

File No. 20CR 055005		Law Enforcement Case No. GRAHAM POLICE DEPARTMENT	LID No.	SID No.	FBI No.			
MAGISTRATE'S ORDER		STATE OF NORTH CAROLINA In The General Court Of Justice District Court Division						
Offense I M-RESISTING PUBLIC OFFICER		ALAMANCE County						
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 OFFICER LOUIZES, a public officer holding the office of POLICE OFFICER, by JERKING AWAY FROM OFFICER WHEN THE OFFICER TRIED TO MOVE THE DEFENDANT FROM THE ROADWAY WHEN HE HAD BEEN ASKED SEVERAL TIMES TO MOVE BUT REFUSED. At the time, the officer was discharging and attempting to discharge a duty of his office by CLEARING THE ROADWAY.</p> <p style="color: blue; font-size: 1.2em;">VD (DEFERRAL PERIOD SUCCESSFUL)</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 TOMASZ PIOTR MURAWSKI								
617 ISLEY PLACE								
BURLINGTON NC 27215 ALAMANCE COUNTY (336) 227-4727								
Race W	Sex M					Date Of Birth 04/20/1980	Age	
Social Security No.						Drivers License No. & State		
Name Of Defendant's Employer								
Offense Code(s) I 5310						Offense In Violation Of G.S. I 14-223		
Date Of Offense 10/31/2020						Date Of Arrest & Check Digit No. (As Shown On Fingerprint Card) 10/31/2020		
Arresting Officer (Name, Address Or Department) B T EDWARDS GRAHAM POLICE DEPARTMENT 216 S MAPLE ST GRAHAM NC 27253 ALAMANCE COUNTY (336) 570-6711						Names & Addresses Of Witnesses (Including Counties & Telephone Nos.) A LOUIZES GRAHAM POLICE DEPARTMENT 216 S MAPLE ST GRAHAM NC 27253 ALAMANCE COUNTY (336) 570-6711		Signature AMELIA KNAUFF
<input type="checkbox"/> Misdemeanor Offense Which Requires Fingerprinting Per Fingerprint Plan		Date Issued 10/31/2020		Location Of Court Alamance County Courthouse; CRMA 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 12/14/2020 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 _____ 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 _____			
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				
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		
Date					