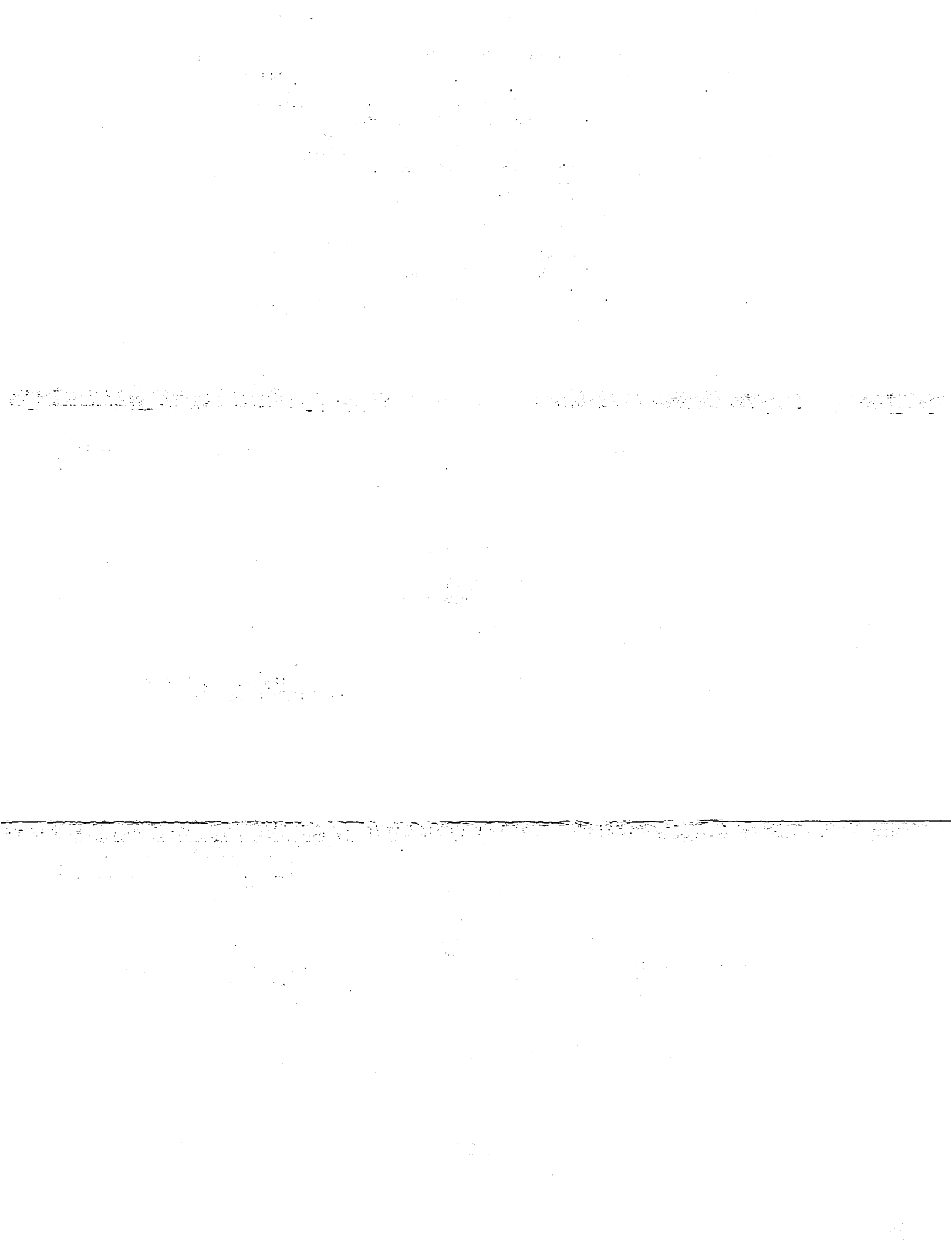


NORTH CAROLINA UNIFORM CITATION - COURT COPY							Citation No.	
STATE OF NORTH CAROLINA <u>Alamance</u> County District Court File No. 2020CR 708209						269785G		
TO THE DEFENDANT NAMED BELOW: You have been charged with the misdemeanor(s) or infraction(s) specified below. Read this citation carefully.								
YOUR COURT DATE AND LOCATION								
Court Day	Date	Time	Court Location		Courtroom	Interpreter	Agency Case Number	
Mon	11/09/2020	09:00AM	CRIMINAL CT BLD 1		CRMA			
THE STATE OF NORTH CAROLINA VS.								
Drivers License No.		State	Source	Name Of Defendant			Race	
27160869		NC	DL	VAUGHN, DEVIN LEE			Black	
CDL No		Class		Address			Gender	
		C		923 TURRENTINE ST			Male	
Social Security No.			City		State	Zip	Date Of Birth	Age
xxx-xx-5788			BURLINGTON		NC	27215	03/14/1985	35
CHARGING OFFICER INFORMATION								
Date.	Signature Of Officer			No.	Law Enforcement Agency		Troop/Squad	District/Zone
09/04/2020	Officer C D DUNNAGAN			3064	GRAHAM POLICE DEPARTMENT			
WHAT YOU ARE CHARGED WITH								
The officer named below has probable cause to believe that on or about <u>Friday</u> , the <u>04</u> day of <u>September</u> , <u>2020</u> at <u>09:11PM</u> in the county named above you did unlawfully and willfully								
ASSAULT AND STRIKE (STEVEN MARLEY) BY (STRIKING STEVEN MARLEY IN THE HEAD) (G.S. 14-33(A))								
and on or about _____, the _____ day of _____, _____ at _____ in the county named above you did unlawfully and willfully								
YOUR VEHICLE								
Vehicle License No.	State	Trailer Type	CMV	Vehicle Type		Vehicle Make	Year	Haz. Mat.
U	U		No	Unknown or Unreadable				No
OTHER INFORMATION								
Area	Weather	Visibility	Traffic	Accident	Speed	On Highway No./Street		
Business	Clear	Clear	Light	No		OT COURT SQUARE		
<input type="checkbox"/> Injury or Serious Injury	SHIP Code		In Vicinity/City Of		At/Near Intersection			
<input type="checkbox"/> Passengers Under 16					N MAIN			
WITNESSES				OFFICER COMMENTS				
Witness #1		Witness #2		Witness #3		SEE INCIDENT/PROTEST		
COURT USE ONLY								
District Attorney			Attorney For Defendant At Time Of Trial Or Plea			<input type="checkbox"/> Appointed <input type="checkbox"/> Retained <input type="checkbox"/> Waived		
						PRIOR CONVICTIONS		
						No. Level: <u>0</u> <input type="checkbox"/> I (0) <input type="checkbox"/> II (1-4) <input type="checkbox"/> III (5+)		
PLEA:		<input type="checkbox"/> guilty/resp. <input type="checkbox"/> no contest		VERDICT/		<input type="checkbox"/> guilty/resp. <input type="checkbox"/> M.C.L. <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3		
		<input type="checkbox"/> guilty/resp. <input type="checkbox"/> no contest		PENDING:		<input type="checkbox"/> guilty/resp. <input type="checkbox"/> M.C.L. <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3		
		<input type="checkbox"/> not guilty/resp.				<input type="checkbox"/> not guilty/resp. <input type="checkbox"/> V/D		
