J	TATE OF NORTH CAROLINA						In The General Court Of Justice					
County						District Court Division						
			IN THE MATT	ER OF								
Name And Address Of Juvenile							JUVENILE PETITION COMMUNICATING THREATS (DELINQUENT)					
Juvenile's Date Of Birth Age Race Sex								C	S.S. 7B-150	11(7) -18	301 -1802	
lame	Of Petitioner					Category	Of Offense Misdemea l		J.G. 72 100		701, 1002	
Offense Code Offe		Offense	e In Violation Of G.S. Physical Addr 14-277.1		ess Of Offense, If Applicable			Date Of Offense	Time Of O	ffense	AM PM	
1. T	-				of the juvenile's	parents, (under the age of e	- , ,	/s:			
-	Name				Relationship/Title		Address		Telephone No.			
T t	he juvenile	is a denamed		e as defined b			on or about the da					
•	•	,	nmunicated to th	ne person in t	he following mar	ner (descr	ibe):					
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I request the Court to hear the case to determine whether the allegations are true and whether the juvenile is within the jurisdiction of the Court as a delinquent juvenile. **VERIFICATION** Being first duly sworn, I say that I have read the allegations in the petition and that the same are true to my own knowledge, except as to those matters alleged upon information and belief, and as to those, I believe them to be true. Signature Of Petitioner SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME Date Signature Of Person Authorized To Administer Oaths Title Or Relationship To Juvenile Agency (if applicable) Telephone No. Deputy CSC Assistant CSC Clerk Of Superior Court Magistrate Date My Commission Expires Address Notary County Where Notarized City, State, Zip **SEAL** WITNESS(ES) Name **Address** Telephone No. Date Complaint Received By Juvenile Justice Section Of The Division Of Adult Correction And Juvenile Justice 15-DAY EXTENSION OF TIME TO FILE PETITION Pursuant to G.S. 7B-1703, at the discretion of the undersigned chief court counselor, the time to file a petition in the above captioned case is extended 15 days. Date Name Of Chief Court Counselor Signature Of Chief Court Counselor DECISION OF COURT COUNSELOR REGARDING THE FILING OF THE PETITION AM 1. Approved for Filing 2. Not Approved for Filing Name Of Court Counselor Giving Telephonic Approval a. Closed Name And Title Of Person Receiving Telephonic Approval b. Diverted and Retained Date Signature Of Court Counselor Signature Of Person Receiving Telephonic Approval Post-Diversion Approval For Filing Of Petition Signature Of Court Counselor Date Approved for Filing