

## ARREST REPORT

A G E N C Y	Agency Name <b>Morganton Department Public Safety</b>		ORI <b>0120100 B0003</b>		Date/Time Arrested <b>06/13/2014 11:09</b>		OCA <b>201403745</b>					
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract <b>6700</b>		Residence Tract <b>6200</b>		Arrest Number <b>104853</b>				
A R R E S T E E	Name (Last, First, Middle) <b>LAMOORE, ALLEN MICHAEL</b>			D.O.B. <b>01/28/1973</b>		Age <b>41</b>	Race <b>W</b>	Sex <b>M</b>	Place of Birth <b>RHODE ISLAND, RI</b>	Country of Citizenship <b>US</b>		
	Current Address <b>704 Silver Creek Rd, MORGANTON, NC 28655</b>			Phone <b>828-403-5621</b>		Occupation <b>Food Service</b>		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name <b>SILVER CREEK RESTAURANT</b>			Address <b>CARBON CITY RD MORGANTON, NC 28655</b>			Phone					
	Also Known As (Alias Names)			Hgt <b>5'08</b>	Wgt <b>179</b>	Hair <b>BRO</b>	Eyes <b>BRO</b>	Skin Tone <b>FAIR</b>	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos <b>TATT UPP ARM / NEW ENGLAND PATRIOTS</b>			Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name <b>NONE IN THIS AREA</b>			Address				Phone				
A R R E S T	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</b>		<input type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant			Place of Arrest <b>699 W UNION ST/SILVER CREEK RD,</b>						
	Charge #1 <b>Simple Assault / Assault &amp; Battery</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>0890</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>14-33(A)</b>	Warr. Date <b>06/13/2014</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			
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 <b>NOT CONFINED</b>			Committing Magistrate <b>DEBBIE CARSWELL</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>\$0.00</b>	Trial Date <b>07/08/2014 09:00</b>		Court Of <b>District</b>		City <b>MORGANTON</b>				
	Assisting Officer Name/ID # <b>0</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											
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 spoke with the defendant, Allen Michael LaMoore, by telephone. I advised him he had a warrant for arrest from an incident earlier in the day. I met with LaMoore at W Union St and Silver Creek Rd. I transported him to the Magistrate's Office where I served the warrant for arrest on LaMoore. LaMoore received a written promise to appear in court. I transported LaMoore back to W Union St at Silver Creek Rd and dropped him off without incident.											
S T A T U S	Arresting Officer Signature/ID # <b>KINARD, C. B. (K8501)</b>			Date/Time Submitted <b>06/13/2014 17:37</b>			Supervisor Signature <b>TRIPLETT, R. E.</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						