

## ARREST REPORT

A G E N C Y	Agency Name <b>BURKE COUNTY SHERIFF'S OFFICE</b>			ORI <b>0120000</b>		Date/Time Arrested <b>08/01/2014 16:06</b>		OCA <b>201403097</b>																
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos		Fingerprint Card Check Digit # (CKN)		Arrest Tract <b>F</b>		Residence Tract <b>J</b>		Arrest Number <b>106090</b>															
A R R E S T E E	Name (Last, First, Middle) <b>LANE, MICHAEL RAY</b>				D.O.B. <b>07/31/1978</b>		Age <b>36</b>		Race <b>W</b>		Sex <b>M</b>		Place of Birth <b>BURKE CO., NC, NC</b>		Country of Citizenship <b>US</b>									
	Current Address <b>5366 Laurel Haven Av, MORGANTON, NC 28655</b>				Phone <b>828-391-1261</b>			Occupation <b>Unemployed</b>			<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident		<input type="checkbox"/> Unknown											
	Employer's Name <b>CASE FARMS</b>				Address <b>MORGANTON</b>						Phone <b>828-391-1261</b>													
	Also Known As (Alias Names) <b>LANE, MICHAEL R; LANE, MICKEY; LANE, MICHAEL</b>				Hgt <b>5'07</b>		Wgt <b>168</b>		Hair <b>BRO</b>		Eyes <b>BRO</b>		Skin Tone <b>MED</b>		Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk									
	Scars, Marks, Tattoos <b>TATT RGT LEG / DAGGER; TATT RGT</b>				Social Security #			OLN and State			Misc. # and Type													
	Nearest Relative Name <b>MCLELLAN,DEBBIE</b>				Address <b>5366 LAURAL HAVEN AVE, MORGANTON,</b>						Phone <b>828-430-0201</b>													
A R R E S T	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</b>			<input type="checkbox"/> On-View <input checked="" type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input type="checkbox"/> Warrant			Place of Arrest <b>201 S GREEN ST, MORGANTON</b>																	
	Charge #1 <b>Fail To Return Rental Property</b>			<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd		Counts <b>1</b>		DCI Code <b>1190</b>		Offense Jurisdiction (if not arresting agency)		Statute # <b>14-167</b>		Warr. Date <b>04/24/2014</b>										
	Charge #2			<input type="checkbox"/> Fel <input type="checkbox"/> Misd		Counts		DCI Code		Offense Jurisdiction (if not arresting agency)		Statute #		Warr. Date										
	Charge #3			<input type="checkbox"/> Fel <input type="checkbox"/> Misd		Counts		DCI Code		Offense Jurisdiction (if not arresting agency)		Statute #		Warr. Date										
V E H I C L E	VYR		Make		Model		Style		Color		Plate #/State		VIN											
	Vehicle 1. <input type="checkbox"/> Left at Scene <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured Date/Time _____ 2. <input type="checkbox"/> Released to other at owners request <input type="checkbox"/> Name of Other _____ 3. <input type="checkbox"/> Impounded <input type="checkbox"/> Place of storage _____ Inventory on File? _____																							
C O N F I N E D	Date/Time Confined			Place Confined					Committing Magistrate															
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input type="checkbox"/> No Bond <input checked="" type="checkbox"/> Other			Bond Amount <b>\$0.00</b>		Trial Date <b>09/02/2014 09:00</b>		Court Of <b>District</b>		City <b>MORGANTON</b>														
	Assisting Officer Name/ID # <b>0</b>					Released By (Name/Department/ID #)					Date/Time Released													
Status Codes	L - Lost    S - Stolen    R - Recovered    D - Damaged    Z - Seized    B - Burned    C - Counterfeit / Forged    F - Found																							
D R U G S	DCI		Status		Quantity		Type Measure		Suspected Type				Check up to 3 types of activity for each											
													Possess		Buy		Sale		Mfg.		Importing		Operating	
C O M P	Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>					Address					Phone:													
	<b>I SERVED THE ABOVE MICHAEL RAY LANE WITH A CRIMINAL SUMMONS. LANE WAS ADVISED OF HIS COURT DATE, TIME AND PLACE. LANE ALSO WAS GIVEN A COPY OF THE CRIMINAL SUMMONS.</b>																							
S T A T U S	Arresting Officer Signature/ID # <b>SIGMON, B. H. (S5289)</b>					Date/Time Submitted <b>08/01/2014 16:06</b>					Supervisor Signature <b>MCKINNEY, D. T.</b>													
	Case Status: <input type="checkbox"/> Further Inv. <input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed		Case Disposition: <input type="checkbox"/> Cleared By Arrest / No Supplement Needed <input checked="" type="checkbox"/> Arrest / No Investigation			Arrestee Signature																		