


File No. 26CR304067-910	Law Enforcement Case No. 26-000559	LID No.
WARRANT FOR ARREST		
THE STATE OF NORTH CAROLINA VS.		
Name And Address Of Defendant MICHELLE LYNN FRYMAN 1684 JAMES WINSTON RD OXFORD NC 27565-7869 (919) 939-0722		STATE OF NORTH CAROLINA In The General Court Of Justice District Court Division WAKE County
Spoken Language Court Interpreter Needed For Any Party, Victim, Or Witness? (If Yes, identify person(s) and language(s). Interpreters provided for all court proceedings at no cost.) <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes: (explain)		

				OFFENSE(S) (see AOC-CR-100 Continuation(s) for charging text)				
		Count No.	Offense	Offense in Violation Of G.S.			Offense Code	
Race W	Sex F	Date Of Birth 03/05/1972	Age 54	1	F - EMBEZZLEMENT		14-90	2718
Name Of Defendant's Employer								
Date Of Offense 02/02/2024 through 12/16/2025								
<input type="checkbox"/> Misdemeanor Offense Which Requires Fingerprinting Per Fingerprint Plan								
Date Of Arrest & Check Digit No. (as shown on fingerprint card)								
Complainant Name (and address, if Complainant is an officer) J Harris WAKE FOREST POLICE DEPARTMENT 225 S. Taylor St. WAKE FOREST NC 27587 WAKE								

Witness Information

TO ANY OFFICER WITH AUTHORITY AND JURISDICTION TO EXECUTE A WARRANT FOR ARREST FOR THE OFFENSE(S) CHARGED IN THIS WARRANT:
 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 commit the offense(s) set forth above and on the attached AOC-CR-100 Continuation(s), which is (are) incorporated by reference. This act(s) was in violation of the law referred to in this Warrant For Arrest. This Warrant For Arrest 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.

Date Issued 05/11/2026	Name Of Issuing Official Graves	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"/> District Court Judge <input type="checkbox"/> Superior Court Judge
Location Of Court		Court Date	Court Time

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	Name Of Attorney	Signature Of Attorney

STATE VERSUS	<u>WAKE</u> County	File No. 26CR304067-910
Name Of Defendant MICHELLE LYNN FRYMAN	NOTE: Use this page to set forth the charging text for each offense listed on the AOC-CR-100. G.S. 15A-924(a)(5).	
Date Of Issuance Of Warrant For Arrest 05/11/2026		

OFFENSES (continued)
Count 1. Offense: F - EMBEZZLEMENT

Charging Text For This Count

On or about the date of offense shown and in the county named above the defendant unlawfully, willfully, and feloniously did embezzle \$6,552.05 , belonging to THE WAKE FOREST FARMER'S MARKET . At the time the defendant was over 16 years of age and was the employee of THE WAKE FOREST FARMER'S MARKET and in that capacity had been entrusted to receive the property described above and in that capacity the defendant did receive and take into her care and possession that property.

Count 2. Offense:

Charging Text For This Count

STATE VERSUS

WAKE County

File No.

26CR304067-910

Name Of Defendant

MICHELLE LYNN FRYMAN

Date Of Issuance Of Warrant For Arrest

05/11/2026

NOTE: Use this page to set forth the charging text for each offense listed on the AOC-CR-100. G.S. 15A-924(a)(5).

OFFENSES (continued)

Count 3. Offense:

Charging Text For This Count

Count 4. Offense:

Charging Text For This Count

STATE VERSUS

WAKE County

File No.

26CR304067-910

Name Of Defendant

MICHELLE LYNN FRYMAN

Date Of Issuance Of Warrant For Arrest

05/11/2026

NOTE: Use this page to set forth the charging text for each offense listed on the AOC-CR-100. G.S. 15A-924(a)(5).

OFFENSES (continued)

Count 5. Offense:

Charging Text For This Count

Count 6. Offense:

Charging Text For This Count

STATE VERSUS

WAKE County

File No.

26CR304067-910

Name Of Defendant

MICHELLE LYNN FRYMAN

Date Of Issuance Of Warrant For Arrest

05/11/2026

NOTE: Use this page to set forth the charging text for each offense listed on the AOC-CR-100. G.S. 15A-924(a)(5).

