

File No. <div style="text-align: center; font-weight: bold; font-size: 1.2em;">20CR 052902</div>		Law Enforcement Case No. ALAMANCE COUNTY SHERIFFS OFFICE		LID No.	SID No.	FBI No. 896546CG7													
MAGISTRATE'S ORDER		STATE OF NORTH CAROLINA																	
Offense I M-RESISTING PUBLIC OFFICER II M-FAIL TO DISPERSE ON COMMAND		In The General Court Of Justice District Court Division <div style="text-align: center; font-weight: bold; font-size: 1.1em;">ALAMANCE County</div>																	
THE STATE OF NORTH CAROLINA VS.		<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 resist, delay and obstruct A. NICHOLSON, a public officer holding the office of GRAHAM PD, by REFUSED TO LEAVE THE AREA. At the time, the officer was discharging and attempting to discharge a duty of his office by CONDUCTING SECURITY.</p> <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 FAILING TO LEAVE AFTER BEING GIVEN MULTIPLE COMMANDS TO DISPERSE FROM THE AREA.</p> <p>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.</p>																	
Name And Address Of Defendant MATTHEW BRODERICK EDWARDS 693 HAW RIVER HOPEDALE RD BURLINGTON NC 27217 ALAMANCE COUNTY (336) 290-3008																			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">Race</td> <td style="width:15%;">Sex</td> <td style="width:25%;">Date Of Birth</td> <td style="width:15%;">Age</td> </tr> <tr> <td style="text-align: center;">W</td> <td style="text-align: center;">M</td> <td style="text-align: center;">09/25/1992</td> <td></td> </tr> </table>							Race	Sex	Date Of Birth	Age	W	M	09/25/1992						
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Name Of Defendant's Employer																			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">Offense Code(s)</td> <td>Offense In Violation Of G.S.</td> </tr> <tr> <td>I 5310</td> <td>I 14-223</td> </tr> <tr> <td>II 5312</td> <td>II 14-288.5</td> </tr> </table>							Offense Code(s)	Offense In Violation Of G.S.	I 5310	I 14-223	II 5312	II 14-288.5							
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II 5312	II 14-288.5																		
Date Of Offense																			
06/27/2020 through 06/27/2020																			
Date Of Arrest & Check Digit No. (As Shown On Fingerprint Card)																			
06/27/2020																			
Arresting Officer (Name, Address Or Department) CYMRY ANN FLOOD ALAMANCE COUNTY SHERIFFS OFFICE 109 SOUTH MAPLE ST GRAHAM NC 27253 ALAMANCE COUNTY (336) 570-6300																			
Names & Addresses Of Witnesses (Including Counties & Telephone Nos.) ADAM H NICHOLSON ALAMANCE COUNTY SHERIFFS OFFICE 109 SOUTH MAPLE ST GRAHAM NC 27253 ALAMANCE COUNTY (336) 570-6300																			
<input type="checkbox"/> Misdemeanor Offense Which Requires Fingerprinting Per Fingerprint Plan		Date Issued 06/27/2020		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;"><input checked="" type="checkbox"/> Magistrate</td> <td style="width:50%;"><input type="checkbox"/> Deputy CSC</td> </tr> <tr> <td><input type="checkbox"/> Assistant CSC</td> <td><input type="checkbox"/> Clerk Of Superior Court</td> </tr> </table>		<input checked="" type="checkbox"/> Magistrate	<input type="checkbox"/> Deputy CSC	<input type="checkbox"/> Assistant CSC	<input type="checkbox"/> Clerk Of Superior Court	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Location Of Court</td> <td style="width:40%;">Court Date</td> </tr> <tr> <td>Alamance County Courthouse; CRMB</td> <td>07/20/2020</td> </tr> <tr> <td>212 W ELM ST</td> <td>Court Time</td> </tr> <tr> <td>GRAHAM, NC 27253</td> <td>09:00 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM</td> </tr> </table>		Location Of Court	Court Date	Alamance County Courthouse; CRMB	07/20/2020	212 W ELM ST	Court Time	GRAHAM, NC 27253	09:00 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM
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<input type="checkbox"/> Assistant CSC	<input type="checkbox"/> Clerk Of Superior Court																		
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212 W ELM ST	Court Time																		
GRAHAM, NC 27253	09:00 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM																		

(over)

ORIGINAL COPY

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: <u> 0 </u> I (0) <u> </u> II (1-4) <u> </u> 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.C.L. <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> guilty _____ M.C.L. <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> guilty _____ M.C.L. <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> not guilty _____				
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					
Signature Of Attorney						
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	<input type="checkbox"/> Dep. CSC <input type="checkbox"/> Asst. CSC <input type="checkbox"/> CSC			

STATE OF NORTH CAROLINA

ALAMANCE

County

File No.

