



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

***NEWS RELEASE***

***September 11, 2019***

### ARREST REPORT

|                                  |   |  |   |   |  |  |   |   |   |                          |                          |
|----------------------------------|---|--|---|---|--|--|---|---|---|--------------------------|--------------------------|
| <b>AGENCY INFO</b>               | Agency Name<br>HARNETT COUNTY SHERIFFS OFFICE   |  | ORI<br>NC0430000  | Date/Time of Arrest<br>Mo Date Year<br>09/10/2019 Hrs: 21:51  |  | OCA<br>19005398  |   |   |   |                          |                          |
|                                  | Taken Prints <input checked="" type="checkbox"/><br>Photos <input checked="" type="checkbox"/>  | Fingerprint Card Check Digit # (CKN)<br>1946NBJ                          | Arrest Tract<br>1153  | Residence Tract<br>1153   |  | Arrest Number  |   |   |   |                          |                          |
| <b>ARRESTEE INFORMATION</b>      | Name (Last, First, Middle)<br>CRUZ JUAN IGNACIO   |  | Age<br>41   | Race<br>W   | Sex<br>M   | Place of Birth<br>MEXICO   | Country of Citizenship<br>US                            |   |   |                          |                          |
|                                  | Current Address<br>5840 US HIGHWAY 421 SOUTH LILLINGTON NC 27546-   |  |   | Occupation<br>SELF EMPLOYED   |  | <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown<br><input type="checkbox"/> Non-Resident |   |   |   |                          |                          |
|                                  | Employer's Name   |  | Address   |   |  | Phone  |   |   |   |                          |                          |
|                                  | Also Known As (Alias Names)   |  |   | Hgt<br>510  | Wgt<br>152   | Hair<br>BLACK  | Eye<br>BROWN  | Skin Tone<br>MLIGHT                     | Consumed Drug/Alcohol<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk |                          |                          |
|                                  | Scars, Marks, Tattoos   |  |   | Social Security #   |  | State<br>NC  | Misc. # and Type<br>Driver's License                    |   |   |                          |                          |
| Nearest Relative Name            |   | Address  |   |   | Phone  |  |   |   |   |                          |                          |
| <b>ARREST INFO</b>               | If Armed, Type of Weapon<br>97  |  | <input type="checkbox"/> On-View<br><input type="checkbox"/> Order for Arrest   | <input type="checkbox"/> Criminal Summons<br><input type="checkbox"/> Citation <input type="checkbox"/> Warrant | Place of Arrest<br>5840 US 421 S LILLINGTON                |  |   |   |   |                          |                          |
|                                  | Charge # 1<br>BREAK OR ENTER A MOTOR VEHICLE  | <input checked="" type="checkbox"/> Fel<br><input type="checkbox"/> Misd | Counts<br>1   | DCI Code<br>2690  | Offense Jurisdiction (If not arresting Agency)<br>JOHNSTON |  | Statute#<br>14-56                                       | Warr Date<br>Mo Date Year<br>09/09/2019 |   |                          |                          |
|                                  | Charge # 2<br>FELONY LARCENY  | <input checked="" type="checkbox"/> Fel<br><input type="checkbox"/> Misd | Counts<br>1   | DCI Code<br>0600  | Offense Jurisdiction (If not arresting agency)<br>JOHNSTON |  | Statute#<br>14-72(B)                                    | Warr Date<br>Mo Date Year<br>09/09/2019 |   |                          |                          |
|                                  | Charge # 3<br>INJURY TO PERSONAL PROPERTY   | <input type="checkbox"/> Fel<br><input checked="" type="checkbox"/> Misd | Counts<br>2   | DCI Code<br>1400  | Offense Jurisdiction (If not arresting agency)<br>JOHNSTON |  | Statute#<br>14-160                                      | Warr Date<br>Mo Date Year<br>09/09/2019 |   |                          |                          |
| <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 _____<br>2: <input type="checkbox"/> Released to other at owners request <input type="checkbox"/> Name of Other _____<br>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<br>09/10/2019 Hrs: 23:35   |  | Place Confined<br>HARNETT COUNTY DETENTION CENTER   |   |  | Committing Magistrate<br>D. MCLEAN   |   |   |   |                          |                          |
|                                  | Type Bond<br><input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured<br><input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other   |  | Amt. Bond<br>\$7,500.00   | Trial Date<br>09/16/2019  | Court of<br>DISTRICT                                       |  | City<br>SMITHFIELD                                      |   |   |                          |                          |
| Assisting Officer Name/ID Number |   |  | Released By Name/Dept/ID  |   |  | Date/Time Released<br>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<br>(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:<br>ADAMA C S  |  |   | Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>                                 |  |  | Address:<br>120 SOUTH THIRD STREET SMITHFIELD NC 27577- |   | Phone:<br>919-989-5000  |                          |                          |
|                                  | <b>NARRATIVE</b><br>SEPTEMBER 10, 2019 (TUESDAY)<br>ON THIS DATE JAUN CRUZ WAS TAKEN INTO CUSTODY FOR OUTSTANDING WARRANTS FROM JOHNSTON COUNTY HE WAS GIVEN A SECURED BOND OF \$7,500 AND A COURT DATE OF 09/13/2019 IN SMITHFIELD, NC.  |  |   |   |  |  |   |   |   |                          |                          |
| <b>STATUS</b>                    | Arresting Officer Signature/ID #<br>REAGAN JAMES EDWARD JER   |  |   | Date/Time Submitted<br>Mo Date Year<br>09/10/2019 Hrs: 23:36  |  | Supervisor Signature   |   |   |   |                          |                          |
|                                  | Case Status:<br><input type="checkbox"/> Further Inv.<br><input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed   |  | Case Disposition:<br><input checked="" type="checkbox"/> Cleared By Arrest/No Supplement Needed<br><input type="checkbox"/> Arrest/No Investigation |   |  | Arrestee Signature   |   |   |   |                          |                          |

