

File No. **09-08-2737**

**WARRANT FOR ARREST**

Offense  
Burning Dwelling House

**THE STATE OF NORTH CAROLINA VS.**

Name And Address Of Defendant  
William Scott Morris  
113 West Church Street  
Creedmoor, NC 27522

Race: W Sex: M Date Of Birth: 05/21/1974 Age: 35  
Social Security No. Drivers License No. & State  
Name Of Defendant's Employer

Offense Code(s): **2026** Offense In Violation Of G.S.: 14-65

Date Of Offense: 09/04/2008  
Date Of Arrest & Check Digit No. (As Shown On Fingerprint Card): 11-17-09 MM71902  
Complainant (Name, Address Or Department):  
SA Brian Fleming  
State Bureau of Investigation  
16 East Rowan Street, Suite 500  
Raleigh, NC

Names & Addresses Of Witnesses (Including Counties & Telephone Nos.):  
Det. Bryant Strother  
Granville County Sheriff's Department

Misdemeanor Offense Which Requires Fingerprinting Per Fingerprint Plan  
Date Issued: 11/17/2009

AOC-CR-100, Rev. 3/09 (Structured Sentencing)  
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Law Enforcement Case No.

LID No.

SID No.

FBI No.

**STATE OF NORTH CAROLINA**

Granville

County

In The General Court Of Justice  
District Court Division

To any officer with authority and jurisdiction to execute a warrant for arrest for the offense(s) charged below:

I, the undersigned, find that 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, willfully and feloniously did for fraudulent purpose set fire to a dwelling house occupied by the defendant; to wit: 3220 Tump Wilkins Road, Stern, North Carolina 27581

This act(s) was in violation of the law(s) referred to in this Warrant. This Warrant is issued upon information furnished under oath by the complainant listed. You are DIRECTED to arrest the defendant and bring the defendant before a judicial official without unnecessary delay to answer the charge(s) above.

Signature: *Robert A. Hubbard*  
 Magistrate  Deputy CSC  
 Assistant CSC  Clerk Of Superior Court

Location Of Court: Oxford, NC 27565

Court Date: 12-02-2009  
Court Time: 9:30 AM  AM  PM

Superior Court Judge

If this Warrant For Arrest is not served within one hundred and eighty (180) days, it must be returned to the Clerk of Court in the county in which it was issued with the reason for the failure of service noted thereon. The officer must state all steps taken by the department in attempting to execute the Warrant and any information obtained about the whereabouts of the defendant.

**RETURN OF SERVICE**

I certify that this Warrant was received and served as follows:

Date Received	Date Served	Time Served	AM	PM	Date Returned
11-17-09	11-17-09	8:40	<input checked="" type="checkbox"/>	<input type="checkbox"/>	11-17-09

By arresting the defendant and bringing the defendant before:  
Name Of Judicial Official: CE Sheriff - M. Napolitano

This Warrant WAS NOT served for the following reason:

Signature Of Officer Making Return: Bryant M. Strathairn Name Of Officer (Type Or Print): Bryant M. Strathairn  
 Department Or Agency Of Officer: Gwinnett & DeKalb Dept

**REDELIVERY/REISSUANCE**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Dep. CSC   
 Assst. CSC   
 CSC

**RETURN FOLLOWING REDELIVERY/REISSUANCE**

I certify that this Warrant was received and served as follows:

Date Received	Date Served	Time Served	AM	PM	Date Returned
			<input type="checkbox"/>	<input type="checkbox"/>	

By arresting the defendant and bringing the defendant before:  
Name Of Judicial Official: \_\_\_\_\_

This Warrant WAS NOT served for the following reason:

Signature Of Officer Making Return: \_\_\_\_\_ Name Of Officer (Type Or Print): \_\_\_\_\_  
 Department Or Agency Of Officer: \_\_\_\_\_

**APPEAL ENTRIES**

The defendant, in open court, gives notice of appeal to the Superior Court.  
 The current pretrial release order is modified as follows:

**WAIVER OF PROBABLE CAUSE HEARING**

The undersigned defendant, with the consent of his/her attorney, waives the right to a probable cause hearing.

Date: \_\_\_\_\_ Signature Of District Court Judge: \_\_\_\_\_  
 Signature Of Defendant: \_\_\_\_\_  
 Signature Of Attorney: \_\_\_\_\_

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District Attorney: \_\_\_\_\_ Attorney For Defendant: \_\_\_\_\_

Waived  Not Waived  Appointed  Retained

**PLEA:**  guilty  no contest  guilty  no contest  guilty  no contest  guilty  no contest

**VERDICT:**  guilty  guilty  guilty  guilty  not guilty  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:  pay costs and a fine of \$ \_\_\_\_\_  be imprisoned for a term of \_\_\_\_\_ days in the custody of \_\_\_\_\_  DOC.\* Pretrial credit \_\_\_\_\_ days served.

Work release  Is recommended.  Is not recommended.  The Court finds that a \_\_\_\_\_ longer \_\_\_\_\_ shorter period of probation, than that which is specified in G.A. 15A-1343.2(d) is necessary. 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.

