



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

NEWS RELEASE

May 11, 2020

ARREST REPORT

AGENCY INFO	Agency Name HARNETT COUNTY SHERIFFS OFFICE		ORI NC0430000	Date/Time of Arrest Mo Date Year 05/09/2020 Hrs: 18:22		OCA 20002738						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 4159NBT		Arrest Tract 1120	Residence Tract 1120		Arrest Number 1					
ARRESTEE INFORMATION	Name (Last, First, Middle) WILSON SEAN ALLEN			D.O.B. Mo Date Year	Age 20	Race W	Sex M	Place of Birth FAYETTEVILLE	Country of Citizenship US			
	Current Address 214 WAND WLN SPRING LAKE NC 28390-			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) SEAN			Hgt 507	Wgt 125	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 CRYSTAL WILSON			Address 99 BLAND ST SPRING LAKE NC 28390-			Phone					
ARREST INFO	If Armed, Type of Weapon 99		<input type="checkbox"/> On-View <input checked="" type="checkbox"/> Order for Arrest	<input type="checkbox"/> Criminal Summons <input type="checkbox"/> Citation <input type="checkbox"/> Warrant	Place of Arrest 214 WAND WLN SPRING LAKE							
	Charge # 1 FELONY PROBATION VIOLATION OUT OF COUNTY	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 90Z	Offense Jurisdiction (If not arresting Agency) MARTIN		Statute# 15A-1345	Warr Date Mo Date Year 01/31/2020				
	Charge # 2 FELONY PROBATION VIOLATION OUT OF COUNTY	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 90Z	Offense Jurisdiction (If not arresting agency) MARTIN		Statute# 15A-1345	Warr Date Mo Date Year 02/17/2020				
	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 05/09/2020 Hrs: 19:58		Place Confined HARNETT COUNTY DETENTION CENTER			Committing Magistrate D. MCLEAN						
	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 12/25/2020	Court of MARTIN COUNTY		City WILLIAMSTON				
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: SERMONS HONR			Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: 305 EAST MAIN ST WILLIAMSTON NC 27892-			Phone:		
	NARRATIVE ON 5/9/2020 I RESPONDED TO 214 W & W LN IN REFERENCE TO A WARRANT FOR SERVICE CALL. UPON MY ARRIVAL AND PENDING INVESTIGATION SUBJECT, SEAN A WILSON WAS ARREST ON HIS OUTSTANDING ORDER FOR ARREST(S) OUT OF COUNTY. HE WAS HAND CUFFED IN THE REAR OF HIS PERSON AND TRANSPORTED TO THE HARNETT COUNTY DETENTION CENTER. HE WAS GIVEN A SECURED BOND OF 30,000.00. DISPATCH WAS ADVISED TO REMOVE SUBJECT OUT OF NCIC.											
STATUS	Arresting Officer Signature/ID # ODOM STORM TRISTIAN STO			Date/Time Submitted Mo Date Year 05/09/2020 Hrs:20:59		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 05/10/2020 Hrs: 16:22		OCA 20002749						
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) 4162NBT	Arrest Tract 1186	Residence Tract 1186	Arrest Number							
ARRESTEE INFORMATION	Name (Last, First, Middle) DRIGGERS JAMES		D.O.B. Mo Date Year	Age 43	Race W	Sex M	Place of Birth NORTH CAROLINA	Country of Citizenship US				
	Current Address 225 STEWART TOWN RD LILLINGTON NC 27546-			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 180	Hair BROWN	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 #		OLN	State NC	Misc. # and Type Driver's License					
	Nearest Relative Name		Address				Phone					
	If Armed, Type of Weapon 99		<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 8951 US 421 S ERWIN							
ARREST INFO	Charge # 1 POSSESS METHAMPHETAMINE	<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 05/10/2020				
	Charge # 2 POSSESS DRUG PARAPHERNALIA	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 35B	Offense Jurisdiction (If not arresting agency)		Statute# 90-113.22	Warr Date Mo Date Year 05/10/2020				
	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 02	Make CHEVY	Model TRAILBLAZER	Style 4D	Color GOLD	Lic/Lis NONE	VIN UNK					
	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 checked="" type="checkbox"/> Impounded <input checked="" type="checkbox"/> Place of storage <u>DEANS</u> Inventory on File? <input type="checkbox"/>											
