


File No. 20CR 055011		Law Enforcement Case No.	LID No.	SID No.	FBI No. 707860EH2		
MAGISTRATE'S ORDER		STATE OF NORTH CAROLINA In The General Court Of Justice District Court Division ALAMANCE County					
Offense I M-FAIL TO DISPERSE ON COMMAND							
THE STATE OF NORTH CAROLINA VS.							
Name And Address Of Defendant REGIS KISHON GREEN 4600 UNIVERSITY DR 302 DURHAM NC DURHAM COUNTY							
Race B	Sex M					Date Of Birth 03/23/1992	Age
Social Security No. [REDACTED]						Drivers License No. & State 34427430 NC	
Name Of Defendant's Employer							
Offense Code(s) I 5312						Offense In Violation Of G.S. I 14-288.5	
Date Of Offense 10/31/2020							
Date Of Arrest & Check Digit No. (As Shown On Fingerprint Card) 10/31/20 2013 UCY							
Arresting Officer (Name, Address Or Department) MICHAEL DEAN CULLER ALAMANCE COUNTY SHERIFFS OFFICE 109 SOUTH MAPLE ST GRAHAM NC 27253 ALAMANCE COUNTY (336) 570-6300						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 FAILED TO VACATE THE PREMISES AFTER VIOLATING THE PERMITTING PROCESS AND FAILING TO HEED COMMANDS. GIVEN 3 WARNINGS WITH 5 MINUTES IN BETWEEN THE WARNINGS	
Names & Addresses Of Witnesses (Including Counties & Telephone Nos.) MARK A DOCKERY JR JR. ALAMANCE COUNTY SHERIFFS OFFICE 109 SOUTH MAPLE ST GRAHAM NC 27253 ALAMANCE COUNTY (336) 570-6300							
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 type="checkbox"/> Misdemeanor Offense Which Requires Fingerprinting Per Fingerprint Plan		Date Issued 10/31/2020		<input checked="" type="checkbox"/> Magistrate <input type="checkbox"/> Deputy CSC <input type="checkbox"/> Assistant CSC <input type="checkbox"/> Clerk Of Superior Court			
		Signature H B RODGERS		Location Of Court Alamance County Courthouse; CRMB 212 W ELM ST GRAHAM, NC 27253			
				Court Date 11/12/2020 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		PRIOR CONVICTIONS: 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 <input type="checkbox"/> guilty <input type="checkbox"/> guilty <input type="checkbox"/> not guilty <input type="checkbox"/> guilty <input type="checkbox"/> guilty <input type="checkbox"/> guilty <input type="checkbox"/> not guilty		M.C.L. <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 M.C.L. <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 M.C.L. <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 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: <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: 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)."											
<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: _____ _____ _____ _____ _____											
APPEAL ENTRIES											
<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									
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									
Date		Name Of District Court Judge Or Magistrate (Type Or Print)				Signature Of District Court Judge Or Magistrate					
Date		Date Delivered To Sheriff				Signature					
Date		Signature									
CERTIFICATION											
I certify that this Judgment is a true and complete copy of the original which is on file in this case.											
<input type="checkbox"/> Dep. CSC <input type="checkbox"/> Asst. CSC <input type="checkbox"/> CSC											