### ARREST REPORT

|                    |  |   |                      |  |  |                 |
|--------------------|--|---|----------------------|--|--|-----------------|
| <b>AGENCY INFO</b> | Agency Name<br>HARNETT COUNTY SHERIFFS OFFICE  |   | ORI<br>NC0430000     | Date/Time of Arrest<br>Mo Date Year<br>09/10/2019 Hrs: 19:00 |  | OCA<br>19005395 |
|                    | Taken Prints <input checked="" type="checkbox"/><br>Photos <input checked="" type="checkbox"/> | Fingerprint Card Check Digit # (CKN)<br>1945NBN | Arrest Tract<br>1183 | Residence Tract<br>1142                                      |  | Arrest Number   |

|                             |  |  |                   |            |               |   |                      |   |  |
|-----------------------------|--|--|-------------------|------------|---------------|---|----------------------|---|--|
| <b>ARRESTEE INFORMATION</b> | Name (Last, First, Middle)<br>ORTEGA AMY LYNN      |  | D O B             | Age<br>35  | Race<br>W     | Sex<br>M  | Place of Birth<br>NC | Country of Citizenship<br>US  |  |
|                             | Current Address<br>53 NORDAN LANE ANGIER NC 27501- |  | Phone             | Occupation |               | <input type="checkbox"/> Resident <input type="checkbox"/> Unknown<br><input type="checkbox"/> Non-Resident |                      |   |  |
|                             | Employer's Name                                    |  | Address           |            | Phone         |   |                      |   |  |
|                             | Also Known As (Alias Names)                        |  | Hgt<br>505        | Wgt<br>135 | Hair<br>BROWN | Eye<br>HAZEL  | Skin Tone<br>LIGHT   | Consumed Drug/Alcohol<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk |  |
|                             | Scars, Marks, Tattoos                              |  | Social Security # |            | State<br>NC   | Misc. # and Type<br>Driver's License  |                      |   |  |

|                    |   |  |   |  |  |   |                         |   |
|--------------------|---|--|---|--|--|---|-------------------------|---|
| <b>ARREST INFO</b> | If Armed, Type of Weapon<br>97                          |  | <input type="checkbox"/> On-View<br><input type="checkbox"/> Order for Arrest | <input type="checkbox"/> Criminal Summons<br><input type="checkbox"/> Citation | <input checked="" type="checkbox"/> Warrant            | Place of Arrest<br>175 BAIN STREET LILLINGTON |                         |   |
|                    | Charge # 1<br>LARCENY OF A FIREARM                      | <input checked="" type="checkbox"/> Fel<br><input type="checkbox"/> Misd | Counts<br>1   | DCI Code<br>0690   | Offense Jurisdiction (If not arresting Agency)<br>WAKE |   | Statute#<br>14-72(B)    | Warr Date<br>Mo Date Year<br>09/10/2019 |
|                    | Charge # 2<br>BREAKING AND OR ENTERING NON FORCED ENTRY | <input checked="" type="checkbox"/> Fel<br><input type="checkbox"/> Misd | Counts<br>1   | DCI Code<br>0520   | Offense Jurisdiction (If not arresting agency)<br>WAKE |   | Statute#<br>14-54(A)    | Warr Date<br>Mo Date Year<br>09/10/2019 |
|                    | Charge # 3<br>LARCENY AFTER BREAK/ENTER                 | <input checked="" type="checkbox"/> Fel<br><input type="checkbox"/> Misd | Counts<br>1   | DCI Code<br>0690   | Offense Jurisdiction (If not arresting agency)<br>WAKE |   | Statute#<br>14-72(B)(2) | Warr Date<br>Mo Date Year<br>09/10/2019 |

|                   |  |      |       |       |       |         |     |
|-------------------|--|------|-------|-------|-------|---------|-----|
| <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"/> Unsecure Date/Time _____ Hrs _____<br>2: <input type="checkbox"/> Released to other at owners request <input type="checkbox"/> Name of Other _____<br>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<br>09/10/2019 Hrs: 19:37   |  | Place Confined<br>HARNETT COUNTY DETENTION CENTER |                          | Committing Magistrate<br>D. MCLEAN |  |                            |
|                           | Type Bond<br><input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured<br><input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other |  | Amt. Bond<br>\$20,000.00                          | Trial Date<br>09/12/2019 | Court of<br>DISTRICT               |  | City<br>RALEIGH            |
|                           | Assisting Officer Name/ID Number  |  |   | Released By Name/Dept/ID |                                    |  | Date/Time Released<br>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"/> |

|                    |                    |  |   |   |  |        |
|--------------------|--------------------|--|---|---|--|--------|
| <b>COMPLAINANT</b> | Name: BERRYMAN S C |  | Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/> | Address: 330 SOUTH SALISBURY STREET RALEIGH NC 27601- |  | Phone: |
|                    |                    |  |   |   |  |        |

**NARRATIVE**

SEPTEMBER 10, 2019 (TUESDAY)  
 ON THIS DATE AMY ORTEGA WAS TAKEN INTO CUSTODY FOR OUTSTANDING WARRANTS FROM WAKE COUNTY. SHE WAS GIVEN A BOND OF \$20,000.00 AND A COURT DATE OF 09/12/2019 IN RALEIGH, NC.

|               |   |   |  |                      |  |
|---------------|---|---|--|----------------------|--|
| <b>STATUS</b> | Arresting Officer Signature/ID #<br>REAGAN JAMES EDWARD JER   |   | Date/Time Submitted<br>Mo Date Year<br>09/10/2019 Hrs: 19:37 | Supervisor Signature |  |
|               | Case Status:<br><input type="checkbox"/> Further Inv.<br><input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed | Case Disposition:<br><input checked="" type="checkbox"/> Cleared By Arrest/No Supplement Needed<br><input type="checkbox"/> Arrest/No Investigation |  | Arrestee Signature   |  |

