

ARREST REPORT

A G E N C Y	Agency Name BURKE COUNTY SHERIFF'S OFFICE		ORI 0120000		Date/Time Arrested 09/08/2014 14:02		OCA 201403633						
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract K		Residence Tract K		Arrest Number 107048					
A R R E S T E E	Name (Last, First, Middle) ARNOLD, FLORENCE LAMB			D.O.B. 09/25/1966		Age 47	Race W	Sex F	Place of Birth CHARLSTON, SC	Country of Citizenship US			
	Current Address 7625 Virginia Rdg, CONNELLY SPRINGS, NC 28612			Phone 828-443-9412		Occupation Nurse		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident					
	Employer's Name CAROLINAS HEALTH CARE			Address MORGANTON				Phone 828-427-5500					
	Also Known As (Alias Names)			Hgt 5'06	Wgt 160	Hair BRO	Eyes GRE	Skin Tone FAIR	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk				
	Scars, Marks, Tattoos			Social Security #		OLN and State		Misc. # and Type					
	Nearest Relative Name			Address				Phone					
A R R E S T	If Armed, Type of Weapon NOT APPLICABLE/NONE		<input type="checkbox"/> On-View <input checked="" type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest 7625 VIRGINIA RDG, CONNELLY SPRINGS								
	Charge #1 Simple Assault / Assault & Battery		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 0890	Offense Jurisdiction (if not arresting agency)		Statute # 14-33(A)	Warr. Date 09/06/2014				
	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				
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		Place Confined			Committing Magistrate							
	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 \$0.00		Trial Date 09/29/2014 09:00		Court Of District		City MORGANTON				
	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 checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address				Phone:					
	I SERVED THE ABOVE FLORENCE LAMB ARNOLD WITH A CRIMINAL SUMMONS. ARNOLD WAS ADVISED OF HER COURT DATE, TIME AND PLACE. ARNOLD WAS ALSO GIVE A COPY OF THE CRIMINAL SUMMONS.												
S T A T U S	Arresting Officer Signature/ID # SIGMON, B. H. (S5289)			Date/Time Submitted 09/08/2014 14:02			Supervisor Signature MCKINNEY, D. T.						
	Case Status: <input type="checkbox"/> Further Inv. <input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed		Case Disposition: <input type="checkbox"/> Cleared By Arrest / No Supplement Needed <input checked="" type="checkbox"/> Arrest / No Investigation			Arrestee Signature							