

## 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>06/24/2014 18:27</b>		OCA <b>201402525</b>					
	<input type="checkbox"/> Taken <input checked="" type="checkbox"/> Prints <input type="checkbox"/> Photos		Fingerprint Card Check Digit # (CKN) <b>HB9724F</b>		Arrest Tract <b>F</b>		Residence Tract <b>F</b>		Arrest Number <b>105092</b>				
A R R E S T E E	Name (Last, First, Middle) <b>MOSES, GREGORY AUSTIN</b>				D.O.B. <b>09/02/1974</b>		Age <b>39</b>	Race <b>W</b>	Sex <b>M</b>	Place of Birth <b>WASHINGTON DC, DC</b>		Country of Citizenship <b>US</b>	
	Current Address <b>1801 Suburban Dr, MORGANTON, NC 28655</b>				Phone <b>828-438-1535</b>		Occupation <b>Electrician</b>			<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident		<input type="checkbox"/> Unknown	
	Employer's Name <b>TCI CONSTRUCTION</b>				Address <b>2905 QUEEN CITY DR SUITE F CHARLOTTE NC</b>				Phone <b>828- -</b>				
	Also Known As (Alias Names)				Hgt <b>5'06</b>	Wgt <b>140</b>	Hair <b>BRO</b>	Eyes <b>BRO</b>	Skin Tone <b>FAIR</b>	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos <b>TATT LEFT SHOULDER / SON</b>				Social Security #		OLN and State			Misc. # and Type			
	Nearest Relative Name <b>MOSES, KEETJE</b>				Address <b>1801 SUBURBAN DR, MORGANTON, NC</b>				Phone <b>828-413-9125</b>				
A R R E S T	If Armed, Type of Weapon <b>UNKNOWN/NOT STATED</b>			<input type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant			Place of Arrest <b>4248 SCOTT ROAD, MORGANTON</b>						
	Charge #1 <b>B&amp;e Felony/ Forced</b>			<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>0510</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>14-54A/F</b>	Warr. Date <b>06/24/2014</b>			
	Charge #2 <b>Larceny After B E</b>			<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>0690</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>14-72(B)(2)</b>	Warr. Date <b>06/24/2014</b>			
	Charge #3 <b>Poss Stolen Goods</b>			<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>1330</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>14-71.1</b>	Warr. Date <b>06/24/2014</b>			
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 <b>06/24/2014 18:08:00</b>			Place Confined <b>BCDCF</b>			Committing Magistrate <b>LYNN WEBB</b>						
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other			Bond Amount <b>\$45,000.00</b>		Trial Date <b>06/25/2014 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 type="checkbox"/> Victim <input type="checkbox"/>				Address				Phone:				
	I served Moses with a warrant and a OFA FTA on Moses for all listed charges . Moses was advised of charges , bond and court information for all charges .												
S T A T U S	Arresting Officer Signature/ID # <b>CRUMP, S. D. (C4029)</b>				Date/Time Submitted <b>//</b>				Supervisor Signature <b>CRUMP, S. D.</b>				
	Case Status: <input type="checkbox"/> Further Inv. <input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed		Case Disposition: <input checked="" type="checkbox"/> Cleared By Arrest / No Supplement Needed <input type="checkbox"/> Arrest / No Investigation		Arrestee Signature								

**ARREST REPORT (Additional Charges)**

Agency Name <b>BURKE COUNTY SHERIFF'S OFFICE</b>	ORI <b>0120000</b>	Date/Time Arrested <b>06/24/2014 18:27</b>	OCA <b>201402525</b>
Arrestee Name <b>MOSES, GREGORY AUSTIN</b>			Arrest Number <b>105092</b>

Charge	Fel/Misd	Counts	DCI Code	(if not arresting agency) Offense Jurisdiction	Statute #	Warr. Date
4) Fail To Appear/ Failure To Comply	F	1	2690		15A-305	04/21/2014