## **ARREST REPORT**

AGEN.	Agency Name							ORI			Date/Time Arrested					OCA				
ĔŅ	Sanford Police Department  Taken   Fingerprint Card Check Digit # (CKN)							053010					4 0				14007301 est Number			
ÇŌ	☐ Prints ☐ Photos							Arrest Tract			Residence Tract			310			1014			
A R R E S T E E	Name (Last, First, Middle)								D.O.B.	D.O.B.		Age Race		Sex		F	Place of B		Country of Citizenship	
	SOSA, CARLOS MIGUEL  Current Address								10/20/19	91	91 22 V		V	Maupation			11			
	285 Sabre Dr, SANFORD, NC 27332								Thone					apation			II .	esident on-Resident	Unknown	
		er's Nam			Addres	s				-				п	Phone					
	Also Known As (Alias Names)								Hgt	Wgt Hair				Eyes	l si	kin Tone   Consumed Drug/Alcohol				
	- All Community ( Made Names)								5'09		0 BLK E			BRO	O A Yes			□ No □ Unk		
	Scars, Marks, Tattoos							Social Secu	urity #	ty#		OLN and State				Misc. # and Type				
	Nearest	Relative	Name		Addres	ss								Pho	Phone					
	16 A	1.75				II Die			Diago of Associ											
A INFO								al Summons tation	Warrant	ll l		Place of Arrest  1420 BRAGG ST, S				ANFORD				
	Charge #1							Counts	DCI Code		Offense Jurisdiction (if not arre								Warr. Date	
	Posšession Of Marijuana						1		1810							90-95(D)			09/20/2014	
	Charge #2 Possession Of Drug Paraphernalia							Counts	DCI Code		Offense Jurisdiction			(if not arresting agency)			Statute #		Warr. Date	
	Charge #3						1 Counts		1834 DCI Code		Offens	se Juriso	liction (if not arresting ager			agency)	90-	09/20/2014 Warr. Date		
						☐ Fel ☐ Misd			20.000	30, 0000							7,			
N E H O	VYR <b>2003</b>		ake IOND	Model ACCOF		Style		Color WHI	Plate #/St		R NO	C 201	- II	IHG(	`M56	303 V	0743	69	-	
	Vehicle		Left at Scene		Secured	☐ Unse	cure		Date/Tim				<u> </u>				101 10			
	2. Released to other at owners request Name of Other																			
CONFINED	3. Impounded Place of storage  C Date/Time Confined Place Confined Committing													nitting M		Inventory	on File?			
	Type Bond																			
	Type Bond  Written Promise Unsecured  Socured No Bond Other						.00	Trial Date 10/28/2	0	Court Of  District Court				City SANFORD						
	Assisting Officer Name/ID #							L		By (Name/Department/ID #)			) #)				Date/Time Released			
Status	0																			
Codes	L - Lost	. 5-	- Stolen R - R	ecovered	D - Damag	B - Burne						F - Found  Check up to 3 types of activity for each								
ARREST AT DRUGS	DCI Status Quantity Type Measure					d Туре			ı	Po	ssess	Buy	Sale	Mfg.	Importing	П				
	E	E Z 3.00 GM MARIJUANA					Α							Υ						
		<del>                                     </del>																		
C O M P	Name:	Comp	blainant□	Addre	ess								Phone:							
N																				
A R R A T																				
i																				
E	Arrection	a Officer	Signature/ID #				Dat	Date/Time Submitted					Supervisor Signature							
S T	Arresting Officer Signature/ID #  WELDON, J. R. (281)									ll '				OUNG, J. B.						
A T U S	Case Status: Case Disposition:								Arreste			ш.		-, '						
	☐ Further Inv. ☐ S Cleared By Arrest / No Supplemen ☐ Inactive ☐ Arrest / No Investigation					t Need	ded													
_																				

DCI-608F Rev. 3/92