

ARREST REPORT

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|--------------------------------------|---|--------|---|--|---------------------------------------|--|---|-----------------------------------|---|------|-----------|-----------|
| A G E N C Y | Agency Name Wake Forest Police Department | | | ORI 0920700 | | Date/Time Arrested 06/15/2014 21:30 | | OCA 14001212 | | | | |
| | Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos | | Fingerprint Card Check Digit # (CKN) 3195HCP | | Arrest Tract Z4 | | Residence Tract Z4 | | Arrest Number 12861 | | | |
| A R R E S T E E | Name (Last, First, Middle) REVIERE, JAMIL RAMON | | | | D.O.B. 04/23/1981 | | Age 33 | Race B | Sex M | | | |
| | Current Address 2916 Beechwood Dr, DURHAM, NC 27707 | | | | Phone 919-412-4787 | | Occupation | | <input type="checkbox"/> Resident <input checked="" type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown | | | |
| | Employer's Name | | | Address | | | | Phone | | | | |
| | Also Known As (Alias Names) | | | | Hgt 5'09 | Wgt 0 | Hair BLK | Eyes BRO | Skin Tone <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 HANDS, FEET, TEETH, | | <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 3301 HAMMOND RD, RALEIGH | | | | | | |
| | Charge #1 Obtain Cs By Fraud (f) | | <input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd | Counts 1 | DCI Code 1120 | Offense Jurisdiction (if not arresting agency) | | Statute # 90-108(A)(10) | Warr. Date 06/15/2014 | | | |
| | Charge #2 Trafficking In Heroin | | <input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd | Counts 1 | DCI Code 1810 | Offense Jurisdiction (if not arresting agency) | | Statute # 90-95(H)(4) | Warr. Date 06/15/2014 | | | |
| | Charge #3 P/w/i/m/s/d Sch II Cs | | <input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd | Counts 1 | DCI Code 1810 | Offense Jurisdiction (if not arresting agency) | | Statute # 90-95(A)(1)J3 | Warr. Date 06/15/2014 | | | |
| 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 06/15/2014 22:00:00 | | Place Confined WAKE COUNTY JAIL | | | Committing Magistrate MAGISTRATE | | | | | | |
| | Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other | | Bond Amount \$200,000.00 | | Trial Date 06/16/2014 09:00 | | Court Of Wake County District City RALEIGH | | | | | |
| | 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 |
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| C O M P | Name: Complainant <input type="checkbox"/> Victim <input type="checkbox"/> | | | | Address | | | | Phone: | | | |
| | Reviere was charged with the above offenses while already in custody at the Wake County Jail. The warrants were served on Reviere and he remained in custody at the jail. | | | | | | | | | | | |
| S T A T U S | Arresting Officer Signature/ID # CARLSON, A. T. (596) | | | Date/Time Submitted 06/15/2014 21:30 | | | Supervisor Signature MAY, R. 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 | | | | | | |