

File No. 20CR 054094		Law Enforcement Case No.		LID No.	SID No.	FBI No.							
WARRANT FOR ARREST		STATE OF NORTH CAROLINA In The General Court Of Justice District Court Division <u>ALAMANCE</u> County											
Offense I M-SECOND DEGREE TRESPASS II M-RESISTING PUBLIC OFFICER III M-ASSAULT GOVT OFFICIAL/EMPLY													
THE STATE OF NORTH CAROLINA VS.													
Name And Address Of Defendant DIONNE LILES 12 NE COURT SQUARE GRAHAM NC ALAMANCE COUNTY		To any officer with authority and jurisdiction to execute a warrant for arrest for the offense(s) charged below: 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 the defendant named above unlawfully and willfully did without authorization remains on premises of ALAMANCE COUNTY SHERIFF'S OFFICE - PVA, located at 109 S MAPLE ST, after having been notified not to enter or remain there by a person in charge of the premises, a lawful occupant and another authorized person, J. GIANNOTTI.											
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">Race B</td> <td style="width:15%;">Sex F</td> <td style="width:25%;">Date Of Birth 05/24/1981</td> <td style="width:15%;">Age</td> </tr> <tr> <td colspan="2">Social Security No./Tax ID No.</td> <td colspan="2">Drivers License No. & State</td> </tr> <tr> <td colspan="4">Name Of Defendant's Employer</td> </tr> </table>							Race B	Sex F	Date Of Birth 05/24/1981	Age	Social Security No./Tax ID No.		Drivers License No. & State
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Offense Code(s) I 5709 II 5310 III 1391	Offense In Violation Of G.S. I 14-159.13 II 14-223 III 14-33(C)(4)												
Date Of Offense 09/08/2020													
Date Of Arrest & Check Digit No. (As Shown On Fingerprint Card) 918120 1447UCM		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 the defendant named above unlawfully and willfully did assault J. GIANNOTTI, a government officer of the ALAMANCE COUNTY SHERIFF'S OFFICE by STRUCK WITH CARDBOARD SIGN ON HEAD. At the time of the offense the officer was discharging and attempting to discharge the following duty of that office ENSURING THE SAFETY, SECURITY, AND ORDERLY OPERATION OF THE SHERIFF'S OFFICE.											
Complainant (Name, Address Or Department) MARK A DOCKERY JR JR. ALAMANCE COUNTY SHERIFFS OFFICE 109 SOUTH MAPLE ST GRAHAM NC 27253 ALAMANCE COUNTY (336) 570-6300													
Names & Addresses Of Witnesses (Including Counties & Telephone Nos.)		This act(s) was in violation of the law(s) referred to in this Warrant. This Warrant is issued upon information furnished under oath by the complainant listed. You are DIRECTED to arrest the defendant and bring the defendant before a judicial official without unnecessary delay to answer the charge(s) above.											
		Signature WENDY HUNTER		Location Of Court Alamance County Courthouse; CRMA 212 W ELM ST GRAHAM, NC 27253		Court Date 09/28/2020 Court Time 09:00							
<input type="checkbox"/> Misdemeanor Offense Which Requires Fingerprinting Per Fingerprint Plan		Date Issued 09/08/2020		<input checked="" type="checkbox"/> Magistrate <input type="checkbox"/> Assistant CSC		<input type="checkbox"/> Deputy CSC <input type="checkbox"/> Clerk Of Superior Court							
						<input checked="" type="checkbox"/> AM <input type="checkbox"/> PM							

(over)

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If this Warrant For Arrest is not served within one hundred and eighty (180) days, 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.

