

File No. 26CR288279-280	Law Enforcement Case No. 26S001389	LID No.
DAVIDSON COUNTY SHERIFFS OFFICE		
MAGISTRATE'S ORDER		
THE STATE OF NORTH CAROLINA VS.		
STATE OF NORTH CAROLINA		
Name And Address Of Defendant Angelina Han Hicks [REDACTED]		In The General Court Of Justice District Court Division
Lexington NC 27292 DAVIDSON COUNTY		DAVIDSON 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-116 Continuation(s) for charging text)											
Count No.	Offense	Offense in Violation Of G.S.	Offense Code								
1	F - FELONY CONSPIRACY	14-2.4(A)	9918								
2	F - FELONY CONSPIRACY	14-2.4(A)	9918								
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">Race</td> <td style="width:10%;">Sex</td> <td style="width:15%;">Date Of Birth</td> <td style="width:10%;">Age</td> </tr> <tr> <td style="text-align:center;">A</td> <td style="text-align:center;">F</td> <td>[REDACTED]</td> <td style="text-align:center;">18</td> </tr> </table>				Race	Sex	Date Of Birth	Age	A	F	[REDACTED]	18
Race	Sex	Date Of Birth	Age								
A	F	[REDACTED]	18								
Name Of Defendant's Employer											
Date Of Offense 04/21/2026											
<input type="checkbox"/> Misdemeanor Offense Which Requires Fingerprinting Per Fingerprint Plan											
Date Of Arrest & Check Digit No. (as shown on fingerprint card) 04/22/2026 NO PRNT LEA											
Arresting Officer (name, address or department) H Hall DAVIDSON COUNTY SHERIFFS OFFICE PO BOX 513 LEXINGTON NC 27293 DAVIDSON											

Witness Information

I, the undersigned, find that the defendant named above has been arrested without a warrant and the defendant's detention is justified because 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-116 Continuation(s), which is (are) incorporated by reference. This act(s) was in violation of the law referred to in this Magistrate's Order. This Magistrate's Order is issued upon information furnished under oath by the arresting officer(s) shown. A copy of this Order has been delivered to the defendant.

Date Issued 04/22/2026	Name Of Issuing Official Bruce A. Mcpherson	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
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Location Of Court Davidson Co. Courthouse, Courtroom 1	Court Date 04/23/2026	Court Time 8:45 AM
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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>DAVIDSON</u> County	File No. 26CR288279-280
Name Of Defendant Angelina Han Hicks	NOTE: Use this page to set forth the charging text for each offense listed on the AOC-CR-116. G.S. 15A-924(a)(5).	
Date Of Issuance Of Magistrate's Order 04/22/2026		

OFFENSES (continued)

Count 1. Offense: F - FELONY CONSPIRACY

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 conspire with Male subjects referred to as Teegan, Unknown Last Name and Angel, Unknown Last Name to commit the felony of North Carolina General Statute 14-17 (Murder) and Texas Penal Code Chapter 19 (Criminal Homicide) against Members of the Congregation of Beth Israel Synagogue on April 21, 2028 .

Count 2. Offense: F - FELONY CONSPIRACY

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 conspire with Male subjects referred to as Teegan (unknown last name) and Angel (unknown last name) to commit the felony of North Carolina General Statue 14-32 (Assault with a Deadly Weapon With Intent to Kill Inflicting Serious Injury) and Texas Penal Code 22.02 Aggravated Assault against The Members of the Congregation Beth Israel Synagogue on April 21, 2028 .

STATE VERSUS

DAVIDSON County

File No.

