

## ARREST REPORT

A G E N C Y	Agency Name <b>Morganton Department Public Safety</b>		ORI <b>0120100 B0003</b>		Date/Time Arrested <b>07/02/2014 10:42</b>		OCA <b>201404195</b>					
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract <b>2700</b>		Residence Tract <b>2700</b>		Arrest Number <b>105301</b>				
A R R E S T E E	Name (Last, First, Middle) <b>MOPKINS, CRYSTAL LOWANDA</b>			D.O.B. <b>08/18/1984</b>	Age <b>29</b>	Race <b>B</b>	Sex <b>F</b>	Place of Birth <b>DETROIT, MI</b>	Country of Citizenship <b>US</b>			
	Current Address <b>125 Pine St, MORGANTON, NC 28655</b>			Phone <b>828-640-1914</b>		Occupation		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name <b>FORERUNNER SERVICES</b>			Address <b>GRANITE FALLS, NC</b>			Phone					
	Also Known As (Alias Names)			Hgt <b>5'02</b>	Wgt <b>147</b>	Hair <b>BLK</b>	Eyes <b>BRO</b>	Skin Tone <b>DARK</b>	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos			Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name <b>HILL, KEVIN</b>			Address <b>UNKNOWN, SAWMILLS, NC</b>			Phone <b>828-292-2094</b>					
A R R E S T	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</b>		<input type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input checked="" type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest <b>125 PINE ST, MORGANTON</b>							
	Charge #1 <b>Fail To Appear</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>2690</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>15A-534</b>	Warr. Date <b>06/24/2014</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 <b>07/02/2014 12:03:00</b>		Place Confined <b>BURKE CATAWBA JAIL</b>			Committing Magistrate <b>ALAN COBB</b>						
	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>\$2,000.00</b>	Trial Date <b>07/15/2014 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:				
	On the above date and time, I served an order for arrest on Crystal Mopkins for failure to appear at 125 Pine St. I placed Mopkins under arrest and transported her to the Magistrate's Office where she was issued a \$2,000 cash bond. Mopkins was advised of her court date on 07/15/2014 at 0900. Mopkins was then transported to Burke Catawba Jail.											
S T A T U S	Arresting Officer Signature/ID # <b>LLOYD, Z. A. (L4887)</b>			Date/Time Submitted <b>07/02/2014 12:14</b>		Supervisor Signature <b>DEVINNEY, W. T.</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							