

File No. <div style="text-align: center; font-weight: bold;">19CR 056823</div>		Law Enforcement Case No. ALAMANCE COUNTY SHERIFFS OFFICE		LID No.	SID No.	FBI No.		
MAGISTRATE'S ORDER		<b>STATE OF NORTH CAROLINA</b> In The General Court Of Justice District Court Division <div style="text-align: center; margin-top: 10px;">           ALAMANCE County         </div>						
Offense I M-FAIL TO DISPERSE ON COMMAND		I, the undersigned, find that the defendant named above has been arrested without a warrant and the defendant's detention is justified because there is probable cause to believe that on or about the date of offense shown and in the county named above the defendant named above unlawfully and willfully did FAIL TO COMPLY WITH A COMMAND TO DISPERSE AND THAT COMMAND WAS GIVEN IN A MANNER REASONABLY CALCULATED TO BE HEARD BY THOSE WHO ASSEMBLED BY A LAW ENFORCEMENT FOR KEEPING THE PEACE WHEN THE OFFICER BELIEVED THAT DISORDERLY CONDUCT BY THREE OR MORE PERSONS WAS OCCURRING						
THE STATE OF NORTH CAROLINA VS.								
Name And Address Of Defendant SARAH CATHERINE PEDERSON  109 W LAVENDER AVE  DURHAM NC 27705 DURHAM COUNTY								
Race <div style="text-align: center;">W</div>	Sex <div style="text-align: center;">F</div>						Date Of Birth <div style="text-align: center;">08/17/1993</div>	Age
Social Security No. <div style="background-color: black; width: 100px; height: 1.2em; margin: 5px 0;"></div>							Drivers License No. & State <div style="text-align: center;">32944453 NC</div>	
Name Of Defendant's Employer								
Offense Code(s) I 5312							Offense In Violation Of G.S. I 14-288.5	
Date Of Offense <div style="display: flex; justify-content: space-between;"> <span>11/24/2019</span> <span>through 11/24/2019</span> </div>								
Date Of Arrest & Check Digit No. (As Shown On Fingerprint Card) <div style="display: flex; justify-content: space-between;"> <span>11/24/2019</span> <span style="color: blue; font-weight: bold;">KJ5381A</span> </div>								
Arresting Officer (Name, Address Or Department) FRYE ALAMANCE COUNTY SHERIFFS OFFICE 109 SOUTH MAPLE ST GRAHAM NC 27253 ALAMANCE COUNTY (336) 570-6300								
Names & Addresses Of Witnesses (Including Counties & Telephone Nos.)								
<input type="checkbox"/> Misdemeanor Offense Which Requires Fingerprinting Per Fingerprint Plan		Date Issued <div style="text-align: center;">11/24/2019</div>		Signature K W THORPE		Location Of Court Alamance County Courthouse; CRMB 212 W ELM ST GRAHAM, NC 27253	Court Date <div style="text-align: center;">01/09/2020</div>	
		<input checked="" type="checkbox"/> Magistrate <input type="checkbox"/> Assistant CSC		<input type="checkbox"/> Deputy CSC <input type="checkbox"/> Clerk Of Superior Court		Court Time 09:00 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM		