CONFINED BOND INFO	Date/Time Confined 05/10/2020 Hrs: 17:45		Place Confined HARNETT COUNTY DETENTION FACILITY			Committing Magistrate WILLIAMS						
	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 05/12/2020	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: LISEK		Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>		Address: 175 BAIN ST LILLINGTON NC 27546-			Phone: 910-893-9111				
	NARRATIVE ON 05/10/2020 I, DEPUTY LISEK ARRESTED MR. JAMES DRIGGERS ON A WFA FOR POSSESSION OF METH AND DRUG PARAPHERNALIA. HE WAS TAKEN BEFORE THE MAGISTRATE AND GIVEN A SECURED BOND OF \$1,000.MY VEHICLE WAS INSPECT BEFORE AND AFTER DEFENDANT WAS IN IT AND HIS HANDCUFFS WERE DOUBLE LOCKED. HE WAS TURNED OVER TO HARNETT COUNTY JAIL STAFF FOR FURTHER PROCESSING. NO FURTHER.											
STATUS	Arresting Officer Signature/ID # LISEK DOMINICK JOSEPH DJL		Date/Time Submitted Mo Date Year 05/10/2020 Hrs: 17:45		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 05/08/2020 Hrs: 12:15		OCA 20002709						
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 4151NBF		Arrest Tract 1100	Residence Tract		Arrest Number					
ARRESTEE INFORMATION	Name (Last, First, Middle) GLOVER NATHAN MARCUS			Age 33	Race W	Sex M	Place of Birth NC	Country of Citizenship US				
	Current Address 31 SOUTH RAILROAD ST. COATS NC				Occupation LABORER	<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 58	Wgt 160	Hair BROWN	Eye BROWN	Skin Tone FAIR	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 Name RAVEN WHALEY			Address 205 TWIN CITY ST. DUNN NC 28334-			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 1357 SAVANNA HILL RD. DUNN							
	Charge # 1 BREAKING/ENTERING AND LARCENY		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 220	Offense Jurisdiction (If not arresting Agency)		Statute# 14-72(B)	Warr Date Mo Date Year 04/22/2020			
	Charge # 2 STOLEN PROPERTY OFFENSES (RECEIVING, ETC.)		<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		<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 05/08/2020 Hrs: 13:22		Place Confined HARNETT DETENTION CENTER			Committing Magistrate R. HOLDER						
	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 \$200,000.00		Trial Date 05/11/2020	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: DEAN C M			Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address: 401 EAST BROAD ST. DUNN NC 28334-			Phone: 910-892-2399		
	NARRATIVE ON MAY 8TH, 2020 NATHAN MARCUS GLOVER WAS TAKEN INTO CUSTODY AT 1357 SAVANNA HILL RD. DUNN (SAMPSON COUNTY) FOR AN OUTSTANDING WARRANT ISSUED THROUGH DUNN PD. THE CHARGES ARE LARCENY AFTER BREAK/ENTER AND POSS. STOLEN GOODS/PROP. MR. GLOVER WAS A ISSUED A \$0000 SECURED BOND AND PLACED INTO THE HARNETT DETENTION CENTER. MR. GLOVER WILL BE REMOVED FROM NCIC.											
STATUS	Arresting Officer Signature/ID # BEASLEY RONALD HANS RHB			Date/Time Submitted Mo Date Year 05/08/2020 Hrs: 13:23			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 05/08/2020 Hrs: 12:15		OCA 20001611						
	Taken Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 4151NBF		Arrest Tract 1100		Residence Tract 1156		Arrest Number					
ARRESTEE INFORMATION	Name (Last, First, Middle) GLOVER NATHAN MARCUS			D.O.B. Mo Date Year		Age 33	Race W	Sex M	Place of Birth NC	Country of Citizenship US			
	Current Address 31 SOUTH RAILROAD STREET COATS NC 27521-				Phone		Occupation LABORER		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown	<input type="checkbox"/> Non-Resident			
	Employer's Name JAMES CORBIN			Address				Phone					
	Also Known As (Alias Names)				Hgt 508	Wgt 160	Hair BROWN	Eye BROWN	Skin Tone FAIR	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos				Social Security #		IOLN		State NC	Misc. # and Type Driver's License			
	Nearest Relative Name RAVEN WHALEY			Address 205 TWIN CITY STREET ERWIN NC 28339-				Phone					