JUDGMENT: The defendant appeared in open court and freely, voluntarily and understandingly entered the above plea; on the above verdict/finding, it is ORDERED that the defendant:								
<input type="checkbox"/> pay costs and a fine/penalty of \$ _____ <input type="checkbox"/> be imprisoned for a term of _____ days in custody of the sheriff. Pretrial credit _____ days served. <input type="checkbox"/> The Court finds that a								
<input type="checkbox"/> longer <input type="checkbox"/> shorter period of probation than specified in G.S. 15A-1343.2(d) is necessary. <input type="checkbox"/> Execution of sentence is suspended and the defendant is placed on unsupervised probation for _____ months, subject to the regular conditions of probation and the following: <input type="checkbox"/> (1) pay costs and a fine/penalty of \$ _____ <input type="checkbox"/> (2) not operate a motor vehicle until properly licensed by DMV.								
<input type="checkbox"/> (3) complete _____ hours of community service within _____ days and pay the fee. <input type="checkbox"/> (4) Other: _____								
It is ORDERED 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 _____ <input type="checkbox"/> The Court finds just cause to waive costs as ordered on attached <input type="checkbox"/> AOC-CR-618. <input type="checkbox"/> Other: _____								
<input type="checkbox"/> COMMITMENT: It is ORDERED that the Clerk deliver two (2) 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.								
<input type="checkbox"/> The defendant in open court gives notice of appeal to the Superior Court.								
<input type="checkbox"/> The current pretrial release order is modified as follows: _____								
Date	Signature Of District Court Judge			I certify that this Judgment is a true copy.	Date	Signature Of Deputy/Assistant/CSC		



STATE OF NORTH CAROLINA

IN THE GENERAL COURT OF JUSTICE
DISTRICT COURT DIVISION

COUNTY OF ALAMANCE

20 CR 709215

STATE OF NORTH CAROLINA)

V)

DEVIN LEE VAUGHN)

Defendant)

NOTICE OF APPEARANCE

Comes now Patrick E. Morgan, Attorney at Law, and

pursuant to the provisions of N.C. General Statute §15A-141(1) hereby files a notice of his/her General Appearance in the above-captioned case on behalf of the above-named Defendant.

pursuant to the provisions of N.C. General Statute §15A-141 (3) hereby indicates to the Court that he/she is appearing in the above-captioned case for the limited purpose of representing the named Defendant

in the District Court proceedings herein, and for no other purpose.

in the District Court proceedings of _____ and for for no other purpose.

Respectfully submitted, this 2 day of November, 2020



Attorney of Record

209 Lloyd St., Suite 120

Carrboro, NC 27510

Address

919-923-1577

Phone #

THE UNIVERSITY OF CHICAGO

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