### ARREST REPORT

|                    |  |   |                      |  |  |                    |
|--------------------|--|---|----------------------|--|--|--------------------|
| <b>AGENCY INFO</b> | Agency Name<br>HARNETT COUNTY SHERIFFS OFFICE  |   | ORI<br>NC0430000     | Date/Time of Arrest<br>Mo Date Year<br>09/10/2019 Hrs: 15:11 |  | OCA<br>19005392    |
|                    | Taken Prints <input checked="" type="checkbox"/><br>Photos <input checked="" type="checkbox"/> | Fingerprint Card Check Digit # (CKN)<br>1944NBR | Arrest Tract<br>1180 | Residence Tract<br>1180                                      |  | Arrest Number<br>1 |

|                             |  |  |     |                   |                          |             |  |                              |                   |   |
|-----------------------------|--|--|-----|-------------------|--------------------------|-------------|--|------------------------------|-------------------|---|
| <b>ARRESTEE INFORMATION</b> | Name (Last, First, Middle)<br>STEPHENS BRYANA MICHELLE     |  | DOB | Age<br>23         | Race<br>W                | Sex<br>F    | Place of Birth<br>DUNN   | Country of Citizenship<br>US |                   |   |
|                             | Current Address<br>125 PEACEFUL LANE SPRING LAKE NC 28390- |  |     |                   | Occupation<br>UNEMPLOYED |             | <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown<br><input type="checkbox"/> Non-Resident |                              |                   |   |
|                             | Employer's Name  |  |     | Address           |                          |             | Phone  |                              |                   |   |
|                             | Also Known As (Alias Names)                                |  |     |                   | Hgt<br>502               | Wgt<br>113  | Hair   | Eye<br>BROWN                 | Skin Tone<br>FAIR | Consumed Drug/Alcohol<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk |
|                             | Scars, Marks, Tattoos<br>TAT TATTOOS TAT L HIP STARS 57    |  |     | Social Security # |                          | State<br>NC |  | Misc. # and Type             |                   |   |

|                    |   |  |  |   |   |  |                        |   |  |
|--------------------|---|--|--|---|---|--|------------------------|---|--|
| <b>ARREST INFO</b> | If Armed, Type of Weapon<br>97            |  | <input type="checkbox"/> On-View<br><input checked="" type="checkbox"/> Order for Arrest | <input type="checkbox"/> Criminal Summons<br><input type="checkbox"/> Citation <input type="checkbox"/> Warrant | Place of Arrest<br>175 BAIN ST LILLINGTON                                 |  |                        |   |  |
|                    | Charge # 1<br>FAILURE TO APPEAR ON FELONY | <input checked="" type="checkbox"/> Fel<br><input type="checkbox"/> Misd | Counts<br>1  | DCI Code<br>2640  | Offense Jurisdiction (If not arresting Agency)<br>ERWIN POLICE DEPARTMENT |  | Statute#<br>15A-543(B) | Warr Date<br>Mo Date Year<br>09/03/2019 |  |
|                    | Charge # 2                                | <input type="checkbox"/> Fel<br><input type="checkbox"/> Misd            | Counts   | DCI Code  | Offense Jurisdiction (If not arresting agency)                            |  | Statute#               | Warr Date<br>Mo Date Year               |  |
|                    | Charge # 3                                | <input type="checkbox"/> Fel<br><input type="checkbox"/> Misd            | Counts   | DCI Code  | Offense Jurisdiction (If not arresting agency)                            |  | Statute#               | Warr Date<br>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 _____<br>2: <input type="checkbox"/> Released to other at owners request <input type="checkbox"/> Name of Other _____<br>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<br>09/10/2019 Hrs: 15:32   |  | Place Confined<br>HARNETT COUNTY DETENTION |  | Committing Magistrate<br>B. L. HOYLE |                      |                            |                    |
|                           | Type Bond<br><input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured<br><input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other |  | Amt. Bond<br>\$5,000.00                    |  | Trial Date<br>10/08/2019             | Court of<br>DISTRICT |                            | City<br>LILLINGTON |
|                           | Assisting Officer Name/ID Number  |  |  |  | Released By Name/Dept/ID             |                      | Date/Time Released<br>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"/> |

|                    |                     |  |  |  |  |        |
|--------------------|---------------------|--|--|--|--|--------|
| <b>COMPLAINANT</b> | Name: LEE JUDGE HON |  | Complainant <input type="checkbox"/> Victim <input type="checkbox"/> | Address:<br>301 W. CORNELIUS HARNETT BLVD. LILLINGTON NC<br>27546- |  | Phone: |
|--------------------|---------------------|--|--|--|--|--------|

**NARRATIVE**  
ON 09/10/2019 I RESPONDED TO THE MAGISTRATES OFFICE TO ASSIST IN SERVING A WARRANT. UPON MY ARRIVAL SUBJECT, BRYANA STEPHENS WAS ARRESTED AND SERVED HER OUTSTANDING ORDER FOR ARREST.

|               |   |   |  |                      |  |
|---------------|---|---|--|----------------------|--|
| <b>STATUS</b> | Arresting Officer Signature/ID #<br>ODOM STORM TRISTIAN STO   |   | Date/Time Submitted<br>Mo Date Year<br>09/10/2019 Hrs: 15:35 | Supervisor Signature |  |
|               | Case Status:<br><input type="checkbox"/> Further Inv.<br><input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed | Case Disposition:<br><input type="checkbox"/> Cleared By Arrest/No Supplement Needed<br><input checked="" type="checkbox"/> Arrest/No Investigation |  | Arrestee Signature   |  |