District Attorney

☐ Waived
☐ Not Indigent
☐ Denied

Attorney For Defendant

☐ Appointed
☐ Retained

PRIOR CONVICTIONS:

No./Level: 0 ☐ I (0) ☐ II (1-4) ☐ III (5+)

RETURN OF SERVICE

I certify that this Warrant was received and served as follows:

Date Received 09-08-20 Date Served 09-08-20 Time Served 9221 ☐ AM ☐ PM Date Returned 09-08-20

☒ By arresting the defendant and bringing the defendant before:

Name Of Judicial Official

☐ This Warrant WAS NOT served for the following reason:

Signature Of Officer Making Return

Name Of Officer (type or print)

Department Or Agency Of Officer

REDELIVERY/REISSUANCE

Date Signature ☐ Dep. CSC
☐ Assist. CSC
☐ CSC

RETURN FOLLOWING REDELIVERY/REISSUANCE

I certify that this Warrant was received and served as follows:

Date Received Date Served Time Served ☐ AM ☐ PM Date Returned

☐ By arresting the defendant and bringing the defendant before:

Name Of Judicial Official

☐ This Warrant WAS NOT served for the following reason:

Signature Of Officer Making Return

Name Of Officer (type or print)

Department Or Agency Of Officer

APPEAL ENTRIES

☐ The defendant, in open court, gives notice of appeal to the
☐ District ☐ Superior Court.
☐ The current pretrial release order is modified as follows:

Date Signature Of District Court Judge Or Magistrate

WAIVER OF PROBABLE CAUSE HEARING

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

PLEA: ☐ guilty ☐ no contest
☐ guilty ☐ no contest
☐ guilty ☐ no contest
☐ not guilty

VERDICT: ☐ guilty ☐ guilty ☐ guilty ☐ not guilty
M.C.L. ☐ A1 ☐ 1 ☐ 2 ☐ 3
M.C.L. ☐ A1 ☐ 1 ☐ 2 ☐ 3
M.C.L. ☐ A1 ☐ 1 ☐ 2 ☐ 3

JUDGMENT: The defendant appeared in open court and freely, voluntarily and understandingly entered the above plea; on the above verdict, it is ORDERED that the defendant: ☐ pay costs and a fine of \$.
☐ be imprisoned for a term of days in the custody of the ☐ sheriff. ☐ MCP. ☐ DACJJ.* Pretrial credit days served.
☐ Work release ☐ is recommended. ☐ is not recommended. [☐ is ordered. (use form AOC-CR-602)]
☐ The Court finds that a ☐ longer ☐ shorter period of probation than that which is specified in G.S. 15A-1343.2(d) is necessary.
☐ 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: (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).")

- ☐ 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.
☐ 7. not be found in or on the premises of the complainant or
☐ 8. not assault, communicate with or be in the presence of the complainant or
☐ 9. provide a DNA sample pursuant to G.S. 15A-266.4. (AOC-CR-319)
☐ 10. Other:

It is ORDERED that this: ☐ Judgment is continued upon payment of costs.

☐ case be consolidated for judgment with

☐ sentence is to run at the expiration of the sentence in

☒ 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:

☐ Probable cause is found as to all Counts except , and the defendant is bound over to Superior Court for action by the grand jury.

☐ No probable cause is found as to Count(s) of this Warrant and the Count(s) is dismissed.

Date Name Of District Court Judge Or Magistrate (type or print) Signature Of District Court Judge Or Magistrate

CERTIFICATION

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
☐ Dep. CSC ☐ Asst. CSC
☐ Clerk Of Superior Court

STATE OF NORTH CAROLINA

File No.

20CR 54094

ALAMANCE

County

In The General Court Of Justice

☒ District ☐ Superior Court Division

STATE VERSUS

Name Of Defendant

DIONNE LILES

WAIVER OF COUNSEL

G.S. 7A-457; 15A-1242

Additional File No.(s) And/Or Offense(s)

ACKNOWLEDGMENT OF RIGHTS AND WAIVER

As the undersigned party in this action, I freely and voluntarily declare that I have been fully informed of the charges against me, the nature of and the statutory punishment for each such charge, and the nature of the proceedings against me; that I have been advised of my right to have counsel assigned to assist me and my right to have the assistance of counsel in defending against these charges or in handling these proceedings, and that I fully understand and appreciate the consequences of my decision to waive the right to assigned counsel and the right to assistance of counsel.