**FINES AND FEES**

Amount	Restitution*	Attorney's Fee	Community Service Fee	Other
\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

\*Name(s), address(es), amount(s) & social security number(s) of aggrieved party(ies) to receive restitution.

6. complete \_\_\_\_\_ hours of community service during the first \_\_\_\_\_ days of probation, as directed by the community service coordinator, and pay the fee prescribed by G.S. 143B-262.4(b) within \_\_\_\_\_ days.

7. not be found in or on the premises of the complainant or \_\_\_\_\_

8. not assault, communicate with or be in the presence of the complainant or \_\_\_\_\_

9. provide a DNA sample pursuant to G.S. 15A-266.4. (AOC-CR-319)

10. Other: \_\_\_\_\_

It is ORDERED that this:  Judgment is continued upon payment of costs.  case be consolidated for judgment with \_\_\_\_\_

sentence is to run at the expiration of the sentence in \_\_\_\_\_

**COMMENT:** It is ORDERED that the Clerk deliver two 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.

**PROBABLE CAUSE:**  Probable cause is found as to all Counts except \_\_\_\_\_, and the defendant is bound over to Superior Court for action by the grand jury.  No probable cause is found as to Count(s) \_\_\_\_\_ of this Warrant, and the Count(s) is dismissed.

**CERTIFICATION**

I certify that this Judgment is a true and complete copy of the original which is on file in this case.

Date: \_\_\_\_\_ Name Of District Court Judge (Type Or Print): \_\_\_\_\_ Signature Of District Court Judge: \_\_\_\_\_  
 Date Delivered To Sheriff: \_\_\_\_\_ Signature: \_\_\_\_\_

**NOTE:** If DW, use AOC-CR-342 (active) or AOC-CR-310 (probation). If active sentence to DOC, use AOC-CR-602. If supervised probation, use AOC-CR-604.

Deputy CSC  CSC  CSC

File No. **09-06-2736**  
**WARRANT FOR ARREST**

Offense  
 First Degree Murder

**THE STATE OF NORTH CAROLINA VS.**

Name And Address Of Defendant  
 William Scott Morris  
 113 West Church Street  
 Creedmoor, NC 27522

Race	Sex	Date Of Birth	Age
W	M	05/21/1974	35
Social Security No.	Drivers License No. & State		

Name Of Defendant's Employer

Offense Code(s) **0935**      Offense in Violation Of G.S. **14-17**

Date Of Offense **09/03/2008**

Date Of Arrest & Check Digit No. (As Shown On Fingerprint Card) **1-12-09 MM2190R**

Complainant (Name, Address Of Department)  
 SA Brian Fleming  
 State Bureau of Investigation  
 16 East Rowan Street, Suite 500  
 Raleigh, NC

Names & Addresses Of Witnesses (Including Counties & Telephone Nos.)  
 Det. Bryant Strother  
 Granville County Sheriff's Department

Misdemeanor Offense Which Requires Fingerprinting Per Fingerprint Plan      Date Issued **11/17/2009**

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Law Enforcement Case No.      LD No.      SID No.      FBI No.

**STATE OF NORTH CAROLINA**  
 Granville County      In The General Court Of Justice  
 District Court Division

To any officer with authority and jurisdiction to execute a warrant for arrest for the offense(s) charged below:  
 I, the undersigned, find that 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, willfully and feloniously did of malice and aforethought did kill and murder Kelly Currin Morris

This act(s) was in violation of the law(s) referred to in this Warrant. This Warrant is issued upon information furnished under oath by the complainant listed. You are DIRECTED to arrest the defendant and bring the defendant before a judicial official without unnecessary delay to answer the charge(s) above.

Signature **Ms. Betty A. Hester**  
 Magistrate       Deputy CSC       Clerk Of Superior Court  
 Assistant CSC       Clerk Of Superior Court

Location Of Court **Oxford, NC 27565**  
 Court Date **12-02-2009**  
 Court Time **9:30** AM  PM