# ARREST REPORT

|                             |   |  |   |   |  |  |   |  |   |                        |           |  |
|-----------------------------|---|--|---|---|--|--|---|--|---|------------------------|-----------|--|
| <b>AGENCY INFO</b>          | Agency Name<br>HARNETT COUNTY SHERIFFS OFFICE   |  | ORI<br>NC0430000  | Date/Time of Arrest<br>Mo Date Year<br>09/10/2019 Hrs: 14:40  |  | OCA<br>19005391  |   |  |   |                        |           |  |
|                             | Taken<br>Prints <input checked="" type="checkbox"/><br>Photos <input checked="" type="checkbox"/>   | Fingerprint Card Check Digit # (CKN)<br>1942NBC                          | Arrest Tract<br>1100  | Residence Tract<br>1100   | Arrest Number<br>1   |  |   |  |   |                        |           |  |
| <b>ARRESTEE INFORMATION</b> | Name (Last, First, Middle)<br>JENKINS CHRIS DEWAYNE   |  |   | Age<br>46   | Race<br>W  | Sex<br>M   | Place of Birth<br>ANISTON, AL                       | Country of Citizenship<br>US             |   |                        |           |  |
|                             | Current Address<br>3221 B PLAINVIEW CHURCH LANE ANGIER NC 27673   |  |   |   | Occupation<br>PAINTER                                      | <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown<br><input type="checkbox"/> Non-Resident |   |  |   |                        |           |  |
|                             | Employer's Name   |  |   | Address   |  |  | Phone   |  |   |                        |           |  |
|                             | Also Known As (Alias Names)   |  |   | Hgt<br>506  | Wgt<br>130   | Hair<br>GREY   | Eye<br>HAZEL  | Skin Tone<br>MED                         | Consumed Drug/Alcohol<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk |                        |           |  |
|                             | Scars, Marks, Tattoos   |  |   | Social Security #   |  | State<br>NC  | Misc. # and Type                                    |  |   |                        |           |  |
| Nearest Relative            |   |  |   |   |  |  |   | IPhone                                   |   |                        |           |  |
| <b>ARREST INFO</b>          | If Armed, Type of Weapon<br>97  |  | <input type="checkbox"/> On-View<br><input type="checkbox"/> Order for Arrest | <input type="checkbox"/> Criminal Summons<br><input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant                          | Place of Arrest<br>175 BAIN ST LILLINGTON                  |  |   |  |   |                        |           |  |
|                             | Charge # 1<br>OBTAIN PROPERTY FALSE PRETENSE  | <input checked="" type="checkbox"/> Fel<br><input type="checkbox"/> Misd | Counts<br>1   | DCI Code<br>1120  | Offense Jurisdiction (If not arresting Agency)<br>JOHNSTON |  | Statute#<br>14-100                                  | Warr Date<br>Mo Date Year<br>09/10/2019  |   |                        |           |  |
|                             | Charge # 2  | <input type="checkbox"/> Fel<br><input type="checkbox"/> Misd            | Counts  | DCI Code  | Offense Jurisdiction (If not arresting agency)             |  | Statute#  | Warr Date<br>Mo Date Year                |   |                        |           |  |
|                             | Charge # 3  | <input type="checkbox"/> Fel<br><input type="checkbox"/> Misd            | Counts  | DCI Code  | Offense Jurisdiction (If not arresting agency)             |  | Statute#  | Warr Date<br>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 _____<br>2: <input type="checkbox"/> Released to other at owners request <input type="checkbox"/> Name of Other _____<br>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<br>09/10/2019 Hrs: 14:40   |  | Place Confined<br>HARNETT COUNTY DETENTION CENTER                             |   |  | Committing Magistrate<br>B HOYLE   |   |  |   |                        |           |  |
|                             | Type Bond<br><input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured<br><input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other   |  | Amt. Bond<br>\$5,000.00   | Trial Date<br>09/10/2019  | Court of<br>DISTRICT                                       |  | City<br>SMITHFIELD                                  |  |   |                        |           |  |
|                             | Assisting Officer Name/ID Number  |  |   |   | Released By Name/Dept/ID                                   |  | Date/Time Released<br>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<br>(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>COMPLAINANT</b>          | Name:<br>DUPREE M   |  |   | Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>   |  |  | Address:<br>120 SOUTH THIRD ST SMITHFIELD NC 27577- |  |   | Phone:<br>919-989-5000 |           |  |
|                             | <b>NARRATIVE</b><br>ON 9/10/2019 I RESPONDED TO THE HARNETT COUNTY DETENTION CENTER TO SERVE A WARRANT ON AN INMATE. SUBJECT. CHRIS JENKINS WAS SERVED HIS OUTSTANDING WARRANT FOR OBTAINING PROPERTY BY FALSE PRETENSES  |  |   |   |  |  |   |  |   |                        |           |  |
| <b>STATUS</b>               | Arresting Officer Signature/ID #<br>ODOM STORM TRISTIAN STO   |  |   | Date/Time Submitted<br>Mo Date Year<br>09/10/2019 Hrs:14:54   |  |  | Supervisor Signature                                |  |   |                        |           |  |
|                             | Case Status:<br><input type="checkbox"/> Further Inv.<br><input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed   |  |   | Case Disposition:<br><input type="checkbox"/> Cleared By Arrest/No Supplement Needed<br><input checked="" type="checkbox"/> Arrest/No Investigation |  |  | Arrestee Signature                                  |  |   |                        |           |  |