ARREST INFO	If Armed, Type of Weapon 99		<input type="checkbox"/> On-View	<input type="checkbox"/> Criminal Summons	Place of Arrest 1357 SAVANNAH HILL ROAD DUNN								
			<input type="checkbox"/> Order for Arrest	<input type="checkbox"/> Citation	<input checked="" type="checkbox"/> Warrant								
	Charge # 1 POSSESSION OF FIREARM BY FELON		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 520	Offense Jurisdiction (If not arresting Agency)		Statute# 14-415.1	Warr Date Mo Date Year 03/19/2020				
	Charge # 2 OBTAIN PROPERTY FALSE PRETENSE		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 26A	Offense Jurisdiction (If not arresting agency)		Statute# 14-100	Warr Date Mo Date Year 03/19/2020				
Charge # 3 BREAKING AND OR ENTERING NON FORCED ENTRY		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 220	Offense Jurisdiction (If not arresting agency)		Statute# 14-54(A)	Warr Date Mo Date Year 03/19/2020					
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 05/08/2020 Hrs: 13:24		Place Confined HARNETT COUNTY DETENTION CENTER				Committing Magistrate R. HOLDER						
	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 \$300,000.00		Trial Date 05/11/2020		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: IVEY M			Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>				Address: 175 BAIN STREET LILLINGTON NC 27546-			Phone: 910-893-9111		
	NARRATIVE MAY 8, 2020 (FRIDAY) ON THIS DATE NATHAN GLOVER WAS TAKEN INTO CUSTODY FOR OUTSTANDING WARRANTS OUT OF HARNETT COUNTY. THESE CHARGES STEM FROM OCA 20001611. HE WAS GIVEN A SECURED BOND OF \$300,000.00 AND A COURT DATE OF 05/11/2020. THIS IS TO ALSO REMOVE HIM FROM NCIC AS A WANTED PERSON.												
STATUS	Arresting Officer Signature/ID # REAGAN JAMES EDWARD JER			Date/Time Submitted Mo Date Year 05/08/2020 Hrs:13:25			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 04/16/2020 Hrs:		OCA 19004318						
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos <input checked="" type="checkbox"/>	Fingerprint Card Check Digit # (CKN) 3976NBD		Arrest Tract 1102		Residence Tract 1171		Arrest Number					
ARRESTEE INFORMATION	Name (Last, First, Middle) GODWIN PURCELL			D.O.B. Mo Date Year		Age 43	Race I	Sex M	Place of Birth UNK	Country of Citizenship US			
	Current Address 642 ANDERSON RD LINDEN NC 28356-			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 605	Wgt 190	Hair BLACK	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 NC		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 401 E BROAD ST #1 DUNN								
			<input type="checkbox"/> Order for Arrest	<input type="checkbox"/> Citation	<input checked="" type="checkbox"/> Warrant								
	Charge # 1 BURGLARY/BREAKING AND ENTERING		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 220	Offense Jurisdiction (If not arresting Agency)		Statute# 14-54	Warr Date Mo Date Year 09/30/2019				
	Charge # 2 LARCENY AFTER BREAK/ENTER		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 23H	Offense Jurisdiction (If not arresting agency)		Statute# 14-72(B)(2)	Warr Date Mo Date Year 09/30/2019				
Charge # 3 POSSESSION OF STOLEN GOODS		<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 09/30/2019					
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"/> 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 04/16/2020 Hrs: 18:32		Place Confined HCDC		Committing Magistrate WILLIAMS								
	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 \$10,000.00		Trial Date 04/17/2020		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		
	NARRATIVE *****BUSINESS CRIME*****USE TO CLEAR NCIC***** MR GODWIN WAS ARRESTED BY DUNN PD FOR B/E'S IN THIER JURISDICTION. HE WAS SERVED THESE HCSO WARRANTS RELATED TO A BUSINESS BREAKIN IN BUNN LEVEL IN SEPTEMBER 2019. BOND: \$10,000/SECURE.												
STATUS	Arresting Officer Signature/ID # TEASLEY JOSHUA BENJAMIN JBT			Date/Time Submitted Mo Date Year 05/08/2020 Hrs: 09:46		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							

