

## ARREST REPORT

A G E N C Y	Agency Name <b>BURKE COUNTY SHERIFF'S OFFICE</b>		ORI <b>0120000</b>		Date/Time Arrested <b>09/04/2014 10:19</b>		OCA <b>201403578</b>						
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract <b>F</b>		Residence Tract <b>F</b>		Arrest Number <b>107054</b>					
A R R E S T E E	Name (Last, First, Middle) <b>BUFF, KENDRA LEANNE</b>			D.O.B. <b>01/05/1987</b>		Age <b>27</b>	Race <b>W</b>	Sex <b>F</b>	Place of Birth <b>BURKE, NC</b>	Country of Citizenship <b>US</b>			
	Current Address <b>2351 Burke Memorial Park Rd, VALDESE, NC 28690</b>			Phone <b>828-205-6087</b>		Occupation <b>None</b>		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident					
	Employer's Name <b>UNEMPLOYED</b>			Address				Phone					
	Also Known As (Alias Names) <b>BUFF, CHOLITA</b>			Hgt <b>4'10</b>	Wgt <b>180</b>	Hair <b>BRO</b>	Eyes <b>HAZ</b>	Skin Tone <b>LIGH</b>	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk				
	Scars, Marks, Tattoos <b>TATT BACK; TATT LEFT SHOULDER;</b>			Social Security #		OLN and State		Misc. # and Type					
	Nearest Relative Name <b>LAIL,PATSY</b>			Address <b>2351 BURKE MEMORIAL PARK RD,</b>				Phone <b>828-433-0730</b>					
	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</b>			<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 <b>2351 BURKE MEMORIAL PARK RD, VALDESE</b>						
A R R E S T	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>09/04/2014</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						
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other		Bond Amount <b>\$0.00</b>		Trial Date <b>09/24/2014 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:				
	ON THE DATE, TIME AND LOCATION LISTED I SERVED ONE CRIMINAL SUMMONS ON KENDRA BUFF FOR THE LISTED CHARGE. I ADVISED BUFF OF HER CHARGE AND COURT DATE BY READING THE SUMMONS TO HER AND BY LEAVING HER WITH A COPY.												
S T A T U S	Arresting Officer Signature/ID # <b>STRAUSS, D. T. (S9463)</b>				Date/Time Submitted <b>09/04/2014 10:19</b>			Supervisor Signature <b>MCKINNEY, D. T.</b>					
	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							