

## ARREST REPORT

AGENCY	Agency Name <b>Lenoir Police Department</b>		ORI <b>0140200 C0015</b>		Date/Time Arrested <b>08/16/2014 04:00</b>		OCA <b>1404559</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>99</b>		Arrest Number <b>63447</b>	
ARRESTEE	Name (Last, First, Middle) <b>PRICE, MEGAN RENAE</b>				D.O.B. <b>02/16/1990</b>	Age <b>24</b>	Race <b>W</b>	Sex <b>F</b>
	Current Address <b>1236 Three Way Ln, LENOIR, NC 28645</b>				Phone <b>828-758-3026</b>		Occupation <b>None</b>	<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident
	Employer's Name <b>UNEMPLOYED</b>				Address <b>NONE</b>			
	Also Known As (Alias Names)				Hgt <b>5'05</b>	Wgt <b>130</b>	Hair <b>BRO</b>	Eyes <b>BRO</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 WRIST / HAILEY</b>		Social Security #		OLN and State		Misc. # and Type	
	Nearest Relative Name <b>MANN, REGINA</b>				Address <b>SCOTTS TRAIL, MORGANTON, NC 28655</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>935 BLOWING ROCK BLVD, LENOIR</b>			
	Charge #1 <b>Hold Until Sober</b>	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>4040</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>122C-301</b>	Warr. Date <b>08/16/2014</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
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 04:20:00</b>		Place Confined <b>CCDC</b>		Committing Magistrate			
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input checked="" type="checkbox"/> No Bond <input type="checkbox"/> Other		Bond Amount <b>\$0.00</b>	Trial Date		Court Of City		
	Assisting Officer Name/ID # <b>GREENE, D. P. 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 subject was handcuffed behind her back and seated in the back seat of my patrol vehicle. The subject consumed an unknown amount of an alcoholic beverage.  [08/19/2014 10:21, BWOODY, 576, LPD]							
STATUS	Arresting Officer Signature/ID # <b>SANDERS, T. G. (TS2013)</b>			Date/Time Submitted <b>08/16/2014 05:00</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			