20CR52902

In The General Court Of Justice

☒ District ☐ Superior Court Division

STATE VERSUS

Name Of Defendant

Matthew Edwards

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

20 July 2020

Date

Signature

Signature Of Defendant

☐ 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

7-20-2020

Signature Of Judicial Official

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).

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CSC/Magistrate Receipt

Total Received

#350.00

Receipt #

I - 722431

Date 06/27/20 County ALAMANCE

For County ALAMANCE

Cash ☒

Check ☐

MO ☐

File # 20CR 052902

For MATTHEW B. EDWARDS

Received of LISA K. ROWDEN

Received by J. HOLLAN

<u>Criminal Cost</u>	<u>Amount</u>	<u>Magistrates</u>	<u>Amount</u>	<u>Estate/Special Proceeding</u>	<u>Amount</u>
IFC		CRMC		ESTC	
IFDA		CTWM		Other Estate Cost	21140
IFTA		IFMC		Trust	26310
IFTC		IFWM		SPSC	
CRDC		MMVM		Foreclosure	21445
CRTC		SBM		Surplus Funds	26600
CRDA		Marriage	21330	Widows Allowance	21140
CRTA		FOR ALL MAGISTRATE COSTS INDICATE:		Upset Bid	26700
CRDS		OFFICER		<u>Civil Cost</u>	
CRSC		FACILITY		CVMC	
MMV		(If municipal facility)		CDDC	
SB		<u>Magistrates/Clerks</u>		CVDC	
FOR ALL CRIMINAL COSTS		Cash Bond	26210	CVSC	
INDICATE:		Cash Bond-Other Cnty	292XX	CVBC	
OFFICER		Purge Pymt	26410	Judgment	26115
FACILITY		Purge Pymt-Other Cnty	298XX	Rent Bond	26220
(If municipal facility)		Partial Pay	20100	Alimony	26420
<u>Miscellaneous Receipts</u>		Restitution	26110	Civil Officer Fee	22515
AAF		Fines	22700	Child Support	26410
BC		Jail Fees	22600	<u>Other</u>	
OSA		Other Officer Fees		Other-	
Copies		FTA Fee	21211	Other-	
Record Check		FTC Fee	21213	Other-	
Civil Revocation		EXP Community Svc	24202	Other-	
Bad Ck Restitution		Other-		Other-	



STATE OF NORTH CAROLINA		File No. 20CR 052902	
ALAMANCE County		In The General Court Of Justice <input checked="" type="checkbox"/> District <input type="checkbox"/> Superior Court Division	
Name And Mailing Address Of Defendant MATTHEW BRODERICK EDWARDS 693 HAW RIVER HOPEDALE RD BURLINGTON NC 27217 Telephone No. Of Defendant (336) 290-3008		APPEARANCE BOND FOR PRETRIAL RELEASE	
Total Bond Required \$ 3350.00		Amount Of This Bond \$ 3350.00	
		# 20AB580476 G.S. 15A-531, 15A-534, 15A-544.2	
Offenses And Additional File Numbers 20CR52902 M-RESISTING PUBLIC OFFICER, M-FAIL TO DISPERSE ON COMMAND			
<input type="checkbox"/> See Attachment			
<input type="checkbox"/> Unsecured Appearance Bond - I, the undersigned defendant, acknowledge that my personal representatives and I are bound to pay the State of North Carolina the sum shown above, subject to the conditions of this Bond stated on the reverse side. <input type="checkbox"/> Cash Appearance Bond By Defendant (See note on reverse side.) - I, the undersigned defendant, acknowledge that I am bound to pay the State of North Carolina the sum shown above, and hereby deposit the cash identified below as security with the understanding that the deposit will be returned upon the Court's determination that the conditions of release have been performed, subject to the conditions of this Bond stated on the reverse side, and that it will be available to satisfy my obligations. <input type="checkbox"/> Defendant's Property Appearance Bond - I, the undersigned defendant, acknowledge that I am bound to pay the State of North Carolina the sum shown above, subject to the conditions of this Bond stated on the reverse side, and as security for said Bond have executed a mortgage or deed of trust to real or personal property, payable to the State of North Carolina and with power of sale conditioned upon the breach of any condition of this Bond. <input checked="" type="checkbox"/> Surety Appearance Bond - We, the undersigned, jointly and severally acknowledge that we and our personal representatives are bound to pay the State of North Carolina the sum shown above, subject to the conditions of this Bond stated on the reverse side. Any undersigned professional bondsman, bail agent, or runner attests that the AFFIDAVIT on the reverse side is complete and true. If a cash deposit is indicated below, surety(ies) has deposited the cash to secure the obligation as surety(ies) on this bond with the understanding that the deposit will be returned to the surety(ies) upon termination of that obligation as provided by law, and that it will NOT be available to satisfy defendant's obligations. (For cash bond, see note on reverse side.)			
Date Of Execution Of Bond 06/27/2020		Signature Of Defendant <i>Matthew Edwards</i> Matthew Edwards	
ACCOMMODATION BONDSMAN			
<input type="checkbox"/> See attached AOC-CR-201A for additional accommodation bondsmen executing this bond.			
Name And Address Of Accommodation Bondsman ROWDEN, LISA KAY 218 WOODLAWN RD MEBANE NC 27302 Telephone No. 336 380 0527		Name And Address Of Accommodation Bondsman Telephone No.	
PROFESSIONAL BONDSMAN			
Name Of Bondsman		Name Of Runner, If Applicable	
License No. Of Bondsman	Telephone No.	License No. Of Runner	Telephone No.
INSURANCE COMPANY			
Name Of Insurance Company		Name Of Bail Agent	
Power Of Appointment No. Of Bail Agent		License No. Of Bail Agent	Telephone No.
SIGNATURE			
Signature Of Surety <i>[Signature]</i>		Signature Of Surety	
SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME		SWORN/AFFIRMED AND SUBSCRIBED TO BEFORE ME	
Date 06/27/2020	Signature JEFFREY HOLLAN	Date	Signature
<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"/> Custodian Of Detention Facility [G.S. 15A-537(c)]		<input type="checkbox"/> Magistrate <input type="checkbox"/> Deputy CSC <input type="checkbox"/> Assistant CSC <input type="checkbox"/> Clerk Of Superior Court <input type="checkbox"/> Custodian Of Detention Facility [G.S. 15A-537(c)]	
COMPLETE IF CASH DEPOSITED			
Signature Of Official Accepting Cash JEFFREY HOLLAN		Name Of Official Accepting Cash (type or print) JEFFREY HOLLAN	Receipt No. I-722431

