

ARREST REPORT

A G E N C Y	Agency Name Sanford Police Department		ORI 0530100 S0005		Date/Time Arrested 08/21/2014 14:00		OCA 14003320					
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) 3204DBD	Arrest Tract 300		Residence Tract 500		Arrest Number 30737					
A R R E S T E E	Name (Last, First, Middle) BRICE, MELISSA FAYE			D.O.B. 07/24/1975	Age 39	Race B	Sex F	Place of Birth SANFORD, NC	Country of Citizenship US			
	Current Address 921 Oddfellow St, SANFORD, NC 27330			Phone		Occupation None		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown				
	Employer's Name NONE			Address NONE				Phone				
	Also Known As (Alias Names) BRICE, SALLY FAYE			Hgt 5'07	Wgt 145	Hair BLK	Eyes BRO	Skin Tone DARK	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos			Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name BRICE, MARY			Address 1115 WASHINGTON AVE, SANFORD, NC				Phone				
A R R E S T	If Armed, Type of Weapon PERSONAL WEAPONS		<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 1130 N HORNER BLVD, SANFORD							
	Charge #1 Fraud- Obtaining Money By False Representation Of Physical D		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 2	DCI Code 1120	Offense Jurisdiction (if not arresting agency)		Statute # 14-113	Warr. Date 08/21/2014			
	Charge #2 Fraud- Financial Transaction Card Theft		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 2	DCI Code 1150	Offense Jurisdiction (if not arresting agency)		Statute # 14-113.9	Warr. Date 08/21/2014			
	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 08/21/2014 00:00:00		Place Confined LCJ		Committing Magistrate JIM EADS							
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other		Bond Amount \$25,000.00	Trial Date 08/22/2014 00:00	Court Of District Court		City SANFORD					
	Assisting Officer Name/ID # 0			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 type="checkbox"/> Victim <input type="checkbox"/>			Address				Phone:				
	N A R R A T I V E											
Arresting Officer Signature/ID # ROGERS, K. M. (135)									Date/Time Submitted 08/21/2014 14:00		Supervisor Signature FRAZER, V. D.	
S T A T U S	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							