ARREST REPORT

Α.	Agency Name							ORI			Date/Time Arrested OCA					;A			
G I E N N F	Sanford Police Department							053010	00 S0005	08/2	29/2	014	16:04		14006626				
N F C O	Taken Fingerprint Card Check Digit # (CKN)							Arrest Trac	t	Resid	Residence Tract		Arı		rrest Number				
Ŷ	☐ Photos							600			600			. ;	30827				
A R R E S T E E	Name (Last, First, Middle) MOCTEZUMA, CARLOS JUSTIN								D.O.B. 02/17/1991		Age 23	Race W	Sex M		F	Place of Bi		Country of Citizenship	
	Current Address 213 S Fifth St, SANFORD, NC 27330								Phone	Occupation					Resident Unknown Non-Resident				
	Employer's Name							Addres	Address							Ц	Phone		
	JORDAN LAKE Also Known As (Alias Names)								Hgt Wgt			Hair Eyes			Lei	Skin Tone Consumed Drug/Alcohol			
	Also Miowii As (Alids Natities)								5'08	· ·			BLK BRO			Yes 🔼 No 🗆 Unk			
	Scars, Marks, Tattoos							Social Secu			OLN and State				Misc. # and Type				
	Neares	Relative	Name		Addres	SS		<u> </u>					Pho	ne					
										Пъ									
A I N F O T	— — — — — — — — — — — — — — — — — — —							al Summons tation	Warrant	II	Place of Arrest								
	Charge #1							Counts	DCI Code		213 S FIFTH ST, SANFORD Offense Jurisdiction (if not arresting agency) Statute # Warr. Date							Warr. Date	
	Non Compliance								2690								08/04/2014		
	Charge #2						1	Counts	DCI Code			ense Jurisdiction (if not arresting age			agency)			Warr. Date	
	☐ Fel																		
	Charge	#3			☐ Fel		Counts	DCI Code	Off	Offense Jurisdiction (if not arre				agency)	Statute #		Warr. Date		
	☐ Miso																		
V N E F O	VYR Make Model			,	Style		Color	Plate #/State		VIN									
	Vehicle	1. [Left at Scene		Secured	☐ Unse	cure		Date/Time_				<u> </u>						
С	Date/Ti	ع. ر ne Confi	Impounded ined	☐ Place of	Place C	onfined							Com	mitting N	lagistrate	Inventory	on File?		
80XD F-XED	08/29/2014 15:50:00 LCJ							RANDY CARTER											
	Type Bond Bond Amount □ Written Promise □ Unsecured							Trial Date								CANEODD			
	☐ Secured ☐ No Bond S279						.00				District Court				SANFORD				
	Assisting Officer Name/ID #							Released By (Name/Department/II				ent/ID #)				Date/Time Released			
Status Codes	atus L - Lost S - Stolen R - Recovered D - Damaged Z - Seized B - Burned C - Counterfeit / Forged F - Found																		
ARRUST DRUGS	DOL Status Ougasitis Time Manager							Suspected Type						CI	neck up to	3 types	of activity for	each	
	DCI Status Quantity Type Measure							Suspecie	:a Type				Possess	Buy	Sale	Mfg.	Importing	Operating	
ÜAR																			
ST																			
-																			
Mon	Name:	Comp	olainant□	Victim			Address					Phone:							
Р																			
N A R	MAGISTRATE R. CARTER ORDERED \$279 CASH ONLY BOND.																		
R																			
A T																			
Ĭ Į																			
E S	Arrestin	g Officer	Signature/ID#				Date	e/Time Submitted Supervisor Signature											
S T	HECK, W. W. (292)								04			NDLE		R.					
A T U	Case Status: Case Disposition:							Arrestee Signature											
U S	☐ Further Inv. ☐ Cleared By Arrest / No Supplement☐ Arrest / No Investigation						t Need	led											
	DCLCO					-												D 0/0	

DCI-608F Rev. 3/92