

## ARREST REPORT

AGENCY INFO	Agency Name <b>Lenoir Police Department</b>		ORI <b>0140200 C0015</b>		Date/Time Arrested <b>06/15/2014 16:41</b>		OCA <b>1403406</b>					
	<input checked="" type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) <b>HP6357G</b>	Arrest Tract <b>11</b>		Residence Tract <b>11</b>		Arrest Number <b>62150</b>					
ARRESTEE INFO	Name (Last, First, Middle) <b>GULLETT, ROLAND EDWARD</b>			D.O.B. <b>06/03/1975</b>	Age <b>39</b>	Race <b>W</b>	Sex <b>M</b>	Place of Birth <b>WILLARD, OH</b>	Country of Citizenship <b>US</b>			
	Current Address <b>121 Nw Calvary Pl, LENOIR, NC 28645</b>			Phone <b>828-640-8216</b>		Occupation <b>Laborer</b>		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name <b>UNEMPLOYED / DISABLED</b>			Address			Phone <b>828- -</b>					
	Also Known As (Alias Names)			Hgt <b>6'01</b>	Wgt <b>145</b>	Hair <b>BRO</b>	Eyes <b>HAZ</b>	Skin Tone <b>LT</b>	Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos <b>TATT RIGH ANKLE / HEART WITH EAGLE</b>			Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name <b>MILLER, KATHRINE</b>			Address <b>226-10 NW WILSON ST, LENOIR, NC 28645</b>				Phone <b>828-582-7408</b>				
ARREST	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</b>		<input checked="" type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest <b>1513 IVY RIDGE CT, LENOIR</b>							
	Charge #1 <b>Possess W/intent Sell Sch 2 C/s</b>	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>1810</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>90-95(A)(1)</b>	Warr. Date <b>06/15/2014</b>				
	Charge #2 <b>Manufacture Methamphetamine</b>	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>1810</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>90-95(B)(1A)</b>	Warr. Date <b>06/15/2014</b>				
	Charge #3 <b>Maintain Vehicle Or Dwelling For C/s</b>	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>1890</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>90-108(A)(7)</b>	Warr. Date <b>06/15/2014</b>				
VEHICLE INFO	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? _____											
CONFINED	Date/Time Confined <b>06/15/2014 23:34:00</b>		Place Confined <b>CCDC</b>		Committing Magistrate <b>MATHESON RICK</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>\$50,000.00</b>	Trial Date <b>06/17/2014 00:00</b>	Court Of <b>District Court</b>		City <b>LENOIR</b>					
	Assisting Officer Name/ID # <b>SMITH, M. B. 3</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											
DRUGS ARREST	DCI	Status	Quantity	Type Measure	Suspected Type		Check up to 3 types of activity for each					
							Possess	Buy	Sale	Mfg.	Importing	Operating
COMP	Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address				Phone:				
	The defendant was handcuffed with his hands behind his back and secured in the patrol vehicle. [06/16/2014 14:03, BWOODY, 576, LPD]											
STATUS	Arresting Officer Signature/ID # <b>GREENE, C. L. (CG2010)</b>			Date/Time Submitted <b>06/15/2014 23:45</b>		Supervisor Signature <b>ROBINSON, C. A.</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							