### ARREST REPORT

|                             |   |   |   |  |   |  |                               |  |   |           |
|-----------------------------|---|---|---|--|---|--|-------------------------------|--|---|-----------|
| <b>AGENCY INFO</b>          | Agency Name<br>HARNETT COUNTY SHERIFFS OFFICE   |   | ORI<br>NC0430000  | Date/Time of Arrest<br>Mo Date Year<br>09/10/2019 Hrs: 14:40   |   | OCA<br>19005391  |                               |  |   |           |
|                             | Taken<br>Prints <input checked="" type="checkbox"/><br>Photos <input checked="" type="checkbox"/>   | Fingerprint Card Check Digit # (CKN)<br>1942NBC | Arrest Tract<br>1100  | Residence Tract<br>1100  |   | Arrest Number<br>1   |                               |  |   |           |
| <b>ARRESTEE INFORMATION</b> | Name (Last, First, Middle)<br>JENKINS CHRIS DEWAYNE   |   | D.O.B.  | Age<br>46  | Race<br>W   | Sex<br>M   | Place of Birth<br>ANISTON, AL | Country of Citizenship<br>US             |   |           |
|                             | Current Address<br>3221 B PLAINVIEW CHURCH LANE ANGIER NC 27673   |   |   | Occupation<br>PAINTER  |   | <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown<br><input type="checkbox"/> Non-Resident |                               |  |   |           |
|                             | Employer's Name   |   | Address   |  |   |  | Phone                         |  |   |           |
|                             | Also Known As (Alias Names)   |   |   | Hgt<br>506   | Wgt<br>130  | Hair<br>GREY   | Eye<br>HAZEL                  | Skin Tone<br>MED                         | Consumed Drug/Alcohol<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk |           |
|                             | Scars, Marks, Tattoos   |   | Social Security #   |  | State<br>NC   | Misc. # and Type   |                               |  |   |           |
|                             | Nearest Relative Name   |   | Address   |  |   |  |                               |  |   |           |
| <b>ARREST INFO</b>          | If Armed, Type of Weapon<br>97  |   | <input type="checkbox"/> On-View<br><input type="checkbox"/> Order for Arrest   | <input type="checkbox"/> Criminal Summons<br><input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant | Place of Arrest<br>175 BAIN ST LILLINGTON           |  |                               |  |   |           |
|                             | Charge # 1<br>OBTAIN PROPERTY FALSE PRETENSE  |   | <input checked="" type="checkbox"/> Fel<br><input type="checkbox"/> Misd  | Counts<br>1  | DCI Code<br>1120                                    | Offense Jurisdiction (If not arresting Agency)<br>JOHNSTON   |                               | Statute#<br>14-100                       | Warr Date<br>Mo Date Year<br>09/10/2019   |           |
|                             | Charge # 2  |   | <input type="checkbox"/> Fel<br><input type="checkbox"/> Misd   | Counts   | DCI Code  | Offense Jurisdiction (If not arresting agency)   |                               | Statute#                                 | Warr Date<br>Mo Date Year   |           |
|                             | Charge # 3  |   | <input type="checkbox"/> Fel<br><input type="checkbox"/> Misd   | Counts   | DCI Code  | Offense Jurisdiction (If not arresting agency)   |                               | Statute#                                 | Warr Date<br>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 _____<br>2: <input type="checkbox"/> Released to other at owners request <input type="checkbox"/> Name of Other _____<br>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<br>09/10/2019 Hrs: 14:40   |   | Place Confined<br>HARNETT COUNTY DETENTION CENTER   |  |   | Committing Magistrate<br>B HOYLE   |                               |  |   |           |
|                             | Type Bond<br><input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured<br><input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other   |   | Amt. Bond<br>\$5,000.00   |  | Trial Date<br>09/10/2019                            | Court of<br>DISTRICT   |                               | City<br>SMITHFIELD                       |   |           |
|                             | Assisting Officer Name/ID Number  |   |   | Released By Name/Dept/ID   |   |  | Date/Time Released<br>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<br>(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 |
| <b>COMPLAINANT</b>          | Name:<br>DUPREE M   |   | Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>   |  | Address:<br>120 SOUTH THIRD ST SMITHFIELD NC 27577- |  |                               | Phone:<br>919-989-5000                   |   |           |
|                             | <b>NARRATIVE</b><br>ON 9/10/2019 I RESPONDED TO THE HARNETT COUNTY DETENTION CENTER TO SERVE A WARRANT ON AN INMATE. SUBJECT: CHRIS JENKINS WAS SERVED HIS OUTSTANDING WARRANT FOR OBTAINING PROPERTY BY FALSE PRETENSES  |   |   |  |   |  |                               |  |   |           |
| <b>STATUS</b>               | Arresting Officer Signature/ID #<br>ODOM STORM TRISTIAN STO   |   | Date/Time Submitted<br>Mo Date Year<br>09/10/2019 Hrs: 14:54  |  | Supervisor Signature                                |  |                               |  |   |           |
|                             | Case Status:<br><input type="checkbox"/> Further Inv.<br><input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed   |   | Case Disposition:<br><input type="checkbox"/> Cleared By Arrest/No Supplement Needed<br><input checked="" type="checkbox"/> Arrest/No Investigation |  |   | Arrestee Signature   |                               |  |   |           |