OFFENSES (continued)

Count 7. Offense:

Charging Text For This Count

Count 8. Offense:

Charging Text For This Count

STATE VERSUS

WAKE County

File No.

26CR304067-910

Name Of Defendant

MICHELLE LYNN FRYMAN

Date Of Issuance Of Warrant For Arrest

05/11/2026

NOTE: Use this page to set forth the charging text for each offense listed on the AOC-CR-100. G.S. 15A-924(a)(5).

OFFENSES (continued)

Count 9. Offense:

Charging Text For This Count

Count 10. Offense:

Charging Text For This Count

STATE VERSUS	_____ WAKE _____ County	File No.	26CR304067-910
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Name Of Defendant
MICHELLE LYNN FRYMAN

Date Of Issuance Of Warrant For Arrest
 05/11/2026

If the 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.

RETURN OF SERVICE

I certify that the Warrant For Arrest issued in this case on the date noted above for the defendant named above, was received and served as follows:

<i>Date Received</i>	<i>Date Served</i>	<i>Time Served</i>	<i>Date Returned</i>
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By arresting the defendant and bringing the defendant before:

Name Of Judicial Official

The Warrant WAS NOT served for the following reason:

<i>Signature Of Officer Making Return</i>	<i>Name Of Officer (type or print)</i>
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Department Or Agency Of Officer

REDELIVERY/REISSUANCE

<i>Date</i>	<i>Name Of Clerk (type or print)</i>	<i>Signature Of Clerk</i>	<input type="checkbox"/> <i>Deputy CSC</i> <input type="checkbox"/> <i>Assistant CSC</i> <input type="checkbox"/> <i>Clerk Of Superior Court</i>
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RETURN FOLLOWING REDELIVERY/REISSUANCE

I certify that the Warrant For Arrest issued in this case on the date noted above for the defendant named above, was received and served as follows:

<i>Date Received</i>	<i>Date Served</i>	<i>Time Served</i>	<i>Date Returned</i>
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By arresting the defendant and bringing the defendant before:

Name Of Judicial Official

The Warrant WAS NOT served for the following reason:

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Department Or Agency Of Officer

Name Of Defendant MICHELLE LYNN FRYMAN	NOTE: Use this Judgment page only if imposing a single , consolidated judgment for all offenses of conviction charged under this file number. Do not use this Judgment page to impose sentence: (i) if imposing separate judgments for separate offenses of conviction charged under this file number; (ii) to impose supervised probation; or (iii) for DWI sentences under G.S. 20-179. For DWI, use AOC-CR-342 (active) or AOC-CR-310 (probation). For structured sentencing offenses, use AOC-CR-602 (active) or AOC-CR-604 (probation). For offenses committed on or after Dec. 1, 2025 , when multiple sentences of imprisonment are imposed or where the defendant is already subject to a term of imprisonment, the court must make a finding on the record stating the reasoning for concurrent or consecutive sentencing. G.S. 15A-1354(a).
Date Of Issuance Of Warrant For Arrest 05/11/2026	

JUDGMENT	
District Attorney <input type="checkbox"/> Def. Waived Attorney <input type="checkbox"/> Def. Found Not Indigent <input type="checkbox"/> Def. Denied Appointed Counsel	Attorney For Defendant <input type="checkbox"/> Appointed <input type="checkbox"/> Retained
PRIOR CONVICTIONS: No./Level: 0 <input type="checkbox"/> I (0) <input type="checkbox"/> II (1-4) <input type="checkbox"/> III (5+)	

OFFENSES: The following offenses, which are set forth by Count No. in the Warrant For Arrest issued in this case on the date noted above for the defendant named above, are the subject of this Judgment:

