## ARREST REPORT

A .	Agency Name							ORI			Date/Time Arrested OC					OCA			
G I E N N F	Sanford Police Department							053010			09/07/2014 11:1				14006903				
CO	Taken Fingerprint Card Check Digit # (CKN)							Arrest Tract	t		Residence Tract				Arrest Number				
Y	Photos Name (Last, First, Middle)							800	D 0 D	OUT						Place of Birth Country of			
ARRESTEE	WARLICK, ASHLEY NICOLE								D.O.B.		Age Race Sex 28 W F			SAN	IFORD			Country of Citizenship	
	Current Address 401 Clausde White Rd, CAMERON, NC 28320								Phone	none			Occupation Unemployed			Resident			
	Employ	er's Nam	ne		Addres	s			•			Phone							
	Also Known As (Alias Names)								Hgt	Wgt		Ha	1 '			l II		Drug/Alcohol	
	Scars, Marks, Tattoos							Casial Cas	5'04	11	110 B		RO BRO			FAIR			
	Scars, r	viaiks, i	alloos		Social Secu	ну #		OLIV and State				wiece. If and Type							
	Nearest	Relative	e Name		Addres	SS							Phone						
A RR FO								al Summons	II	Place of Arrest									
	Charge #1							counts			3310 NC 87 HWY, SANFORD  Offense Jurisdiction (if not arresting agency) Statute #						Warr. Date		
	Larceny							Counto	0690				January (in not arresumy agente				14-72(A)		
	Charge #2						1	Counts	DCI Code	Off	Offense Jurisdiction (if not arr				agency)	Statute #		<b>09/07/2014</b> Warr. Date	
	Possessing Stolen Goods								1330							14-71.1		09/07/2014	
	Charge #3 Contribute To Deliquence Of Minor							Counts	DCI Code	Off	Offense Jurisdiction (if not arrest				agency)	Statute #		Warr. Date	
	LX.						_1		2690	14-316.1					09/07/2014				
V N E F O	VYR	IMA	ake	Model		Style		Color	Plate #/State				VIN						
	Vehicle         1. ☐ Left at Scene         ☐ Secured         ☐ Unsecure         Date/Time																		
			☐ Released to of ☐ Impounded	ther at owners  Place of		☐ Name	of Ot	ther								Inventory	on File?		
CONFINED		ne Confi	ined		Committing Magistrate														
	09/07/2014 12:20:00 LCJ Type Bond Bond Amount							Trial Date C				SANDRA JORDAN urt Of City							
	☐ Written Promise ☐ Unsecured						00				Court Of  District Court					SANFORD			
	Assisting Officer Name/ID #							<u> </u>		/ (Name/Department/ID #)							Date/Time Released		
Status	- U   V																		
Codes	odes L'-Lust 3-3titell K'- Kecovered D'- Damaged 2-3etzed B'- Burned C'- Countenent / Polyged F'- Pounto																		
D A	DCI Status Quantity Type Measure						Suspected Type					Possess Buy				eck up to 3 types of activity for each  Sale Mfg. Importing Operating			
UAR	<del>                                      </del>											_							
D R AR U G S																			
-	<del>-                                     </del>											_							
	Name: Complainant  Victim □																		
C O M P	Name:	Comp	olainant□		Address						Phone:								
N A																			
A R R																			
A T																			
Ϋ́																			
E S	Arresting Officer Signature/ID #							Date/Time Submitted				Supervisor Signature							
S T A	COX, A. T. (211)							09/07	12	II .									
Ť	Case Status: Case Disposition:  ☐ Further Inv.							Arrestee Signature											
š	☐ Inactive ☐ Closed ☐ Arrest / No Investigation																		
	DCI co	~=																D 0/0	

DCI-608F Rev. 3/92