### ARREST REPORT

|                                  |  |  |   |  |  |  |  |   |                          |                          |                          |
|----------------------------------|--|--|---|--|--|--|--|---|--------------------------|--------------------------|--------------------------|
| <b>AGENCY INFO</b>               | Agency Name<br>HARNETT COUNTY SHERIFFS OFFICE  |  | ORI<br>NC0430000  | Date/Time of Arrest<br>Mo Date Year<br>09/10/2019 Hrs: 09:50 |  | OCA<br>19005383  |  |   |                          |                          |                          |
|                                  | Taken<br><input checked="" type="checkbox"/> Prints<br><input checked="" type="checkbox"/> Photos  | Fingerprint Card Check Digit # (CKN)<br>1937NBK                          | Arrest Tract<br>1183  | Residence Tract<br>1156                                      |  | Arrest Number  |  |   |                          |                          |                          |
| <b>ARRESTEE INFORMATION</b>      | Name (Last, First, Middle)<br>OATES MONTRAEAL DEAAARON   |  | D O B   | Age<br>27  | Race<br>B  | Sex<br>M   | Place of Birth<br>NC                       | Country of Citizenship<br>US  |                          |                          |                          |
|                                  | Current Address<br>140 N RAILROAD ST COATS NC 27521-   |  |   | Occupation<br>LABORER  |  | <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown<br><input type="checkbox"/> Non-Resident |  |   |                          |                          |                          |
|                                  | Employer's Name  |  | Address   |  | Phone  |  |  |   |                          |                          |                          |
|                                  | Also Known As (Alias Names)  |  | Hgt<br>600  | Wgt<br>178   | Hair<br>BLACK  | Eye<br>BROWN   | Skin Tone<br>MDARK                         | Consumed Drug/Alcohol<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk |                          |                          |                          |
|                                  | Scars, Marks, Tattoos<br>TAT TATTOOS TAT R ARM LOYALTY LOCATED ON RIGHT BICEP  |  | Social Security #<br>238-75-1353  |  | OLN<br>38561106  | State<br>NC  | Misc. # and Type                           |   |                          |                          |                          |
| Nearest Relative Name            |  | Address  |   |  |  | Phone  |  |   |                          |                          |                          |
| <b>ARREST INFO</b>               | If Armed, Type of Weapon<br>97   |  | <input type="checkbox"/> On-View<br><input type="checkbox"/> Order for Arrest   |  | <input type="checkbox"/> Criminal Summons<br><input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant |  | Place of Arrest<br>175 BAIN ST. LILLINGTON |   |                          |                          |                          |
|                                  | Charge # 1<br>KIDNAPPING   | <input checked="" type="checkbox"/> Fel<br><input type="checkbox"/> Misd | Counts<br>1   | DCI Code<br>2620   | Offense Jurisdiction (If not arresting Agency)   |  | Statute#<br>14-39                          | Warr Date<br>Mo Date Year<br>09/07/2019   |                          |                          |                          |
|                                  | Charge # 2   | <input type="checkbox"/> Fel<br><input type="checkbox"/> Misd            | Counts  | DCI Code   | Offense Jurisdiction (If not arresting agency)   |  | Statute#                                   | Warr Date<br>Mo Date Year   |                          |                          |                          |
|                                  | Charge # 3   | <input type="checkbox"/> Fel<br><input type="checkbox"/> Misd            | Counts  | DCI Code   | Offense Jurisdiction (If not arresting agency)   |  | Statute#                                   | Warr Date<br>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"/> Unsecure Date/Time _____ Hrs _____<br>2: <input type="checkbox"/> Released to other at owners request <input type="checkbox"/> Name of Other _____<br>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<br>09/10/2019 Hrs: 09:50  |  | Place Confined<br>HARNETT COUNTY JAIL   |  |  | Committing Magistrate<br>C. SMITH  |  |   |                          |                          |                          |
|                                  | Type Bond<br><input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured<br><input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other  |  | Amt. Bond   |  | Trial Date<br>10/11/2019   | Court of<br>DISTRICT   |  | City<br>LILLINGTON  |                          |                          |                          |
| Assisting Officer Name/ID Number |  |  | Released By Name/Dept/ID  |  |  |  | Date/Time Released<br>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<br>(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"/> |
| <b>COMPLAINANT</b>               | Name:<br>SHAW J. S.  |  | Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>   |  | Address:<br>175 BAIN ST. LILLINGTON NC 27546-  |  |  | Phone:<br>910-893-9111  |                          |                          |                          |
|                                  | <b>NARRATIVE</b><br>ON THE DATE AND TIME LISTED ABOVE, I DEPUTY D.E. ABNEY MET WITH THE VICTIM AT THE HARNETT COUNTY SHERIFF'S OFFICE IN REFERENCE TO HIM TURNING HIMSELF IN ON THE ABOVE LISTED CHARGE. HE WAS TAKEN INTO CUSTODY AND WAS PROCESSED WITHOUT INCIDENT.   |  |   |  |  |  |  |   |                          |                          |                          |
| <b>STATUS</b>                    | Arresting Officer Signature/ID #<br>ABNEY DAVID EDWARD DEA   |  | Date/Time Submitted<br>Mo Date Year<br>09/10/2019 Hrs: 10:15  |  | Supervisor Signature   |  |  |   |                          |                          |                          |
|                                  | Case Status:<br><input type="checkbox"/> Further Inv.<br><input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed  |  | Case Disposition:<br><input type="checkbox"/> Cleared By Arrest/No Supplement Needed<br><input checked="" type="checkbox"/> Arrest/No Investigation |  |  | Arrestee Signature   |  |   |                          |                          |                          |

