



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

***NEWS RELEASE***

***June 5, 2019***

# ARREST REPORT

<b>AGENCY INFO</b>	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 06/04/2019 Hrs: 14:30		OCA 19003231			
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/> Fingerprint Card Check Digit # (CKN) 0879NBS	Arrest Tract 1183	Residence Tract		Arrest Number				
<b>ARRESTEE INFORMATION</b>	Name (Last, First, Middle) BETHEA ANTHONY RAYSHON			Age 35	Race B	Sex M	Place of Birth NC	Country of Citizenship US	
	Current Address 46 HAPPY CT SANFORD NC 27332-			Phone	Occupation PROFESSIONAL		<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 507	Wgt 185	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 TAT TATTOOS TAT L ARM CROWN OF THORNS 20			Social Security # 246-41-5073	OLN 25754947	State NC	Misc. # and Type		
Nearest Relative Name			Address					Phone	
<b>ARREST INFO</b>	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 SEX OFFENDER AT/NEAR CHILD PREMISES	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 2690	Offense Jurisdiction (If not arresting Agency)		Statute# 14-208.18 (A)	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	
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		
<b>VEH. INFO.</b>	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"/>								
<b>CONFINED BOND INFO</b>	Date/Time Confined 06/04/2019 Hrs: 14:30		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 \$15,000.00	Trial Date 06/05/2019	Court of DISTRICT		City LILLINGTON		
	Assisting Officer Name/ID Number			Released By Name/Dept/ID			Date/Time Released Hrs:		
<b>STATUS CODES</b>	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		
<b>DRUGS AT ARREST</b>							<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"/>		
<b>COMPLAINANT</b>	Name: Complainant <input type="checkbox"/> Victim <input type="checkbox"/>			Address:			Phone:		
	NARRATIVE ON THE DATE AND TIME LISTED ABOVE, I DEPUTY D.E. ABNEY MET WITH THE DEFENDANT AT THE HARNETT COUNTY SHERIFF'S OFFICE IN REFERENCE TO TURNING HIMSELF IN ON THE ABOVE, LISTED CHARGE(S). HE WAS TAKEN INTO CUSTODY AND WAS PROCESSED WITHOUT INCIDENT.								
<b>STATUS</b>	Arresting Officer Signature/ID # ABNEY DAVID EDWARD DEA		Date/Time Submitted Mo Date Year 06/04/2019 Hrs: 14:40		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

<b>AGENCY INFO</b>	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 06/04/2019 Hrs: 10:23		OCA 19003202							
	<input checked="" type="checkbox"/> Taken Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) 0877NBD	Arrest Tract 1174	Residence Tract 1174	Arrest Number								
<b>ARRESTEE INFORMATION</b>	Name (Last, First, Middle) COCKMAN TRACY		DOB Mo Date Year	Age 49	Race W	Sex M	Place of Birth NC	Country of Citizenship US					
	Current Address 9750 NC HWY 210 S. BUNNLEVEL NC 28323-			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) TRACY		Hgt 509	Wgt 170	Hair BLACK	Eye BROWN	Skin Tone FAIR	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 License							
	Nearest Relative Name		Address			Phone							
	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 9750 NC HWY 210 S. BUNNLEVEL								
<b>ARREST INFO</b>	Charge # 1 AWDW SERIOUS INJURY	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 0410	Offense Jurisdiction (If not arresting Agency)		Statute# 14-32(B)	Warr Date Mo Date Year 06/03/2019					
	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					
<b>VEH. INFO.</b>	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"/>												
<b>CONFINED BOND INFO</b>	Date/Time Confined 06/04/2019 Hrs: 10:52		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 \$2,000.00		Trial Date 06/05/2019	Court of HARNETT COUNTY		City LILLINGTON					
<b>STATUS CODES</b>	Assisting Officer Name/ID Number								Released By Name/Dept/ID		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)												
<b>DRUGS AT ARREST</b>	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"/>
<b>COMPLAINANT</b>	Name: M.E. WEAVER JR.		Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>		Address: HARNETT COUNTY SHERIFF'S OFFICE				Phone: 910-893-0268				
	<b>NARRATIVE</b> ON JUNE 4TH, 2019, AT APPROXIMATELY 10:23 A.M., I, DETECTIVE M.E. WEAVER JR., ARRESTED THE DEFENDANT, TRACY COCKMAN, 49, OF BUNNLEVEL, ON ACCOUNT OF THE FOLLOWING OFFENSE:  I F-AWDW SERIOUS INJURY.  THESE CHARGES STEMMED FROM AN INVESTIGATION OF A STABBING, WHEREBY THE DEFENDANT												
<b>STATUS</b>	Arresting Officer Signature/ID # WEAVER MICHAEL EVAN MEWE			Date/Time Submitted Mo Date Year 06/04/2019 Hrs: 11:01		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:  
06/04/2019

