r									
STATE OF NORTH CAROLINA				File No.					
		County		In The General Court Of Justice District Court Division					
	IN THE MA	ATTER OF							
Name And Address	Of Juvenile			JUVENILE PETITION RESIST, DELAY AND OBSTRUCT AN OFFICER (DELINQUENT)					
Juvenile's Date Of E	Birth Age	Race	Sex						
Nama Of Camalaia				G.S. 7B-1501(7), -1801, -1802					
Name Of Complaina	ant			Category Of Offense					
				Misdemeanor, Class 2					
Offense Code	Offense In Violation Of	G.S. Physical Addi	ress Of Offense, If App	icable Date Of Offense Time Of Offense AM					

I have sufficient knowledge or information to believe that a case has arisen that invokes the juvenile jurisdiction of the court, and therefore allege that:

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_, by

1. The juvenile named above committed a delinguent act in this district while under the age of eighteen (18).

2. The names, addresses, and telephone numbers of the juvenile's parents, guardian, or custodian are as follows:

Name	Relationship/Title	Address	Telephone No.	

3. The juvenile is a delinquent juvenile as defined by G.S. 7B-1501(7) in that on or about the date of offense shown above and in the county named above, the juvenile did unlawfully and willfully resist, delay and obstruct

_____, a public officer

(name officer)

5310

holding the office of *(name office)*

(describe conduct)

At the time, the officer was discharging and attempting to discharge a duty of his/her office (name duty)

This offense is in violation of G.S. 14-223.

14-223

I request the Court to hear the case to determine whether the allegations are true and whether the juvenile is within the jurisdiction of the Court as a delinquent juvenile.

			VERIFI	CATION					
Being first duly sworn, I say that I have read the allegations in the petition and that the same are true to my own knowledge, except as to those matters alleged upon information and belief, and as to those, I believe them to be true.									
SWORN/AFFIR	Signature Of Complainant								
Date Signature Of Person Authorized To Administer Oaths				Title Or Relationship To Juvenile					
Deputy CSC Assistant CSC Clerk Of Superior Court				Agency (if applicable)				Telephone No.	
Notary	Notary Date My Commission Expires				Address				
SEAL	County Where Notarized		City, State, Zip						
			WITNE	SS(ES)					
	Name				Add	lress		Telephone No.	
Date Complaint Receive	ed By Division Of Juvenile Justice Of Th	e Department	Of Public S	afety					
	15-DAY	' EXTENS	ION OF	TIME TO FIL	E PE	TITION			
Pursuant to G.S. 7 is extended 15 da	7B-1703, at the discretion of the ys.	e undersign	ed chief	court counselo	r, the ti	me to file a pet	ition in the abo	ove captioned case	
Date Name Of Chief Court Counselor				Signature Of Chie	ef Court C	Counselor			
	DECISION OF COURT C	OUNSEL	OR REG	GARDING TH	HE FII	LING OF TH	E PETITION		
1. Approved fo	r Filing			Date			Time	AM PM	
2. Not Approved for Filing a. Closed				Name Of Court Counselor Giving Telephonic Approval					
b. Diverted and Retained				Name And Title Of Person Receiving Telephonic Approval					
Date Signature Of Court Counselor				Signature Of Person Receiving Telephonic Approval					
			n Approv	al For Filing C					
Approved for Filing Date				Signature Of Cour	rt Counse	elor			
	REVIEW BY PROSEC	CUTOR O	F DECI	SION NOT T	Ο ΑΡ	PROVE FOR	FILING		
The undersigned prosecutor conducted a review pursuant to G.S. 7B-1704 and 7B-1705 of the court counselor's determination not to approve the complaint for filing and hereby authorizes does not authorize the complaint to be approved for filing.									
Date Of Review	Date Petition Filed (if applicable) Name	e Of Prosecuto	or (type or p	rint)		Signature Of Pro	secutor		