| STA          | ΓE OF NO                           | ORTH CARC              | LINA                                    |  | File No.                 |   |            |
|--------------|------------------------------------|------------------------|---|--|--------------------------|---|------------|
| County       |                                    |                        |   | In The General Court Of Justice ☐ District ☐ Superior Court Division |                          |   |            |
| Name And I   | Address Of Defend                  | STATE VERSUS           | S                                       | MISDEMEANOR<br>STATEMENT OF CHARGES                                  |                          |   |            |
| Race         |                                    | Sex                    | Date Of Birth                           |  |                          | G                                       | S. 15A-922 |
| Spoken Lan   | guage Court Interp  Yes: (explain) |                        | rty, Victim, Or Witness? (If Yes, ident | ify person(s) and  | d language(s). Interpret | ters provided for all court proceedings |            |
| Count<br>No. | Offense(s)                         |                        |   | Date Of Offense OR Date Range Of Offense                             |                          | G.S. No.                                | CL.        |
|              |                                    |                        |   |  |                          |   |            |
|              |                                    |                        |   |  |                          |   |            |
|              |                                    |                        |   |  |                          |   |            |
|              |                                    |                        |   |  |                          |   |            |
|              |                                    |                        |   |  |                          |   |            |
|              |                                    |                        |   |  |                          |   |            |
| 1.0          |                                    |                        | CHARGING L                              |  |                          | and in the county named abo             | - 41       |
|              |                                    | ve did unlawfully an   |   |  |                          |   |            |
|              | additional infor                   | mation on reverse.     |   |  |                          |   |            |
| Date         |                                    | Name Of Prosecutor (ty | pe or print)                            | Signa  | ture Of Prosecutor       |   |            |

**NOTE TO PROSECUTOR:** For a multi-page statement of charges, complete the signature line on the last page.

(Over - See Side Two for Prosecutor's continuation, if applicable, of CHARGING LANGUAGE section)

| STATE VERSUS  Name Of Defendant  |   |  |  |  |  |  |  |
|--|---|--|--|--|--|--|--|
|  |   |  |  |  |  |  |  |
| , the undersigned, upon information and be<br>defendant named above did unlawfully and v | lief allege that on or about the date(s) of offense willfully | shown and in the county named above, the |  |  |  |  |  |
|  |   |  |  |  |  |  |  |
|  |   |  |  |  |  |  |  |
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|  |   |  |  |  |  |  |  |

Signature Of Prosecutor

Name Of Prosecutor (type or print)

Date