### ARREST REPORT

|   |  |  |   |   |  |  |  |  |                          |                          |                          |                          |                          |
|---|--|--|---|---|--|--|--|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <b>AGENCY INFO</b>  | Agency Name<br>HARNETT COUNTY SHERIFFS OFFICE  |  | ORI<br>NC0430000  | Date/Time of Arrest<br>Mo Date Year<br>09/10/2019 Hrs: 14:22  |  | OCA<br>19002764  |  |  |                          |                          |                          |                          |                          |
|   | Taken Prints <input checked="" type="checkbox"/><br>Photos <input checked="" type="checkbox"/>   | Fingerprint Card Check Digit # (CKN)<br>1943NBV                          | Arrest Tract  | Residence Tract<br>1171   |  | Arrest Number  |  |  |                          |                          |                          |                          |                          |
| <b>ARRESTEE INFORMATION</b>   | Name (Last, First, Middle)<br>CULLEMBER SANDRA LEE   |  |   | Age<br>20   | Race<br>W                                      | Sex<br>F   | Place of Birth<br>MARYLAND                   | Country of Citizenship<br>US   |                          |                          |                          |                          |                          |
|   | Current Address<br>1585 WIRE RD BUNNLEVEL NC 28323-  |  |   | Occupation<br>UNEMPLOYED  |  | <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown<br><input type="checkbox"/> Non-Resident |  |  |                          |                          |                          |                          |                          |
|   | Employer's Name  |  |   | Address   |  |  | Phone  |  |                          |                          |                          |                          |                          |
|   | Also Known As (Alias Names)  |  |   | Hgt<br>509  | Wgt<br>100                                     | Hair<br>BROWN  | Eye<br>GREEN                                 | Skin Tone<br>FAIR<br>Consumed Drug/Alcohol<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk |                          |                          |                          |                          |                          |
|   | Scars, Marks, Tattoos  |  |   | OLN   | State  | Misc. # and Type   |  |  |                          |                          |                          |                          |                          |
| Nearest Relative Name   |  |  |   |   |  | Phone  |  |  |                          |                          |                          |                          |                          |
| <b>ARREST INFO</b>  | If Armed, Type of Weapon<br>97   |  | <input type="checkbox"/> On-View<br><input type="checkbox"/> Order for Arrest | <input type="checkbox"/> Criminal Summons<br><input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant                          | Place of Arrest<br>1585 WIRE RD BUNNLEVEL      |  |  |  |                          |                          |                          |                          |                          |
|   | Charge # 1<br>FINANCIAL CARD THEFT   | <input checked="" type="checkbox"/> Fel<br><input type="checkbox"/> Misd | Counts<br>1   | DCI Code<br>0690  | Offense Jurisdiction (If not arresting Agency) |  | Statute#<br>14-113.9                         | Warr Date<br>Mo Date Year<br>08/09/2019  |                          |                          |                          |                          |                          |
|   | Charge # 2   | <input type="checkbox"/> Fel<br><input type="checkbox"/> Misd            | Counts  | DCI Code  | Offense Jurisdiction (If not arresting agency) |  | Statute#                                     | Warr Date<br>Mo Date Year  |                          |                          |                          |                          |                          |
|   | Charge # 3   | <input type="checkbox"/> Fel<br><input type="checkbox"/> Misd            | Counts  | DCI Code  | Offense Jurisdiction (If not arresting agency) |  | Statute#                                     | Warr Date<br>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"/> Unsecure Date/Time _____ Hrs _____<br>2: <input type="checkbox"/> Released to other at owners request <input type="checkbox"/> Name of Other _____<br>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<br>09/10/2019 Hrs: 14:39  |  | Place Confined<br>HARNETT COUNTY DETENTION CENTER                             |   |  | Committing Magistrate<br>B.HOYLE   |  |  |                          |                          |                          |                          |                          |
|   | Type Bond<br><input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured<br><input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other  |  | Amt. Bond<br>\$5,000.00   |   | Trial Date<br>09/11/2019                       | Court of<br>DISTRICT   |  | City<br>LILLINGTON   |                          |                          |                          |                          |                          |
| Assisting Officer Name/ID Number  |  |  | Released By Name/Dept/ID  |   |  | Date/Time Released<br>Hrs:   |  |  |                          |                          |                          |                          |                          |
| Status Codes: L-Lost S-Stolen R-Recovered D-Damaged Z-Seized B-Burned C-Counterfeit/Forged F-Found<br>(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: WEAVER M E   |  |   | Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>   |  |  | Address:<br>175 BAIN ST LILLINGTON NC 27546- |  |                          | Phone:<br>910-893-9111   |                          |                          |                          |
|   | <b>NARRATIVE</b><br>ON 09/10/2019 I, DEPUTY JOLLIE TO CONDUCT A FOLLOW UP INVESTIGATION TO OCA 19005384. WHEN I ARRIVED ON SCENE I MADE CONTACT WITH SANDRA CULLEMBER, WHO WAS ON THE FRONT PORCH.<br><br>I WAS AWARE THAT SANDRA CULLEMBER HAD AN ACTIVE WARRANT FOR ARREST PRIOR TO ARRIVING ON SCENE WHICH WAS CONFIRMED THROUGH DISPATCH.  |  |   |   |  |  |  |  |                          |                          |                          |                          |                          |
| <b>STATUS</b>   | Arresting Officer Signature/ID #<br>JOLLIE RYAN EDWARD REJ   |  |   | Date/Time Submitted<br>Mo Date Year<br>09/10/2019 Hrs: 15:31  |  |  | Supervisor Signature                         |  |                          |                          |                          |                          |                          |
|   | Case Status:<br><input type="checkbox"/> Further Inv.<br><input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed  |  |   | Case Disposition:<br><input type="checkbox"/> Cleared By Arrest/No Supplement Needed<br><input checked="" type="checkbox"/> Arrest/No Investigation |  |  | Arrestee Signature                           |  |                          |                          |                          |                          |                          |



# ADDITIONAL NARRATIVE

|  |                     |                                   |                     |
|--|---------------------|-----------------------------------|---------------------|
| AGENCY:<br>HARNETT COUNTY SHERIFFS OFFICE  | ORI #:<br>NC0430000 | Date/Time On Scene:<br>09/10/2019 | CASE #:<br>19002764 |
| <p>SANDRA CULLEMBER WAS PLACED INTO CUSTODY AND TRANSPORTED TO THE HARNETT COUNTY DETENTION CENTER. SANDRA CULLEMBER WAS SERVED WITH THE WARRANT FOR ARREST FOR FINANCIAL CARD THEFT OUT OF HARNETT COUNTY AND BROUGHT BEFORE THE MAGISTRATE FOR FURTHER PROCESSING.</p> |                     |                                   |                     |
| REPORTING OFFICER _____  | ID _____            | APPROVING SUPERVISOR _____        | ID _____            |

