## ARREST REPORT

Α.	Agency Name								ORI [						OCA	4				
G I E N N F	BURKE COUNTY SHERIFF'S OFFICE								20000		08/05/2014						201403152			
CO	Taken Fingerprint Card Check Digit # (CKN)  The prints Fingerprint Card Check Digit # (CKN)							rrest Tract	Residence							est Number				
Υ	□ Photos HB9763S							F	D.O.B. Age Ra				1 0	+	10622					
4 R R E S T E E	Name (Last, First, Middle)  FINNEY, JOY WAKEFIELD									\ge   <b>4</b>	BURKE CO.					NC US	Country of Citizenship			
	Current Address 4671 Harold Shore Dr, MORGANTON, NC 28													Self Employed			Resident Unknown Non-Resident			
	Employer's Name SELF EMPLOYED Also Known As (Alias Names)							Address			I Was I II-						Phone <b>828-205-9851</b> Skin Tone Consumed Drug/Alcohol			
	,								5'03	1	Wgt Hair  200 BLO  OLN and State			BLU		MED	☐ Yes I	☑ No ☐ Unk		
	Scars, Marks, Tattoos  TATT RIGH FOOT / BENTLEY; TATT BACK							Social Secu	rity #	OLIVAIIU			Sidle			Aisc. # and Type				
	Nearest Relative Name							Address						Phone						
			TAYLOR		828-448-							3-448-05	65							
A I N E O T	— — — — — — — — — — — — — — — — — — —						iminal Cita	Summons tion	Place of Arrest											
	Charge #1							ounts	DCI Code		201 S GREEN ST, MORGANTON Offense Jurisdiction (if not arresting agency) Statute #					Warr. Date				
	Misd						1 Counts		1150 DCI Code				urisdiction (if not arresting agency)				113.13	08/04/2014 Warr. Date		
	Charge #2						C	ounts	DCI Code	, Oliense dunse			diction (if not arresting agency)				Otatute #			
	Charge #3					☐ Fel ☐ Misd	С	ounts	DCI Code Offense Juris			Jurisdict	sdiction (if not arresting agency)				Statute # Warr. Da			
V E H O	VYR Make Model				Style		Color Plate #/Stat		•	VIN					•					
	Vehicle		☐ Left at Scene☐ Released to ot		Secured request	d ☐ Unsec ☐ Name		er	Date/Time_											
			☐ Impounded	☐ Place of	_											Inventory	on File?			
COBFOND NE	Date/Time Confined Place Confined							Committing Magistrate ALAN COBB												
	Type Bond Bond Amount						T	Trial Date Court				rt Of	Of City							
	☐ Written Promise ☐ Unsecured  ☐ Secured ☐ No Bond ☐ Other  ☐ Other  ☐ Secured ☐ No Bond ☐ Other						00		014 00:00					NEWTON						
D Status	Assisting Officer Name/ID #							Released By (Name/Department/ID #) HASSON, R. E.					Date/Time Released 08/05/2014 14:45:00							
Codes	L - Lost S - Stolen R - Recovered D - Damaged Z - Seized B - Burned C - Counterfeit / Forged F - Found  Check up to 3 types of activity for each																			
ARRREST DRUGS	DCI Status Quantity Type Measure						Suspected Type					Possess Buy					Importing	Operating		
												_			Sale	Mfg.	1 2 3	2,1111		
UTE																				
ST																				
C O M P	Name: Complainant☐ Victim ☐								ss				Phone:							
N A R	ON THIS DATE ARRESTED SUBJECT ON LISTED CHARGE. BOND POSTED AT LOCATION																			
R A																				
T I V																				
E																				
S T	Arresting Officer Signature/ID #							Time Subm	00	Supervisor Signature										
Å	HASSON, R. E. (H6780)  Case Status: Case Disposition:							U8/U5	5/2014 14: Arrestee Si	·										
	Case St									anama										
T U S		ther Inv.	☑ Closed		By Arres	t / No Supplement	Neede	ed	Allestee Si	gnature	3									

DCI-608F Rev. 3/92