

## ARREST REPORT

AGENCY	Agency Name <b>Lenoir Police Department</b>		ORI <b>0140200 C0015</b>		Date/Time Arrested <b>09/20/2014 13:33</b>		OCA <b>1405317</b>	
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)	Arrest Tract <b>11</b>		Residence Tract <b>13</b>		Arrest Number <b>64094</b>	
ARRESTEE	Name (Last, First, Middle) <b>VISNAW, FRANK ROBERT</b>				D.O.B. <b>05/21/1969</b>	Age <b>45</b>	Race <b>W</b>	Sex <b>M</b>
	Current Address <b>1408 Walt Arney Rd, LENOIR, NC 28645</b>				Phone <b>828-572-2663</b>		Occupation <b>Laborer</b>	
	Employer's Name <b>UNEMPLOYED</b>				Address		Phone <b>828- -</b>	
	Also Known As (Alias Names)				Hgt <b>6'01</b>	Wgt <b>225</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				Social Security #		Misc. # and Type	
ARREST	Nearest Relative Name <b>TERRY ALLMAN</b>				Address <b>UNKNOWN</b>		Phone <b>216-281-9682</b>	
	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</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>308 BLOWING ROCK BLVD, LENOIR</b>			
	Charge #1 <b>Larceny (misdemeanor)</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>0690</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>14-72 (A)</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
	VYR		Make	Model	Style	Color	Plate #/State	VIN
VEHICLE	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? _____							
	Date/Time Confined <b>09/20/2014 15:05:00</b>		Place Confined <b>CCDC</b>		Committing Magistrate <b>CORNETT GREG</b>			
CONFINED	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>\$0.00</b>	Trial Date <b>10/06/2014 00:00</b>		Court Of <b>District Court</b>		
	Assisting Officer Name/ID # <b>COFFEY, S. M. 2</b>		Released By (Name/Department/ID #)				Date/Time Released	
STATUS	L - Lost S - Stolen R - Recovered D - Damaged Z - Seized B - Burned C - Counterfeit / Forged F - Found							
DRUGS	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 subject was handcuffed behind the back, secured in the rear of my patrol car, and transported to the Caldwell County Detention Center. The subject received a custody release.  [09/23/2014 11:04, BWOODY, 576, LPD]							
STATUS	Arresting Officer Signature/ID # <b>COFFEY, M. S. (MC2013)</b>			Date/Time Submitted <b>09/21/2014 08:00</b>		Supervisor Signature <b>MOORE, J. E.</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			