CASE #:  
19003202

WILLFULLY STABBED A VICTIM AFTER AN ARGUMENT.

THE DEFENDANT WAS ADEQUATELY ARRESTED AND SERVED. AFTER BEING ARRESTED, THE DEFENDANT WAS BROUGHT BEFORE THE HONORABLE MAGISTRATE, C. SMITH, WHO PROVIDED HIM WITH A SECURED BOND OF \$2,000.00 AND A COURT DATE OF JUNE 5TH, 2019, AT THE HARNETT COUNTY COURTHOUSE, IN LILLINGTON.

REPORTING OFFICER

ID

APPROVING SUPERVISOR

ID

# ARREST REPORT

<b>AGENCY INFO</b>	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 06/04/2019 Hrs: 22:00		OCA 19003000						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 0886NBC		Arrest Tract 1104	Residence Tract 1104		Arrest Number					
<b>ARRESTEE INFORMATION</b>	Name (Last, First, Middle) SITTLE TRAVONTA MALIK			DOB	Age 19	Race B	Sex M	Place of Birth VA	Country of Citizenship US			
	Current Address 733 W M ST. ERWIN NC 28339-			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) TREY			Hgt 509	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 TAT TATTOOS TAT L ARM ARM, LEFT 11 TAT TATTOOS TAT FARM			Social Security #		State NC	Misc. # and Type					
<b>ARREST INFO</b>	If Armed, Type of Weapon		<input type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warr#		Place of Arrest							
	Charge # 1 MURDER	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 01	DCI Code 0100	Offense Jurisdiction (If not arresting Agency)		Statute# 14-17	Warr Date Mo Date Year 06/04/2019				
	Charge # 2 Aggravated Assault	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 01	DCI Code 0410	Offense Jurisdiction (If not arresting agency)		Statute# COMMON LAW	Warr Date Mo Date Year 06/04/2019				
	Charge # 3 Aggravated Assault	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 01	DCI Code 0410	Offense Jurisdiction (If not arresting agency)		Statute# 14-34.1	Warr Date Mo Date Year 06/04/2019				
<b>VEH. INFO.</b>	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"/>											
<b>CONFINED BOND INFO</b>	Date/Time Confined 06/04/2019 Hrs: 22:15		Place Confined HCSO									
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input checked="" type="checkbox"/> No Bond <input type="checkbox"/> Other		Amt. Bond	Trial Date 06/05/2019	Court of HARNETT		City LILLINGTON					
	Assisting Officer Name/ID Number			Released By Name/Dept/ID				Date/Time Released Hrs:				
<b>DRUGS AT ARREST</b>	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"/>
<b>COMPLAINANT</b>	Name: ELMORE S.			Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: 733 W M ST. ERWIN NC 28339-			Phone: 910-893-9111		
	Probable Cause											
<b>NARRATIVE</b>	06/04/2019 TRAVONTA MALIK SITTLE WAS ARRESTED AND SERVED THE ABOVE CHARGES WITHOUT INCIDENT											
<b>STATUS</b>	Arresting Officer Signature/ID # JACKSON RODNEY SHON RSJ			Date/Time Submitted Mo Date Year 06/04/2019 Hrs: 22:24		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						