

ARREST REPORT

AGENCY	Agency Name Lenoir Police Department		ORI 0140200 C0015		Date/Time Arrested 08/31/2014 16:36		OCA 1404874	
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)	Arrest Tract 11		Residence Tract 99		Arrest Number 63723	
ARRESTEE	Name (Last, First, Middle) BLALOCK, RICKY ALLEN				D.O.B. 02/05/1988	Age 26	Race W	Sex M
	Current Address 3780 Lr Walker Road, MORGANTON, NC 28655				Phone 828-205-1214		Occupation Laborer	
	Employer's Name UNEMPLOYED				Address		Phone 828- -	
	Also Known As (Alias Names)				Hgt 5'09	Wgt 190	Hair BRO	Eyes BLU
					Skin Tone MED	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk		
	Scars, Marks, Tattoos TATT LEFT FOREARM / CROSS				Social Security #		Misc. # and Type	
ARREST	Nearest Relative Name BENFIELD, ASHLEY M				Address 3780 LR WALKER ROAD, MORGANTON, NC		Phone 828-205-1214	
	If Armed, Type of Weapon NOT APPLICABLE/NONE		<input type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input checked="" type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest 935 BLOWING ROCK BLVD, LENOIR			
	Charge #1 Fail To Appear		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 2640	Offense Jurisdiction (if not arresting agency)		Statute # 15A-305
	Charge #2 Fail To Appear		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 2640	Offense Jurisdiction (if not arresting agency)		Statute # 15A-305
	Charge #3		<input type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts	DCI Code	Offense Jurisdiction (if not arresting agency)		Statute #
								Warr. Date 08/05/2014
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 08/31/2014 17:23:00		Place Confined CCDC		Committing Magistrate KING SCOTT			
	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 \$1,000.00	Trial Date 09/16/2014 00:00	Court Of District Court		City LENOIR	
	Assisting Officer Name/ID # KEEFER, E. P. 1		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:	
	Offender was handcuffed and transported per departmental policy. Offender was served with above listed warrants, and is to appear in court in Burke County on 09/16/2014. [09/02/2014 15:52, BWOODY, 576, LPD]							
STATUS	Arresting Officer Signature/ID # JAMES, C. E. (CJ2012)			Date/Time Submitted 08/31/2014 18:05		Supervisor Signature MILLS, C. T.		
	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			