

File No. <b>20CR 054044</b>		Law Enforcement Case No. GRAHAM POLICE DEPARTMENT		LID No.	SID No.	FBI No. 636472MD1		
<b>MAGISTRATE'S ORDER</b>		<b>STATE OF NORTH CAROLINA</b>		In The General Court Of Justice District Court Division				
Offense I M-ASSAULT ON A FEMALE		ALAMANCE County						
<b>THE STATE OF NORTH CAROLINA VS.</b>		<p>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 assault and strike MAYA GRAVES, a female person, by PUNCHING HER IN THE FACE WITH A CLOSED FIST. The defendant is a male person and was at least 18 years of age when the assault and striking occurred.</p> <p>VD (SMTC DENIED; VIC. ABS.)</p>						
Name And Address Of Defendant AVERY MARKEL HARVEY								
704 LARRY AVENUE APT PP GRAHAM NC 27253 ALAMANCE COUNTY (336) 512-9943								
Race B	Sex M						Date Of Birth 07/08/1990	Age
Social Security No. 245-67-6479							Drivers License No. & State 34153037 NC	
Name Of Defendant's Employer								
Offense Code(s) I 1389							Offense In Violation Of G.S. I 14-33(C)(2)	
Date Of Offense 09/05/2020 through 09/05/2020								
Date Of Arrest & Check Digit No. (As Shown On Fingerprint Card) 09/05/2020								
Arresting Officer (Name, Address Or Department) B LAND GRAHAM POLICE DEPARTMENT 216 S MAPLE ST GRAHAM NC 27253 ALAMANCE COUNTY (336) 570-6711								
Names & Addresses Of Witnesses (Including Counties & Telephone Nos.) MAYA GRAVES 704 LARRY AVE  GRAHAM NC 27253 ALAMANCE COUNTY (336) 567-7674		This act was in violation of the law referred to in this Magistrate's Order. This Magistrate's Order is issued upon information furnished under oath by the arresting officer(s) shown. A copy of this Order has been delivered to the defendant.						
<input checked="" type="checkbox"/> Misdemeanor Offense Which Requires Fingerprinting Per Fingerprint Plan		Date Issued 09/05/2020		Signature DAVID L. CRABBE		Location Of Court Alamance County Courthouse; 9999 212 W ELM ST GRAHAM, NC 27253		
		<input checked="" type="checkbox"/> Magistrate <input type="checkbox"/> Deputy CSC <input type="checkbox"/> Assistant CSC <input type="checkbox"/> Clerk Of Superior Court		Court Date 09/08/2020				
				Court Time 2:00 <input type="checkbox"/> AM <input checked="" 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: 0 <input type="checkbox"/> 1 (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.CL. <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> guilty _____ M.CL. <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> guilty _____ M.CL. <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:</b> Record SSN or Tax ID No. of aggrieved party(ies) on AOC-CR-382, "Certification Of Identity (Victims' Restitution)/Certification Of Identity (Witness Attendance)."  <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:		It is <b>ORDERED</b> that this: <input type="checkbox"/> Judgment is continued upon payment of costs. <input type="checkbox"/> case be consolidated for judgment with _____. <input type="checkbox"/> sentence is to run at the expiration of the sentence in _____.	
Date _____ Signature Of District Court Judge Or Magistrate _____		<input checked="" type="checkbox"/> <b>COMMITMENT:</b> It is <b>ORDERED</b> that the Clerk deliver <u>two</u> 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.	
Date _____ Signature Of District Court Judge Or Magistrate _____		<b>PROBABLE CAUSE:</b> <input type="checkbox"/> Probable cause is found as to all Counts except _____, and the defendant is bound over to Superior Court for action by the grand jury. <input type="checkbox"/> No probable cause is found as to Count(s) _____ of this Magistrate's Order and the Count(s) is dismissed.	
<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 _____ Name Of District Court Judge Or Magistrate (Type Or Print) _____ Signature Of District Court Judge Or Magistrate _____	
Date Waived _____ Signature Of Defendant _____		<b>CERTIFICATION</b>	
I certify that this Judgment is a true and complete copy of the original which is on file in this case.			
Signature Of Attorney _____		Date _____ Date Delivered To Sheriff _____ Signature _____	
		<input type="checkbox"/> Dep. CSC <input type="checkbox"/> Asst. CSC <input type="checkbox"/> CSC	