



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

NEWS RELEASE

June 4, 2020

ARREST REPORT NCIC Clear

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 06/02/2020 Hrs: 23:07		OCA 20001101						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 9590SRV	Arrest Tract 10	Residence Tract 10	Arrest Number							
ARRESTEE INFORMATION	Name (Last, First, Middle) MCNEILL SHEKIA BIANCA			Age 28	Race B	Sex F	Place of Birth UNK	Country of Citizenship US				
	Current Address 4413 GARNET DR FAYETTEVILLE NC 28311-		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 506	Wgt 199	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				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 801 E 4TH ST CHARLOTTE							
	Charge # 1 LARCENY FROM A MERCHANT >\$200 EXIT DOOR	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 90Z	Offense Jurisdiction (If not arresting Agency)		Statute# 14-72.11(2)	Warr Date Mo Date Year 04/22/2020				
	Charge # 2 POSSESSION OF STOLEN GOODS STOLEN PROPERTY OFFENSES	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 280	Offense Jurisdiction (If not arresting agency)		Statute# 14-71.1	Warr Date Mo Date Year 04/22/2020				
	Charge # 3 FELONY CONSPIRACY	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 90Z	Offense Jurisdiction (If not arresting agency)		Statute# 14-2.4(A)	Warr Date Mo Date Year 04/22/2020				
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 06/02/2020 Hrs: 23:07		Place Confined MCDC		Committing Magistrate R GARDNER							
	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 \$1,000.00	Trial Date 07/07/2020	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				
	*****EAST SIDE BUSINESS*****USE TO CLEAR NCIC***** MS MCNEILL WAS ARRESTED IN CHARLOTTE-MECKLENBURG PD'S JURISDICTION ON THIS HARNETT COUNTY WARRANT FOR LARCENY FROM A MERCHANT FROM THE DOLLAR GENERAL ON 401N. SHE WAS ALSO CHARGED IN THAT JURIDICITION FOR NEW CHARGES AND WERVED A WAKE COUNTY WARRANT FOR SIMILIAR CHARGES. BOND: \$1000/SECURE											
STATUS	Arresting Officer Signature/ID # TEASLEY JOSHUA BENJAMIN JBT			Date/Time Submitted Mo Date Year 06/02/2020 Hrs: 23:39		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 06/03/2020 Hrs: 00:51		OCA 20003207						
	<input checked="" type="checkbox"/> Taken Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) 4334NBY	Arrest Tract 1155	Residence Tract 1155	Arrest Number							
ARRESTEE INFORMATION	Name (Last, First, Middle) CORONA LINDORO MERIDA		DOB Mo Date Year	Age 29	Race W	Sex M	Place of Birth MEXICO	Country of Citizenship MEXICO				
	Current Address 122 BROOK LN COATS NC 27521-			Occupation LABORER	<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident							
	Also Known As (Alias Names)		Hgt 502	Wgt 160	Hair BLACK	Eye BROWN	Skin Tone MEDIUM	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						
Nearest Relative Name DEMETRO CORONA			Address 122 BROOK LN COATS NC 27521-			Phone						
ARREST INFO	If Armed, Type of Weapon 99		<input checked="" type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest 32 OLD MAIL LN COATS							
	Charge # 1 POSSESS SCHEDULE II CONTROLLED SUBSTANCE		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 35A	Offense Jurisdiction (If not arresting Agency)		Statute# 90-95(A)(3)	Warr Date Mo Date Year 06/03/2020			
	Charge # 2 POSSESS DRUG PARAPHERNALIA OTHER THAN MARIJUANA		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 35B	Offense Jurisdiction (If not arresting agency)		Statute# 90-113.22	Warr Date Mo Date Year 06/03/2020			
	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 06/03/2020 Hrs: 01:50		Place Confined HARNETT COUNTY DETENTION CENTER			Committing Magistrate R. ROMERO						
	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 06/03/2020	Court of HARNETT		City LILLINGTON				
Assisting Officer Name/ID Number BENNETT ALEXANDER RUTLEDGE ARB			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					
	L	6			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
							<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: GODFREY BRENT TYLER 175 BAIN ST LILLINGTON NC 27546-				Phone: 910-893-9111				
	NARRATIVE ON 06/03/20 AT 0051 HOURS, I DEPUTY GODFREY, ARRESTED LINDORO MERIDA CORONA REFERENCE POSSESSION OF SCHEDULE II CONTROLLED SUBSTANCE AND POSSESSION OF DRUG PARAPHERNALIA OTHER THAN MARIJUANA. SUBJECT WAS HANDCUFFED BEHIND HIS BACK AND CUFFS WERE DOUBLE LOCKED. PRIOR TO THE INDIVIDUAL BEING PLACED IN MY PATROL CAR, BOTH HE AND THE VEHICLE WERE SEARCHED, RESULTING IN DRUGS AND PARAPHERNALIA BEING FOUND ON THE SUBJECT. UPON ARRIVING AT THE DETENTION CENTER, THE HOLDING CELL WAS SEARCHED PRIOR TO THE INDIVIDUAL											
STATUS	Arresting Officer Signature/ID # GODFREY BRENT TYLER BTG			Date/Time Submitted Mo Date Year 06/03/2020 Hrs: 04:16		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: 06/03/2020	CASE #: 20003207
<p>BEING PLACED INSIDE.</p> <p>THE MAGISTRATE THEN GAVE THE SUBJECT A SECURED BOND OF \$20,000 AND A COURT DATE WAS SET AT 0900 HOURS ON THE MORNING OF 06/03/2020.</p>			
REPORTING OFFICER _____	ID _____	APPROVING SUPERVISOR _____	ID _____