I freely, voluntarily and knowingly declare that:

(check only one)

- ☐ 1. I waive my right to assigned counsel and that I, hereby, expressly waive that right.
- ☒ 2. I waive my right to all assistance of counsel which includes my right to assigned counsel and my right to the assistance of counsel. In all respects, I desire to appear in my own behalf, which I understand I have the right to do.

SWORN AND SUBSCRIBED TO BEFORE ME

Date

9/28/20

Date

Signature

Clerk of Superior Court

Signature Of Defendant

Dionne Liles

☐ Judge☐ Clerk Of Superior Court☐ Asst. CSC☒ Deputy CSC☐ Magistrate

CERTIFICATE OF JUDICIAL OFFICIAL

I certify that the above named defendant has been fully informed of the charges against him/her, the nature of and the statutory punishment for each charge, and the nature of the proceeding against the defendant and his/her right to have counsel assigned by the court and his/her right to have the assistance of counsel to represent him/her in this action; that the defendant comprehends the nature of the charges and proceedings and the range of punishments; that he/she understands and appreciates the consequences of his/her decision and that the defendant has voluntarily, knowingly and intelligently elected in open court to be tried in this action:

(check only one)

- ☐ 1. without the assignment of counsel.
- ☒ 2. without the assistance of counsel, which includes the right to assigned counsel and the right to assistance of counsel.

NOTE: For a waiver of assigned counsel only, both blocks numbered "1" must be checked. For a waiver of all assistance of counsel, both blocks numbered "2" must be checked.

Date

9-28-2020

Signature Of Judicial Official

Shirley Hunter

Name Of Judicial Official (Type Or Print)

NOTE: A magistrate may accept waivers of counsel if designated to do so by the Chief District Court Judge. See G.S. 7A-146(11) and G.S. 7A-292(15).

S.E. Ray / A.C.S.O.

STATE OF NORTH CAROLINA		File No. 20CR 054094	
ALAMANCE County		In The General Court Of Justice <input checked="" type="checkbox"/> District <input type="checkbox"/> Superior Court Division	
STATE VERSUS		CONDITIONS OF RELEASE AND RELEASE ORDER	
Name And Address Of Defendant DIONNE LILES 12 NE COURT SQUARE GRAHAM NC		# 20RO841915 Amount Of Bond \$ G.S. Chapter 15A, Art. 25, 26	
Offenses And Additional File Numbers 20CR54094 WFA; M-SECOND DEGREE TRESPASS; M-RESISTING PUBLIC OFFICER; M-ASSAULT GOVT OFFICIAL/EMPLY			
<input type="checkbox"/> See Attachment			
Location Of Court Alamance County Courthouse; CRMA		<input checked="" type="checkbox"/> District <input type="checkbox"/> Superior	Date 09/28/2020 Time 09:00 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM
To The Defendant Named Above , 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. The defendant has been advised of charge(s) against him/her and his/her right to communicate with counsel and friends. <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 NOT TO KNOWINGLY VIOLATE ANY ANY RESTRICTIONS ON ASSEMBLY <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: _____			
Additional Information			
Date 09/08/2020	Signature Of Judicial Official WENDY HUNTER	<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	
ORDER OF COMMITMENT			
To The Custodian Of The Detention Facility Named Below , 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: _____ <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.			
Name Of Detention Facility	Date	Signature Of Judicial Official WENDY HUNTER	
WRITTEN PROMISE TO APPEAR OR CUSTODY RELEASE			
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.			
Date 9/8/20	Signature Of Defendant Dionne Liles	Signature Of Person Agreeing To Supervise Defendant	
Name Of Person Agreeing To Supervise Defendant (type or print)		Address Of Person Agreeing To Supervise Defendant	
DEFENDANT RELEASED ON BAIL			
Date 9-8-20	Time 1245	<input type="checkbox"/> AM <input checked="" type="checkbox"/> PM	Signature Of Jailer A. Walker Scott
AOC-CR-200, Rev. 12/18 © 2018 Administrative Office of the Courts			

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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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