		District Attorney	<input type="checkbox"/> Waived <input type="checkbox"/> Not Indigent <input type="checkbox"/> Denied	Attorney For Defendant	<input type="checkbox"/> Appointed <input type="checkbox"/> Retained	<b>PRIOR CONVICTIONS:</b>			
							No./Level: <input type="checkbox"/> 0 <input type="checkbox"/> I (0) <input type="checkbox"/> II (1-4) <input type="checkbox"/> III (5+)		
		PLEA: <input type="checkbox"/> guilty <input type="checkbox"/> no contest _____ <input type="checkbox"/> guilty <input type="checkbox"/> no contest _____ <input type="checkbox"/> guilty <input type="checkbox"/> no contest _____ <input type="checkbox"/> not guilty _____		VERDICT: <input type="checkbox"/> guilty _____ M.C.L. <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> guilty _____ M.C.L. <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> guilty _____ M.C.L. <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> not guilty _____					
		<b>JUDGMENT:</b> The defendant appeared in open court and freely, voluntarily and understandingly entered the above plea; on the above verdict, it is <b>ORDERED</b> that the defendant: <input type="checkbox"/> pay costs and a fine of \$ _____.							
		<input type="checkbox"/> be imprisoned for a term of _____ days in the custody of the <input type="checkbox"/> sheriff. <input type="checkbox"/> MCP. <input type="checkbox"/> DAC.* Pretrial credit _____ days served.							
		<input type="checkbox"/> Work release <input type="checkbox"/> is recommended. <input type="checkbox"/> is not recommended. [ <input type="checkbox"/> is ordered. (use form AOC-CR-602)] <input type="checkbox"/> The Court finds that a <input type="checkbox"/> longer <input type="checkbox"/> shorter period of probation, than that which is specified in G.S. 15A-1343.2(d), is necessary. <input type="checkbox"/> Execution of the sentence is suspended and the defendant is placed on unsupervised probation* for _____ months, subject to the following conditions: 1. commit no criminal offense in any jurisdiction. 2. possess no firearm, explosive or other deadly weapon listed in G.S. 14-269. 3. remain gainfully and suitably employed or faithfully pursue a course of study or of vocational training, that will equip the defendant for suitable employment, and abide by all rules of the institution. 4. satisfy child support and family obligations, as required by the Court. 5. pay to the Clerk the costs of court and any additional sums shown below.							
Fine \$ _____		Restitution** \$ _____		Attorney's Fee \$ _____		Community Service Fee \$ _____		Other \$ _____	
**Name(s), address(es), and amount(s) for aggrieved party(ies) to receive restitution: <b>NOTE TO CLERK: Record SSN or Tax ID No. of aggrieved party(ies) on AOC-CR-382, "Certification Of Identity (Victims' Restitution)/Certification Of Identity (Witness Attendance)."</b>									
<input type="checkbox"/> 6. complete _____ hours of community service during the first _____ days of probation, as directed by the judicial services coordinator, and pay the fee prescribed by G.S. 143B-708 within _____ days. <input type="checkbox"/> 7. not be found in or on the premises of the complainant or _____ <input type="checkbox"/> 8. not assault, communicate with or be in the presence of the complainant or _____ <input type="checkbox"/> 9. provide a DNA sample pursuant to G.S. 15A-266.4. (AOC-CR-319) <input type="checkbox"/> 10. Other: _____ _____ _____ _____ _____									
<b>APPEAL ENTRIES</b>									
<input type="checkbox"/> The defendant, in open court, gives notice of appeal to the <input type="checkbox"/> District <input type="checkbox"/> Superior Court. <input type="checkbox"/> The current pretrial release order is modified as follows: _____									
Date		Signature Of District Court Judge Or Magistrate							
<b>WAIVER OF PROBABLE CAUSE HEARING</b>									
The undersigned defendant, with the consent of his/her attorney, waives the right to a probable cause hearing.									
Date Waived		Signature Of Defendant							
		Signature Of Attorney							
Date		Name Of District Court Judge Or Magistrate (Type Or Print)				Signature Of District Court Judge Or Magistrate			
<b>CERTIFICATION</b>									
I certify that this Judgment is a true and complete copy of the original which is on file in this case.									
Date		Date Delivered To Sheriff		Signature		<input type="checkbox"/> Dep. CSC <input type="checkbox"/> Asst. CSC <input type="checkbox"/> CSC			