ARREST REPORT *Cleared*

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 06/03/2020 Hrs: 04:26		OCA 20001321						
	<input type="checkbox"/> Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)	Arrest Tract 1108	Residence Tract 1108	Arrest Number							
ARRESTEE INFORMATION	Name (Last, First, Middle) MCNEILL SHAQUANA		DOB Mo Date Year	Age 26	Race B	Sex F	Place of Birth NORTH CAROLINA	Country of Citizenship US				
	Current Address 89 JACK HARRIS LANE SPRING LAKE NC 28390-			Occupation STUDENT	<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident		Employer's Name					
	Employer's Name			Address			Phone					
	Also Known As (Alias Names)			Hgt 508	Wgt 176	Hair BLACK	Eye BROWN	Skin Tone MDARK	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					
	Nearest Relative Name			Address			Phone					
ARREST INFO	If Armed, Type of Weapon 99		<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 89 JACK HARRIS LN SPRING LAKE					
	Charge # 1 BREAK/ENTER TERRORIZE/INJURE	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 220	Offense Jurisdiction (If not arresting Agency)		Statute# 14-54(A1)	Warr Date Mo Date Year 06/03/2020				
	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"/> 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 06/03/2020 Hrs: 06:12		Place Confined HARNETT COUNTY DETENTION CENTER			Committing Magistrate C. B. SMITH						
	<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 06/03/2020	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
COM-PLAIN-ANT	Name: Complainant <input type="checkbox"/> Victim <input type="checkbox"/>			Address:				Phone:				
	NARRATIVE ON 06/03/2020 I, DEPUTY C A MARCO, ARRESTED SHAQUANA MCNEILL FOR OUTSTANDING WARRANTS WITHOUT INCIDENT. SHAQUANA WAS HANDCUFFED. THE HANDCUFFS WERE CHECKED FOR TIGHTNESS AND DOUBLE LOCKED											
STATUS	Arresting Officer Signature/ID # MARCO CHRISTOPHER CAMA			Date/Time Submitted Mo Date Year 06/03/2020 Hrs: 06:24			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				

ADDITIONAL NARRATIVEAGENCY:
HARNETT COUNTY SHERIFFS OFFICEORI #:
NC0430000Date/Time On Scene:
06/03/2020CASE #:
20001321

MY VEHICLE SEAT WAS SEARCHED BEFORE AND AFTER TRANSPORTING SHAQUANA. THE CELL WAS SEARCHED BEFORE AND AFTER SHAQUANA ENTERED.

SHAQUANA WAS BROUGHT BEFORE THE MAGISTRATE.
A SECURED BOND OF \$15,000.00 WAS SET.
A COURT DATE OF 06/03/2020 WAS GIVEN.

SUBJECT REFUSED TO BE FINGERPRINTED AT THIS TIME, DETENTION STAFF TOOK CUSTODY AND STATED THAT FINGERPRINTING WOULD BE HANDLED AT A LATER TIME.

NOTHING FURTHER AT THIS TIME

CLEAR NCIC

REPORTING OFFICER _____

ID _____

APPROVING SUPERVISOR _____

ID _____