CRIMINAL SUMMONS Offense I M-SIMPLE ASSAULT			Law Enforcement Case	IVO.	LID No.	SID No.	FBI No.				
			STATE OF NORTH CAROLINA ALAMANCE County In The General Court Of Justice District Court Division								
THE S	THE STATE OF NORTH CAROLINA VS.				offer at an arefulling for			Ven aus			
Name And Address Of Defendant EDDIE MOORE MERCER JR. 830 MONROE HOLT RD GRAHAM NC 27253 ALAMANCE COUNTY				To the defendant: I, the undersigned, find that there is probable cause to believe that on or about the date of offense shown and in the county named above you unlawfully and willfully did assault AVERY HARVEY by PICKING UP A CHAIR AND ATTEMPTING TO THROW IT AT HIM THEN TRYING TO KICK HIM IN THE LEGS. (PER PW; SEE REVERSE OF SHUCK)							
Race W	Sex M	Date Of Birth 06/19/1949	Age								
Social Security	No.	Drivers License No.	. & State								
Name Of Defen	dant's Employer										
Offense Code(s, I 1368	하는 사람들은 사람들이 살아보다 하나 하는데 보다 살아보는데 보고 있다면 하는데 그는데 그는데 그는데 그는데 그는데 그는데 그는데 그는데 그는데 그			Suppar of the su							
Date Of Offense 12/13/20		alieko a arab	sandideja Laso	***************************************	Part in the same		Acceptance of the second				
Complainant (Name, Address Or Department) AVERY MARKEL HARVEY 314 FIELD ST GRAHAM NC 27253 ALAMANCE COUNTY (336) 512-9943 Names & Addresses Of Witnesses (Including Counties & Telephone Nos			information furni the location, dat may be issued a in addition to an	violation of the law re ished under oath by t e and time indicated and you may be held y sentence which ma ned finds the followin	ne complainan below to answin CONTEMPT y be imposed t	t listed. You are over to the charge. OF COURT. Are for the crime char	ORDERED to a If you fail to ap rest and/or con rged.	appear before the pear, an order for tempt for failure to	Court at your arres appear is		
				summons: COVID 19							
			Piggstries	Signature WEN	DY HUNTER	Location Of Co	urt County Courthouse	e; CRMA	Court Date 05/14/20	021	
Misdemeanor Offense Which Requires Fingerprinting Per Fingerprint Plan			Magistrate Assistant CSC	Deputy CSC Clerk Of Superior Coun	212 W ELM ST GRAHAM,NC 27253			Court Time 09:00	X AM		