26CR288279-280

Name Of Defendant
Angelina Han Hicks

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 Magistrate's Order
04/22/2026

JUDGMENT

District Attorney

Def. Waived Attorney Def. Found Not Indigent
Def. Denied Appointed Counsel

Attorney For Defendant

Appointed
Retained

PRIOR CONVICTIONS:

No./Level: 0 I (0) II (1-4) III (5+)

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

- Count 1 PLEA: guilty not guilty no contest VERDICT: guilty not guilty M.CL.: A1 1 2 3
Count 2 PLEA: guilty not guilty no contest VERDICT: guilty not guilty M.CL.: A1 1 2 3
Count 3 PLEA: guilty not guilty no contest VERDICT: guilty not guilty M.CL.: A1 1 2 3
Count 4 PLEA: guilty not guilty no contest VERDICT: guilty not guilty M.CL.: A1 1 2 3
Count 5 PLEA: guilty not guilty no contest VERDICT: guilty not guilty M.CL.: A1 1 2 3
Count 6 PLEA: guilty not guilty no contest VERDICT: guilty not guilty M.CL.: A1 1 2 3
Count 7 PLEA: guilty not guilty no contest VERDICT: guilty not guilty M.CL.: A1 1 2 3
Count 8 PLEA: guilty not guilty no contest VERDICT: guilty not guilty M.CL.: A1 1 2 3
Count 9 PLEA: guilty not guilty no contest VERDICT: guilty not guilty M.CL.: A1 1 2 3
Count 10 PLEA: guilty not guilty no contest VERDICT: guilty not guilty M.CL.: A1 1 2 3

(Over)

STATE VERSUS	<u>DAVIDSON</u> County	File No. 26CR288279-280				
Name Of Defendant Angelina Han Hicks	*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 above 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:						
<input type="checkbox"/> pay the following fine/penalty and costs:						
	Amount Of Fine/Penalty \$ _____	Costs \$ _____				
<input type="checkbox"/> be imprisoned for a term of _____ days in custody of the <input type="checkbox"/> sheriff. <input type="checkbox"/> MCP. <input type="checkbox"/> DAC.* Pretrial credit _____ days served.						
<input type="checkbox"/> Work release <input type="checkbox"/> is recommended. <input type="checkbox"/> is not recommended. (NOTE: To <u>order</u> work release, use form AOC-CR-602 to impose judgment.)						
<input type="checkbox"/> The Court finds that a <input type="checkbox"/> longer <input type="checkbox"/> shorter period of probation than that which is specified in G.S. 15A-1343.2(d) is necessary.						
<input type="checkbox"/> 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. 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. 6. 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 \$ _____
<small>**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).")</small>						
<input type="checkbox"/> 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.						
<input type="checkbox"/> 8. not be found in or on the premises of the complainant or _____						
<input type="checkbox"/> 9. not assault, communicate with or be in the presence of the complainant or _____						
<input type="checkbox"/> 10. provide a DNA sample pursuant to G.S. 15A-266.4. (AOC-CR-319 required)						
<input type="checkbox"/> 11. Other: _____ _____ _____						
<input type="checkbox"/> The Court finds just cause to waive costs as ordered on attached <input type="checkbox"/> AOC-CR-415. <input type="checkbox"/> AOC-CR-618. <input type="checkbox"/> Other: _____						
It is ORDERED that this: <input type="checkbox"/> Judgment is continued upon payment of costs. <input type="checkbox"/> case be consolidated for judgment with _____. <input type="checkbox"/> sentence is to run at the expiration of the sentence in _____.						
<input type="checkbox"/> COMMITMENT: It is ORDERED that the Clerk deliver <u>two</u> 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: <input type="checkbox"/> Probable cause is found as to all Counts except _____, and the defendant is bound over to Superior Court for action by the grand jury. <input type="checkbox"/> No probable cause is found as to Count(s) _____ of this Magistrate's Order and the Count(s) is dismissed.						
Date	Name Of District Court Judge Or Magistrate (type or print)	Signature Of District Court Judge Or Magistrate				
APPEAL ENTRIES						
<input type="checkbox"/> The defendant, in open court, gives notice of appeal to the <input type="checkbox"/> District <input type="checkbox"/> Superior Court.						
<input type="checkbox"/> 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				
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