NOTE: If cash deposited, see note on reverse side.

ORIGINAL COPY

[Signature] *[Signature]*

CONDITIONS

The conditions of this Bond are that the above named defendant shall appear in the above entitled action(s) whenever required. It is agreed and understood that this Bond is effective and binding upon the defendant and each surety throughout all stages of the proceedings in the trial divisions of the General Court of Justice until the entry of judgment in the district court from which no appeal is taken or until the entry of judgment in the superior court, unless terminated earlier by operation of law or order of the court. If the defendant appears as ordered until termination of the Bond, then the bond is to be void, but if the defendant fails to appear as required, the Court will forfeit the bond pursuant to Part 2 of Article 26 of Chapter 15A of the General Statutes.

Each accommodation bondsman, by signing on the reverse or on the attached AOC-CR-201A, states: "I have reached the age of 18 years and am a bona fide resident of North Carolina. Aside from love and affection and release of the above named defendant, I have received no consideration for acting as surety. I own sufficient property over and above all liabilities, homestead and other exemptions allowed me by law to enable me to pay this Bond should it be ordered forfeited. I understand that if I sign this Bond without sufficient property, I am guilty of a crime."

AFFIDAVIT

NOTE: "Professional bondsmen, surety bondsmen [bail agents], and runners shall file with the clerk of court having jurisdiction over the principal an affidavit on a form furnished by the Administrative Office of the Courts." G.S. 58-71-140(d). Check all options that apply.

- ☐ 1. I have not, nor has anyone for my use, been promised or received any collateral, security or premium for executing this Bond.
- ☐ 2. I have been promised a premium in the amount shown below, which is due on the date shown below.
- ☐ 3. I have received a premium in the amount shown below.
- ☐ 4. I have been given collateral security by the person named below, of the nature and in the amount shown below.

Amount Of Premium Promised \$	Date Due	Amount Of Premium Received \$
Name Of Person From Whom Collateral Received	Nature Of Collateral	Value

**AFFIX STAMP OR
POWER OF ATTORNEY
HERE**

RETURN OF CUSTODIAN OF DETENTION FACILITY

The defendant named on the reverse was released from my custody on the date shown below upon the execution of this Appearance Bond.

Date Defendant Released	Name Of Custodian (type or print)	Signature Of Custodian	<input type="checkbox"/> Sheriff <input type="checkbox"/> Deputy Sheriff
			<input type="checkbox"/> Other _____

NOTES ON CASH BONDS:

- (1) **To Official Taking The Bond.** Use this form for all cash bonds. Complete this form as follows:

When Cash Deposited By Defendant Or By Another Person Who Intends For The Cash To Be Used To Satisfy The Defendant's Obligations.

Enter defendant's name, address and telephone number at the top of Side One. Check "Cash Appearance Bond By Defendant." Have defendant sign. Do no more. No other person's name should appear on this form. Enter your name, sign and enter receipt number under "Complete If Cash Deposited." Make receipt out to DEFENDANT, not to any other person.