### ARREST REPORT

|                             |   |  |   |   |  |  |   |  |   |
|-----------------------------|---|--|---|---|--|--|---|--|---|
| <b>AGENCY INFO</b>          | Agency Name<br>HARNETT COUNTY SHERIFFS OFFICE   |  | ORI<br>NC0430000  | Date/Time of Arrest<br>Mo Date Year<br>09/11/2019 Hrs: 02:45  |  | OCA<br>02004400  |   |  |   |
|                             | Taken<br><input checked="" type="checkbox"/> Prints<br><input checked="" type="checkbox"/> Photos   | Fingerprint Card Check Digit # (CKN)<br>1948NBB                          | Arrest Tract<br>1127  | Residence Tract<br>1127   | Arrest Number                                  |  |   |  |   |
| <b>ARRESTEE INFORMATION</b> | Name (Last, First, Middle)<br>RAY CARL FELTON JR  |  |   | Age<br>55   | Race<br>W                                      | Sex<br>M   | Place of Birth<br>NC                      | Country of Citizenship<br>US   |   |
|                             | Current Address<br>50 ROEBUCK LANE BROADWAY NC 27505-   |  |   |   | Occupation<br>PROFESSIONAL                     | <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown<br><input type="checkbox"/> Non-Resident |   |  |   |
|                             | Also Known As (Alias Names)<br>CARL RAY   |  |   | Hgt<br>505  | Wgt<br>200                                     | Hair<br>OTHER  | Eye<br>HAZEL                              | Skin Tone<br>LIGHT   | Consumed Drug/Alcohol<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk |
|                             | Scars, Marks, Tattoos   |  | Social Security #<br>237-25-2783  | OLN<br>3676740  | State<br>NC                                    | Misc. # and Type   |   |  |   |
| Nearest Relative Name       |   |  | Address   |   |  | Phone  |   |  |   |
| <b>ARREST INFO</b>          | If Armed, Type of Weapon<br>05  |  | <input checked="" type="checkbox"/> On-View<br><input type="checkbox"/> Order for Arrest  | <input type="checkbox"/> Criminal Summons<br><input type="checkbox"/> Citation <input type="checkbox"/> Warrant | Place of Arrest<br>50 ROEBUCK LANE BROADWAY    |  |   |  |   |
|                             | Charge # 1<br>POSSESS STOLEN FIREARM  | <input checked="" type="checkbox"/> Fel<br><input type="checkbox"/> Misd | Counts<br>1   | DCI Code<br>1330  | Offense Jurisdiction (If not arresting Agency) |  | Statute#<br>14-71.1                       | Warr Date<br>Mo Date Year<br>09/11/2019  |   |
|                             | Charge # 2<br>POS/SELL/BUY ALT GUN SERIAL NO  | <input checked="" type="checkbox"/> Fel<br><input type="checkbox"/> Misd | Counts<br>1   | DCI Code<br>1590  | Offense Jurisdiction (If not arresting agency) |  | Statute#<br>14-160.2(A)                   | Warr Date<br>Mo Date Year<br>09/11/2019  |   |
|                             | Charge # 3  | <input type="checkbox"/> Fel<br><input type="checkbox"/> Misd            | Counts  | DCI Code  | Offense Jurisdiction (If not arresting agency) |  | Statute#                                  | Warr Date<br>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 _____<br>2: <input type="checkbox"/> Released to other at owners request <input type="checkbox"/> Name of Other _____<br>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<br>09/11/2019 Hrs: 04:05   |  | Place Confined<br>HARNETT COUNTY JAIL   |   |  | Committing Magistrate<br>D MCLEAN  |   |  |   |
|                             | Type Bond<br><input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured<br><input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other   |  | Amt. Bond<br>\$7,500.00   | Trial Date<br>09/11/2019  | Court of<br>DISTRICT                           |  | City<br>LILLINGTON                        |  |   |
|                             | Assisting Officer Name/ID Number  |  |   | Released By Name/Dept/ID  |  |  | Date/Time Released<br>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<br>(Check "OJ" column if recovered for other jurisdiction)   |  |   |   |  |  |   |  |   |
|                             | DCI   | Status   | Quantity  | Type Measure  | Suspected Type                                 |  |   | Check up to 3 types of activity for each<br>Possess Buy Sale Mfg. Importing Operating<br><input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |   |
| <b>COMPLAINANT</b>          | Name: BRITT M.R.  |  |   | Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>                                 |  |  | Address: 175 BAIN ST LILLINGTON NC 27546- |  |   |
|                             |   |  |   |   |  |  | Phone: 910-893-9111                       |  |   |
| <b>NARRATIVE</b>            | ON 09-11-2019, I RESPONDED TO 50 ROE BUCK LANE, BROADWAY, REFERENCE TO THE SERVICE OF A 50B WITH THE SIEZURE OF FIREARMS. ONE OF THE FIREARMS WAS STOLEN OUT OF HARNETT COUNTY WITH DEFACED SERIAL NUMBER. THE DEFENDANT CARL RAY JR WAS ARRESTED FOR THESE CHARGES AND PROCESSED AT THE HARNETT COUNTY JAIL. THE FIREARM, A STEVENS MODEL 67 SHOTGUN SERIAL NUMBER E889334 WAS STOLEN SAME CAN BE REMOVED NCIC. THE DEFENDANT WAS CLEARED NCAWARE. |  |   |   |  |  |   |  |   |
|                             |   |  |   |   |  |  |   |  |   |
| <b>STATUS</b>               | Arresting Officer Signature/ID #<br>BRITT MICHAEL RUDOLPH MRB   |  |   | Date/Time Submitted<br>Mo Date Year<br>09/11/2019 Hrs: 04:11  |  | Supervisor Signature   |   |  |   |
|                             | Case Status:<br><input type="checkbox"/> Further Inv.<br><input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed   |  | Case Disposition:<br><input checked="" type="checkbox"/> Cleared By Arrest/No Supplement Needed<br><input type="checkbox"/> Arrest/No Investigation |   |  | Arrestee Signature   |   |  |   |