

## ARREST REPORT

AGENCY	Agency Name <b>Lenoir Police Department</b>		ORI <b>0140200 C0015</b>		Date/Time Arrested <b>08/16/2014 22:18</b>		OCA <b>1404565</b>					
	Taken <input checked="" type="checkbox"/> Prints Fingerprint Card Check Digit # (CKN) <input type="checkbox"/> Photos <b>HP6495</b>	Arrest Tract <b>13</b>		Residence Tract <b>99</b>		Arrest Number <b>63397</b>						
ARRESTEE	Name (Last, First, Middle) <b>ERVIN, DEBORAH ANDERSON</b>			D.O.B. <b>03/22/1964</b>	Age <b>50</b>	Race <b>W</b>	Sex <b>F</b>	Place of Birth <b>CHARLESTON, WV</b>	Country of Citizenship <b>US</b>			
	Current Address <b>4295 Ken Dar Ln, 6, HUDSON, NC 28638</b>			Phone <b>828-525-1902</b>		Occupation <b>None</b>		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name <b>UNEMPLOYED</b>			Address <b>NONE</b>				Phone <b>828- -</b>				
	Also Known As (Alias Names) <b>ERVIN, DEBORAH LYNN; DEBBY</b>			Hgt <b>5'06</b>	Wgt <b>110</b>	Hair <b>BRO</b>	Eyes <b>GRN</b>	Skin Tone <b>LT</b>	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos <b>TATT RIGH LEG / ROSE; TATT LEFT ARM /</b>			Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name <b>PHILLIPS, CHAFFIN</b>			Address <b>1300 VIRGINIA ST, OAK HILL, WV 25901</b>				Phone <b>304-465-4254</b>				
	If Armed, Type of Weapon <b>KNIFE</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>1821 SW WAYCROSS DR, LENOIR</b>						
ARREST	Charge #1 <b>Possess 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 (A) (3)</b>	Warr. Date <b>08/16/2014</b>			
	Charge #2 <b>Possess Drug Paraphernalia</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>1834</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>90-113.22(A)</b>	Warr. Date <b>08/16/2014</b>			
	Charge #3		<input type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts	DCI Code	Offense Jurisdiction (if not arresting agency)		Statute #	Warr. Date			
VEHICLE	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>08/16/2014 01:00:00</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>\$25,000.00</b>		Trial Date <b>08/19/2014 00:00</b>		Court Of <b>District Court</b> City <b>LENOIR</b>					
	Assisting Officer Name/ID # <b>REID, J. H. 1</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	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 behind her back and secured with a seat belt for transport.  [08/18/2014 12:06, BWOODY, 576, LPD]											
STATUS	Arresting Officer Signature/ID # <b>GREENE, D. P. (DG2009)</b>			Date/Time Submitted <b>08/17/2014 04:30</b>			Supervisor Signature <b>INGRAM, B. H.</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						