**Superior Court Judge**



<b>STATE OF NORTH CAROLINA</b>		File No. <b>09-CR-2736</b>	
Granville County		In The General Court Of Justice <input checked="" type="checkbox"/> District <input type="checkbox"/> Superior Court Division	
<b>STATE VERSUS</b>		<b>CONDITIONS OF RELEASE AND RELEASE ORDER</b>	
Name And Address Of Defendant William Scott Morris 113 West Church Street Creedmoor, N C 27522			
Amount Of Bond \$			
G S Chapter 15A, Art. 25, 26			
Offenses And Additional File Numbers First Degree Murder Burning Dwelling House			
Location Of Court Oxford, N.C.	<input checked="" type="checkbox"/> District <input type="checkbox"/> Superior	Date 12-02-2009	Time 9:30 <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM
<p>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.</p> <p>The defendant has been advised of charge(s) against him/her and his/her right to communicate with counsel, family and friends.</p> <p><input type="checkbox"/> Your release is authorized upon execution of your:</p> <p style="margin-left: 20px;"><input type="checkbox"/> WRITTEN PROMISE to appear <span style="margin-left: 200px;"><input type="checkbox"/> UNSECURED BOND in the amount shown above</span>  <input type="checkbox"/> CUSTODY RELEASE <span style="margin-left: 150px;"><input type="checkbox"/> SECURED BOND in the amount shown above</span></p> <p>You will be arrested if you violate the following restrictions:</p> <p><input checked="" type="checkbox"/> Your release is not authorized</p> <p><input type="checkbox"/> The defendant was arrested or surrendered after failing to appear as required under a prior release order</p> <p><input type="checkbox"/> This was the defendant's second or subsequent failure to appear in this case</p> <p><input type="checkbox"/> Your release is not authorized until you complete the period of detention required under G.S. 15A-534.2 ("Detention of impaired drivers.") or G.S. 15A-534.3 ("Detention for communicable diseases.") as shown on the attached AOC-CR-270.</p>			
Additional Information			
Date 11-17-2009	Signature Of Judicial Official <i>C. F. Knott</i>		
<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"/> District Court Judge <input type="checkbox"/> Superior Court Judge			
<b>ORDER OF COMMITMENT</b>			
<p>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:</p> <p><input type="checkbox"/> produce him/her in Court as provided above. <input checked="" type="checkbox"/> hold him/her for the following purpose: Bond, Court, and/or 96 Hour Hearing</p> <p><input type="checkbox"/> [Check in all domestic violence cases covered by G.S. 15A-534.1(b)] 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) _____  <input type="checkbox"/> AM <input type="checkbox"/> PM produce him/her before a magistrate of this county at that time to determine conditions of pretrial release.</p>			
Name Of Detention Facility Granville Co. Detention Center	Date 11-17-2009	Signature Of Judicial Official <i>C. F. Knott</i>	
<b>WRITTEN PROMISE TO APPEAR OR CUSTODY RELEASE</b>			
<p>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.</p>			
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	
<b>DEFENDANT RELEASED ON BAIL</b>			
Date	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Signature Of Jailer	

**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

**DEFENDANT RELEASED FOR COURT APPEARANCE**

Date	Time	Signature Of Jailer

**NOTE TO CUSTODIAN:** *This form shall accompany the defendant to court for all appearances*

# SBI FINAL DISPOSITION REPORT

WHEN COMPLETED SUBMIT TO:

NORTH CAROLINA STATE BUREAU OF INVESTIGATION (SBI)  
 320 GARNER ROAD  
 PO BOX 26500  
 RALEIGH, N.C. 27626-0500

00-020-00  
 11-15-02

590000001728

ATTN: CRIMINAL INFORMATION AND IDENTIFICATION SECTION

CKN Number: IM7190R

**TO BE COMPLETED BY ARRESTING AGENCY**

SID NO. \_\_\_\_\_ FBI NO. \_\_\_\_\_

NAME ON FINGERPRINT CARD SUBMITTED TO SBI:  
 MORRIS, WILLIAM SCOTT

LAST FIRST MIDDLE  
 RACE DATE OF BIRTH  
 W. 05/21/1974  
 SEX SOCIAL SECURITY NO.  
 M \_\_\_\_\_  
 ARREST NO. (OCA) \_\_\_\_\_ ARREST DATE: 11/17/2009

OFFENSES CHARGED AT ARREST:  
 FIRST DEGREE MURDER  
 FRAUDULENTLY BURNING DWELLING

CONTRIBUTOR OF FINGERPRINTS (include Address & ORI No.):  
 NC0390000  
 GRANVILLE CO S.O.  
 OXFORD, NC 27565

COURT ORDERED EXPUNGEMENT  
 (Copy of Certified Court Order Must Be Attached and Submitted by Arresting Agency)

SIGNATURE: *William M. Stalker*  
 TITLE: *Detective*  
 DATE: 11-17-09

**TO BE COMPLETED BY CLERK'S OFFICE**

COURT LEVEL:  DISTRICT  SUPERIOR  
 COURT DOCKET NUMBER \_\_\_\_\_ COURT DISPOSITION DATE \_\_\_\_\_

DISMISSED  DISMISSED WITH LEAV  
 CHARGE CONVICTED OF: \_\_\_\_\_

CONSOLIDATED FOR JUDGMENT WITH CASE NO. \_\_\_\_\_  
 (Note: If this block is checked, a copy of the final disposition reflecting the original judgement must be attached.)

PLEA:  VERDICT:   
 MISDEMEANOR  FELONY

SPLIT SENTENCE:  Yes  No

JUDGEMENT:

	Days	Months	Years
Active Sentence	_____	_____	_____
Probation	_____	_____	_____
Suspended	_____	_____	_____

FINE: \_\_\_\_\_ COST: \_\_\_\_\_

RESTITUTION: \_\_\_\_\_ ATTORNEY FEE: \_\_\_\_\_

CASE APPEALED FROM DISTRICT COURT  
 CASE APPEALED TO APPELLATE DIVISION  
 (Submit copy of this form and retain original until final judgement after Appellate decision.)

ADDITIONAL INFORMATION:

DATE: \_\_\_\_\_ COUNTY: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_  
 Deputy CSC  Assistant CSC  Clerk of Superior Court

If additional space is needed, check  and continue on reverse side of form.