHITE	Lic/Lis 1CQ235	VIN JT8BD69S8840195015					
	Vehicle: 1: <input type="checkbox"/> Left at Scene <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured Date/Time 06/21/2019 Hrs _____ 2: <input type="checkbox"/> Released to other at owners request <input type="checkbox"/> Name of Other _____ 3: <input checked="" type="checkbox"/> Impounded <input checked="" type="checkbox"/> Place of storage A1 TOWING Inventory on File? <input type="checkbox"/>											
CONFINED BOND INFO	Date/Time Confined 06/21/2019 Hrs: 16:55		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		Trial Date 06/24/2019		Court of HARNETT		City LILLINGTON			
	Assisting Officer Name/ID Number HOLDER JOHN HANNIS JHH			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: Complainant <input type="checkbox"/> Victim <input type="checkbox"/>			Address:				Phone:				
	NARRATIVE SUBJECT ARRESTED ON MULTIPLE DRUG VIOLATIONS. CLEAR NCIC											
STATUS	Arresting Officer Signature/ID # WINSTEAD BENJAMIN BWW			Date/Time Submitted Mo Date Year 06/21/2019 Hrs: 17:00		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 06/22/2019 Hrs: 19:37		OCA 19003647
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 1101NBF	Arrest Tract 1130	Residence Tract 1104	Arrest Number 1	

ARRESTEE INFORMATION	Name (Last, First, Middle) WILSON ISIAH SHANTRELL		D.O.B. Mo Date Year	Age 20	Race B	Sex M	Place of Birth NC	Country of Citizenship US		
	Current Address 725 WEST M ST ERWIN NC 28339-			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 509	Wgt 150	Hair BLACK	Eye BROWN	Skin Tone MDARK	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk
	Scars, Marks, Tattoos				State NC	Misc. # and Type				

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 ST LILLINGTON		
	Charge # 1 POSSESS METHAMPHETAMINE	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1810	Offense Jurisdiction (If not arresting Agency)		Statute# 90-95(A)(3)	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 06/22/2019 Hrs: 20:10		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 \$5,000.00	Trial Date 06/24/2019	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"/>
						<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: JOHNSON D. Complainant <input type="checkbox"/> Victim <input type="checkbox"/>		Address: 100 WEST F ST ERWIN NC 28339-	Phone:

NARRATIVE
 ON SATURDAY, JUNE 22, 2019, MR. WILSON WAS BROUGHT BEFORE MAGISTRATE D. WILLIAMS FOR SERVICE OF A WARRANT FOR ARREST 19CR52120. MR. WILSON WAS SERVED WITH ONE FELONY COUNT OF POSSESS METHAMPHETAMINE. MR. WILSON WAS ISSUED A FIVE THOUSAND DOLLAR SECURED BOND AND GIVEN A COURT DATE OF MONDAY 06/24/2019 AT 0900 HOURS IN LILLINGTON, NC COURT.

STATUS	Arresting Officer Signature/ID # COLEMAN AUSTIN KELLY AKC		Date/Time Submitted Mo Date Year 06/22/2019 Hrs: 20:15	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

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000		Date/Time of Arrest Mo Date Year 06/23/2019 Hrs: 20:18		OCA 19003669				
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 1109NBT		Arrest Tract 1130		Residence Tract 1142		Arrest Number 1			
ARRESTEE INFORMATION	Name (Last, First, Middle) DENTON PETE			Age 29	Race W	Sex M	Place of Birth NC	Country of Citizenship US			
	Current Address 166 LANGDON RD ANGIER NC 27501-				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 600	Wgt 165	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			
	Nearest Relative Name			Address			Phone				
ARREST INFO	If Armed, Type of Weapon 97		<input type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant		Place of Arrest 175 BAIN ST LILLINGTON						
	Charge # 1 POSSESS A CS IN PRISON/JAIL		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1810	Offense Jurisdiction (If not arresting Agency)		Statute# 90-95(E)(9)	Warr Date Mo Date Year 06/23/2019		
	Charge # 2 POSSESS METHAMPHETAMINE		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1810	Offense Jurisdiction (If not arresting agency)		Statute# 90-95(A)(3)	Warr Date Mo Date Year 06/23/2019		
	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 06/23/2019 Hrs: 23:45		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 06/24/2019	Court of DISTRICT		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				
L	Z	1.7	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
Name: COLEMAN A.		Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: 175 BAIN ST LILLINGTON NC 27546-			Phone: 910-893-9111			
NARRATIVE	ON SUNDAY, JUNE 23, 2019, I, DEPUTY A. COLEMAN, SERVED MR. DENTON AT THE HARNETT COUNTY DETENTION CENTER WITH A WARRANT FOR ARREST FOR ONE FELONY COUNT OF POSSESS CONTROLLED SUBSTANCE IN PRISON/JAIL AND ONE FELONY COUNT OF POSSESSION OF METHAMPHETAMINE. MR. DENTON WENT BEFORE MAGISTRATE T. SMITH AND WAS ISSUED A \$15,000 SECURED BOND AND A FIRST APPEARANCE DATE OF 06/24/2019 IN LILLINGTON, NC DISTRICT COURT.										
	Arresting Officer Signature/ID # COLEMAN AUSTIN KELLY AKC			Date/Time Submitted Mo Date Year 06/23/2019 Hrs: 00:00		Supervisor Signature					
STATUS	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					