- | | | | |
|----------|---|--|---|
| Count 1 | PLEA: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty <input type="checkbox"/> no contest _____ | VERDICT: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty _____ | M.CL.: <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 |
| Count 2 | PLEA: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty <input type="checkbox"/> no contest _____ | VERDICT: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty _____ | M.CL.: <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 |
| Count 3 | PLEA: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty <input type="checkbox"/> no contest _____ | VERDICT: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty _____ | M.CL.: <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 |
| Count 4 | PLEA: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty <input type="checkbox"/> no contest _____ | VERDICT: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty _____ | M.CL.: <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 |
| Count 5 | PLEA: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty <input type="checkbox"/> no contest _____ | VERDICT: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty _____ | M.CL.: <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 |
| Count 6 | PLEA: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty <input type="checkbox"/> no contest _____ | VERDICT: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty _____ | M.CL.: <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 |
| Count 7 | PLEA: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty <input type="checkbox"/> no contest _____ | VERDICT: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty _____ | M.CL.: <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 |
| Count 8 | PLEA: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty <input type="checkbox"/> no contest _____ | VERDICT: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty _____ | M.CL.: <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 |
| Count 9 | PLEA: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty <input type="checkbox"/> no contest _____ | VERDICT: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty _____ | M.CL.: <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 |
| Count 10 | PLEA: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty <input type="checkbox"/> no contest _____ | VERDICT: <input type="checkbox"/> guilty <input type="checkbox"/> not guilty _____ | M.CL.: <input type="checkbox"/> A1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 |

(Over)

STATE VERSUS	<u>WAKE</u> County	File No. 26CR304067-910
Name Of Defendant MICHELLE LYNN FRYMAN	*NOTE: Use this Judgment page only if imposing a single , consolidated judgment for all offenses of conviction charged under this file number. Do not use this Judgment page to impose sentence: (i) if imposing separate judgments for separate offenses of conviction charged under this file number; (ii) to impose supervised probation; or (iii) for DWI sentences under G.S. 20-179. For DWI, use AOC-CR-342 (active) or AOC-CR-310 (probation). For structured sentencing offenses, use AOC-CR-602 (active) or AOC-CR-604 (probation). For offenses committed on or after Dec. 1, 2025 , when multiple sentences of imprisonment are imposed or where the defendant is already subject to a term of imprisonment, the court must make a finding on the record stating the reasoning for concurrent or consecutive sentencing. G.S. 15A-1354(a).	

JUDGMENT (continued)

JUDGMENT: The defendant appeared in open court and freely, voluntarily and understandingly entered the plea(s) on Side One. On the verdict(s) from Side One, it is **ORDERED** that all offenses of conviction, if more than one, be consolidated for judgment with Count No. _____ (list count of lead offense) and that the defendant:

- pay the following fine/penalty and costs:
- | Amount Of Fine/Penalty | Costs |
|------------------------|----------|
| \$ _____ | \$ _____ |
- be imprisoned for a term of _____ days in custody of the sheriff. MCP. Other:* _____ Pretrial credit _____ days served.
- Work release is recommended. is not recommended. (**NOTE:** To order work release, use form AOC-CR-602 to impose judgment.)
- The Court finds that a longer shorter period of probation than that which is specified in G.S. 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:
- commit no criminal offense in any jurisdiction.
 - possess no firearm, explosive or other deadly weapon listed in G.S. 14-269.
 - 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.
 - satisfy child support and family obligations, as required by the Court.
 - Submit to the taking of digitized photographs, including photographs of the defendant's face, scars, marks, and tattoos, to be included in the defendant's records.
 - pay to the Clerk the costs of court and any additional sums shown below.

Costs	Fine	Restitution**	Attorney's Fee	Community Service Fee	Other	Total Amount Due
\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

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).")

7. 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-1483 within _____ days.
8. not be found in or on the premises of the complainant or _____.
9. not assault, communicate with or be in the presence of the complainant or _____.
10. provide a DNA sample pursuant to G.S. 15A-266.4. (AOC-CR-319 required)
11. Other: _____
- _____
- _____

The Court finds just cause to waive costs as ordered on attached AOC-CR-415. AOC-CR-618. 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 _____.

COMMITMENT: 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.

Date	Name Of District Court Judge Or Magistrate (type or print)	Signature Of District Court Judge Or Magistrate
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APPEAL ENTRIES

The defendant, in open court, gives notice of appeal to the District Superior Court.

The current pretrial release order is modified as follows: _____

Date	Name Of District Court Judge Or Magistrate (type or print)	Signature Of District Court Judge Or Magistrate
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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"/> Clerk Of Superior Court
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