When Cash Deposited By Another Person Who Does NOT Intend For The Cash To Be Used To Satisfy The Defendant's Obligations.

Enter defendant's name, address and telephone number at the top of Side One. Check "Surety Appearance Bond." Have defendant sign. Enter name, address and telephone number of person depositing cash under "Accommodation Bondsman." Have that person sign under "Signature Of Surety." Complete notarization for that person. Enter your name, sign and enter receipt number under "Complete If Cash Deposited." Make receipt out to person depositing the cash.

- (2) **To Bookkeeper.** If case disposed without forfeiture, disburse cash as follows: (1) If "Cash Appearance Bond By Defendant" checked on Side One, disburse to defendant or apply to defendant's obligations if court so orders. (2) If "Surety Appearance Bond" is checked on Side One, disburse only to the person(s) named under "Accommodation Bondsman."
- (3) **Bond By Insurance Company Or Professional Bondsman As Surety Is Same As Cash Except In Child Support.** G.S. 15A-531(4) provides that an appearance bond executed by an insurance company or a professional bondsman (or a bail agent or runner on behalf of one of those sureties) is considered the same as a cash deposit, except in child support contempt proceedings for which only cash may satisfy a cash bond requirement.

STATE OF NORTH CAROLINA

ALAMANCE County

File No.

20CR 052902

In The General Court Of Justice
☒ District ☐ Superior Court Division

STATE VERSUS

Name And Address Of Defendant

MATTHEW BRODERICK EDWARDS
 693 HAW RIVER HOPEDALE RD

BURLINGTON NC 27217

CONDITIONS OF RELEASE AND RELEASE ORDER

20RO580182

G.S. Chapter 15A, Art. 25, 26

Amount Of Bond

\$ \$350.00

Offenses And Additional File Numbers

20CR52902 MAG ORDR; M-RESISTING PUBLIC OFFICER; M-FAIL TO DISPERSE ON COMMAND

☐ See Attachment

Location Of Court

Alamance County Courthouse; CRMB

☒ District ☐ Superior

Date

07/20/2020

Time

09:00 ☒ AM ☐ 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.

☒ Your release is authorized upon execution of your: ☐ WRITTEN PROMISE to appear ☐ UNSECURED BOND in the amount shown above
☐ CUSTODY RELEASE ☒ SECURED BOND in the amount shown above (NOTE: Give a copy of this order to any surety who posts bond.)
☐ HOUSE ARREST with ELECTRONIC MONITORING administered by (agency) and the SECURED BOND above. You may leave your residence for the purpose(s) of ☐ employment ☐ counseling ☐ course of study ☐ vocational training
 UNLESS YOU LIVE OR WORK IN THE CITY OF GRAHAM, YOU ARE ORDERED TO LEAVE FOR 72 HOURS UPON RELEASE FROM DETENTION. YOU MUST NOT KNOWINGLY VIOLATE ANY CURFEW OR OTHER RESTRICTION ON ASSEMBLY OR MOVEMENT IMPOSED BY DECLARED ST OF EMERG. W/O PERM. OF MAYOR

☐ Your release is not authorized.
☐ The defendant is required to provide (check all that apply) ☐ fingerprints under G.S. 15A-502. ☐ a DNA sample under G.S. 15A-266.3A.
 Prior to release, the defendant shall provide his/her (check all that apply) ☐ fingerprints. ☐ DNA sample.
☐ The defendant has been ☐ (i) charged with a felony while on probation (complete AOC-CR-272, Side One). ☐ (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).
☐ 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 _____.
☐ The defendant was arrested or surrendered after failing to appear as required under a prior release order.
☐ This was the defendant's second or subsequent failure to appear in this case.
☐ Your release is subject to the conditions as shown on the attached ☐ AOC-CR-270. ☐ Other: _____.

Additional Information

Date

06/27/2020

Signature Of Judicial Official

BERTRAM F. HEATHCOTE III

☒ Magistrate ☐ Deputy CSC ☐ Assistant CSC

☐ Clerk Of Superior Court ☐ District Court Judge ☐ 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: ☒ produce him/her in Court as provided above.

☐ hold him/her ☐ as provided on the attached AOC-CR-272. ☐ for the following purpose: _____.

☐ [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) _____, _____
☐ AM ☐ PM produce him/her before a magistrate of this county at that time to determine conditions of pretrial release.

Name Of Detention Facility

Alamance County Jail

Date

06/27/2020

Signature Of Judicial Official

BERTRAM F. HEATHCOTE III

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

Signature Of Defendant

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

06/27/2020

Time

16:35

☐ AM ☐ PM

Signature Of Jailer

[Signature]

AOC-CR-200, Rev. 12/18

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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
10-27-20	1225	Kennedy

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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