

File No. 21CR 053635		Law Enforcement Case No.	LID No.	SID No. NC1218506A	FBI No. 668606PC1
WARRANT FOR ARREST		STATE OF NORTH CAROLINA			
Offense I F-CONCEAL/FAIL REPORT DEATH II F-CONCEAL/FAIL REPORT DEATH		In The General Court Of Justice District Court Division			
THE STATE OF NORTH CAROLINA VS.		RUTHERFORD County			
Name And Address Of Defendant MATTHEW THOMAS COOLEY [REDACTED] RUTHERFORDTON NC 28139 RUTHERFORD [REDACTED]		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 DISMEMBER OR DESTROY HUMAN REMAINS, BY ANY MEANS, TO WIT: REMOVING BODY PARTS OF TRACY MCKINNEY.			
Race W	Sex M	Date Of Birth 02/13/1987	Age	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 FAIL TO NOTIFY THE RUTHERFORD COUNTY SHERIFF'S DEPARTMENT, OR OTHER LAW ENFORCEMENT AGENCY OF THE DEATH OF TRACY MCKINNEY.	
Social Security No./Tax ID No. [REDACTED]		Drivers License No. & State [REDACTED]			
Name Of Defendant's Employer					
Offense Code(s) I 0956 II 0956		Offense in Violation Of G.S. I 14-401.22(A) II 14-401.22(A)			
Date Of Offense 12/15/2021 through 12/27/2021					
Date Of Arrest & Check Digit No. (As Shown On Fingerprint Card) 2021-12-28 [REDACTED]					
Complainant (Name, Address Or Department) JIMMY RAY UPTON JR. RUTHERFORD COUNTY SHERIFFS OFFICE [REDACTED] RUTHERFORDTON NC 28139 RUTHERFORD [REDACTED]		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.			
Names & Addresses Of Witnesses (including Counties & Telephone Nos.)					
Signature D B GARDNER		Location Of Court		Court Date	
<input checked="" type="checkbox"/> Misdemeanor Offense Which Requires Fingerprinting Per Fingerprint Plan		Date Issued 12/27/2021		<input checked="" type="checkbox"/> Magistrate <input type="checkbox"/> Deputy CSC <input type="checkbox"/> Assistant CSC <input type="checkbox"/> Clerk Of Superior Court	
				Court Time <input type="checkbox"/> AM <input type="checkbox"/> PM	
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