If this Criminal Summons is not served within ninety (90) days or by the date the defendant is directed to appear, whichever is earlier, it must be returned to the Clerk of Court in the county in which it was issued with the reason for the failure of service noted thereon. RETURN OF SERVICE I certify that this Criminal Summons was received and served as follows: Date Received Date Served Time Served AM Date Returned 3/3/1/3/2/3/2 Time Served AM Date Returned By personally serving this Criminal Summons on the defendant. This Criminal Summons WAS NOT served for the following reason: Signature Of Officer Making Return Name Of Officer (type or print)			PLEA: guilty no contest not guilty no contest it is ORDERED that the defendant a it is ORDERED that the defen be imprisoned for a term of Work release is recomme The Court finds that a Execution of the sentence is following conditions: (1) cor in G.S. 14-269. (3) remain of defendant for suitable employ	appeared in open codant: pay costs days in ended. Is not recolonger suspended and the mmit no criminal official gainfully and suitable	urt and freely, voluntarily and a fine of \$	uilty	No./Level: 0 1 (0) M.C M.C M.C M.C M.C M.C M.C M.	days served. 3.2(d) is necessary. nonths, subject to the er deadly weapon listed raining, that will equip the		
	Department or Agency of Officer Grangm BICO			the Court. (5) pay to the Cle			shown below.		ther	
		//REISSUANCE			ษรแนติดก	Altomey's ree	Comm	unity Service Fee C	ui o i	
Date	Signature		☐ Dep. CSC ☐ Assist. CSC	3		[\$	\$ tore 70 0: 5=:	(Second 880) - 7-11 (7.11)		
			CSC CSC	**Name(s), address(es), and amo AOC-CR-382, *Certification Of Id	ount(s) for aggrieved p entity (Victims' Restitu	arty(ies) to receive restitution: (ion)/Certification Of Identity (W	NOTE TO CLERI Iness Attendance	K: Record SSN or Tax ID N).")	o. or aggrieved party(ies) on	
	The above clerk finds the following cause to set a court date more than one month from reissue:					, , , , , , , , , , , , , , , , , , ,			, 	
		EDELIVERY/REIS	CHANCE				į	*	•	
							1		•	
Date Received	Date Served	was received and serv		-						
Date Received	Date Served	Time Served AM	ate Returned			ne i e e e e e e e e e e e e e e e e e e		· ~ ·		
By personal	ly serving this Crir	ninal Summons on the	defendant.	☐ 6. complete I	•			probation, as directed by	the judicial services	
				coordinator, and pay the	e fee prescribed by	G.S. 143B-708 within	days.			
	ai Summons WAS	NOT served for the fol	lowing reason	7. not be found in or on the 8. not assault, communica	te with or be in the	presence of the complainar	nt or		· · · · · · · · · · · · · · · · · · ·	
				☐ 9. provide a DNA sample (☐ 10. Other:		4-266.4. (AUC-CR-319)	1			
Signature Of Offi	icer Making Return	Name Of Officer (type	or print)	I To. Other:			,1			
Department Or A	Department Or Agency Of Officer									
_ sparanon of A	gandy or officer					· · · · · · · · · · · · · · · · · · ·	1 .			
0.000	APPEAL ENTRIES			It is ORDERED that this: 🔲 Ju				* :	·	
The defendant, in open court, gives notice of appeal to the			^a □ ca	ise be consolidated	for judgment with	<u> </u>		·		
District Superior Court.			_		he expiration of the sentend					
The current pretrial release order is modified as follows:				COMMITMENT: It is ORDERED that the Clerk deliver two certified copies of this Judgment and Commitment to the sheriff and that the sheriff cause the defendant to be retained in custody to serve the sentence imposed or until the defendant shall have complied						
				with the conditions of release pending appeal.						
				PROBABLE CAUSE:	The second of the second		(
Date Signature Of District Court Judge Or Magistrate				☐ Probable cause is found as to all Counts except			, and the defendant is bound over to Superior			
				Court for action by the gran		of this Criminal Summons and the Count(s) is dismissed.				
WAIVER OF PROBABLE CAUSE HEARING			☐ No probable cause is found Date		t ludgo Or Mocietado (tras sa		s Criminal Summons and ture Of District Court Judge			
The undersigne	The undersigned defendant, with the consent of his/her attorney, waives the right to a probable cause hearing.			Jaio	Hame Of District Cou	t Judge Or Magistrate (type or	Signa Signa	un a on District Court Judge	or magistrate	
Date Waived	Signature Of Defe					CERTIFICAT	ION			
-	-			I certify that this Judgment is	true and complete		Transport	case	neurosco Million Mario Mario II	
į	Signature Of Attor	mey			Date Delivered To Sh		on me m uns		□ Dep. CSC □ Asst. CSC	
100.00.44	<u> </u>								Clerk Of Superior Court	

PROSECUTING WITNESS AGREEMENT/AFFIDAVIT

PRINT OR TYPE: (ALL Information must be completed)
Date 12 20 20
I, the undersigned prosecuting witness, understand and agree that by swearing out this criminal warrant/
summons against Colle I tercer or.
830 Movoe Holt (Defendant's Name) Traham NC 27253
for Schulle assault (Offense) (Place of Work) 12/13/20 (Date of Offense)
 The charges I am making in this warrant/summons are of a serious nature, and the issuance of this warrant/ summons may result in the defendant being arrested and placed in jail until bond is posted. These charges also may result in either a jail sentence or fine, or both.
 Upon signing of this form, warrant/summons will be issued by the Magistrate and I no longer have any power to drop these charges at a later date.
 If I swear out the warrant/summons in this matter before a Magistrate and the statements I am making to the magistrate are not the truth, then I may be committing a crime myself.
 If the court believes after my testimony in Court that this warrant/summons was issued for spite or any other frivolous reason, the Court may declare this action frivolous and malicious and fine me and/or confine me in jail for Contempt of Court.
5. I agree to appear at Court proceedings and testify truthfully regarding those events contained in this warrant/ summons. I understand that I have been ORDERED by the Magistrate to appear in Court for the trial of this matter on the date and time set forth below and any later date to which the trial may be postponed by the court. I further understand that if I fail to appear at that time, I am subject to the contempt powers of the Court, including fine and confinement in jail.
6. Details of Offense: A Cheur (a) IT the trued to lick him in the look
Complainant: Civery Howey 1/8/90 Social Security #: 2725:
Address: 14 10 10 10 10 10 10 10 10 10 10 10 10 10
Employer's Name and Address: Lettle Dougland Phone No. 336 45 7 600
Phone No
Witnesses Name and Address:
Phone No.
Court Date: Time: Court Date: (Signature of Complainant)
144 100 00
Sworn To Before The Undersigned, This Day Of, 20
Green - Court File Blue - Complainant Yellow - Victim Advocate (Magistrate's Signature)
(Rev. 10/02)