<b>STATE OF NORTH CAROLINA</b>		File No. 19CR 056823	
ALAMANCE County		In The General Court Of Justice <input checked="" type="checkbox"/> District <input type="checkbox"/> Superior Court Division	
<b>STATE VERSUS</b>		<b>CONDITIONS OF RELEASE AND RELEASE ORDER</b>	
<small>Name And Address Of Defendant</small> SARAH CATHERINE PEDERSON 109 W LAVENDER AVE  DURHAM NC 27705			
		# 19RO1433424	G.S. Chapter 15A, Art. 25, 26
		<small>Amount Of Bond</small> \$	
<small>Offenses And Additional File Numbers</small> 19CR56823 MAG ORDR; M-FAIL TO DISPERSE ON COMMAND			
<input type="checkbox"/> See Attachment			
<small>Location Of Court</small> Alamance County Courthouse; CRMB		<input checked="" type="checkbox"/> District <input type="checkbox"/> Superior	<small>Date</small> 01/09/2020 <small>Time</small> 09:00 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM
<p><b>To The Defendant Named Above</b>, you are ORDERED to appear before the Court as provided above and at all subsequent continued dates. If you fail to appear, you will be arrested and you may be charged with the crime of willful failure to appear. You also may be arrested without a warrant if you violate any condition of release in this Order or in any document incorporated by reference.</p> <p>The defendant has been advised of charge(s) against him/her and his/her right to communicate with counsel and friends.</p> <p><input checked="" type="checkbox"/> Your release is authorized upon execution of your: <input checked="" type="checkbox"/> WRITTEN PROMISE to appear <input type="checkbox"/> UNSECURED BOND in the amount shown above <input type="checkbox"/> CUSTODY RELEASE <input type="checkbox"/> SECURED BOND in the amount shown above (NOTE: Give a copy of this order to any surety who posts bond.) <input type="checkbox"/> HOUSE ARREST with ELECTRONIC MONITORING administered by (agency) _____ and the SECURED BOND above. You may leave your residence for the purpose(s) of <input type="checkbox"/> employment <input type="checkbox"/> counseling <input type="checkbox"/> course of study <input type="checkbox"/> vocational training</p> <p><input type="checkbox"/> Your release is not authorized. <input type="checkbox"/> The defendant is required to provide (check all that apply) <input type="checkbox"/> fingerprints under G.S. 15A-502. <input type="checkbox"/> a DNA sample under G.S. 15A-266.3A. Prior to release, the defendant shall provide his/her (check all that apply) <input type="checkbox"/> fingerprints. <input type="checkbox"/> DNA sample. <input type="checkbox"/> The defendant has been <input type="checkbox"/> (i) charged with a felony while on probation (complete AOC-CR-272, Side One). <input type="checkbox"/> (ii) arrested for violation of probation with a pending felony charge or prior conviction requiring registration under G.S. 14, Article 27A (complete AOC-CR-272, Side Two). <input type="checkbox"/> This Order is entered upon defendant's warrantless arrest for violation of conditions of release entered previously for the above-captioned case in the Order dated _____. <input type="checkbox"/> The defendant was arrested or surrendered after failing to appear as required under a prior release order. <input type="checkbox"/> This was the defendant's second or subsequent failure to appear in this case. <input type="checkbox"/> Your release is subject to the conditions as shown on the attached <input type="checkbox"/> AOC-CR-270. <input type="checkbox"/> Other: _____.</p>			
<small>Additional Information</small>			
<small>Date</small> 11/24/2019	<small>Signature Of Judicial Official</small> K W THORPE	<input checked="" type="checkbox"/> Magistrate <input type="checkbox"/> Deputy CSC <input type="checkbox"/> Assistant CSC <input type="checkbox"/> Clerk Of Superior Court <input type="checkbox"/> District Court Judge <input type="checkbox"/> Superior Court Judge	
<b>ORDER OF COMMITMENT</b>			
<p><b>To The Custodian Of The Detention Facility Named Below</b>, you are ORDERED to receive in your custody the defendant named above who may be released if authorized above. If the defendant is not sooner released, you are ORDERED to: <input type="checkbox"/> produce him/her in Court as provided above. <input type="checkbox"/> hold him/her <input type="checkbox"/> as provided on the attached AOC-CR-272. <input type="checkbox"/> for the following purpose: _____.</p> <p><input type="checkbox"/> [for charges covered by G.S. 15A-534.1 (domestic violence) or 15A-534.7 (threat of mass violence)] produce him/her at the first session of District or Superior Court held in this county after the entry of this Order or, if no session is held before (enter date and time 48 hours after time of arrest) _____, _____ <input type="checkbox"/> AM <input type="checkbox"/> PM produce him/her before a magistrate of this county at that time to determine conditions of pretrial release.</p>			
<small>Name Of Detention Facility</small>	<small>Date</small>	<small>Signature Of Judicial Official</small> K W THORPE	
<b>WRITTEN PROMISE TO APPEAR OR CUSTODY RELEASE</b>			
<p>I, the undersigned, promise to appear at all hearings, trials or otherwise as the Court may require and to abide by any restrictions set out above. I understand and agree that this promise is effective until the entry of judgment in the District Court from which no appeal is taken or until the entry of judgment in Superior Court. If I am released to the custody of another person, I agree to be placed in that person's custody, and that person agrees by his/her signature to supervise me.</p>			
<small>Date</small> 11/24/19	<small>Signature Of Defendant</small> Sarah Pederson	<small>Signature Of Person Agreeing To Supervise Defendant</small>	
<small>Name Of Person Agreeing To Supervise Defendant (type or print)</small>		<small>Address Of Person Agreeing To Supervise Defendant</small>	
<b>DEFENDANT RELEASED ON BAIL</b>			
<small>Date</small> 11-24-19	<small>Time</small> 1847	<input type="checkbox"/> AM <input type="checkbox"/> PM	<small>Signature Of Jailer</small> [Signature]
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<b>ORIGINAL COPY</b>			

**CONDITIONS OF RELEASE MODIFICATIONS**

The Conditions of Release on the reverse are modified as follows:

Modification	Date	Signature Of Judicial Official

**SUPPLEMENTAL ORDERS FOR COMMITMENT**

The defendant is next Ordered produced in Court as follows:

Date	Time	Place	Purpose	Signature Of Judicial Official

**DEFENDANT RECEIVED BY DETENTION FACILITY**

Date	Time	Signature Of Jailer

**DEFENDANT RELEASED FOR COURT APPEARANCE**

Date	Time	Signature Of Jailer

**NOTE TO CUSTODIAN:** This form shall accompany the defendant to court for all appearances.

AOC-CR-200, Side Two, Rev. 12/18

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