ARREST REPORT

Α.	Agency Name							ORI Date/Ti				e Arrested OCA								
G I E N N F	Sanford Police Department							053010	0 S0005	08/1	08/13/2014 2						4005803			
CO	Taken Fingerprint Card Check Digit # (CKN) ☐							Arrest Tract			esidence Tract			ll l	Arrest Number					
Υ	The Photos 3194DBK							900	900						30667					
ARRESTEE	Name (Last, First, Middle) KEELS, DEMETRIUS LAMONT								D.O.B. Age 10/11/1977 36			Race B	Sex M		Place of Birth Country of Citizenship ROANOKE RAPIDS, NC US					
	Current Address 2845 Eames Dr, SANFORD, NC 27330							Phone			Occupation Unemployed					Resident Unknown				
	Employer's Name							Address				Offernployed					Non-Resident Phone			
	UNEMPLOYED																			
	Also Known As (Alias Names)								5'11		*		Hair Eyes LK BRO			in Tone	Drug/Alcohol			
	Scars, Marks, Tattoos							Social Secu		10	OLN and State					MED ☐ Yes ☐ No ☐ Unk				
	Nearest	Relative	e Name			Address	Address Phone													
			PLE, KRIS	TINA LA	DON		28	45 EAME				DRD, N	IC 27	7330						
A I N F O T	- · · · · - · · · - · · ·							Summons	II	Place of Arrest 2800 EAMES DR/RICE RD, SANFORD										
	PERSONAL WEAPONS Order for Arrest Charge #1						Cita	Counts	Warrant DCI Code				on (if not a				FORD	Warr. Date		
	Charge #1 Awdwisi					☑ Fel ☐ Misd	1		0410					3	, ,		32(B)	08/13/2014		
	Charge #2							Counts	DCI Code	Offe	Offense Jurisdiction (if not arre				agency)	Statute #		Warr. Date		
						☐ Misd														
	Charge	#3				☐ Fel	(Counts	DCI Code	Offe	Offense Jurisdiction (if not an			rresting	agency)	Statute #		Warr. Date		
					☐ Misd															
V N E F H O	VYR	Ma	ake	Model	!	Style		Color	Plate #/State				VIN							
	New Vehicle 1. Left at Scene Secured Unsecure Date/Time																			
		2. [Released to ot	her at owners	request	☐ Name		ner												
	Data/Tir		☐ Impounded	☐ Place of		onfined							II Com	mitting M		Inventory	on File?			
CONFINED	Date/Time Confined Place Confined LCSO							Committing Magistrate SANDRA JORDAN												
	Type Bond Bond Amount Unsecured											ourt Of City								
	Secured No Bond Other					\$35,000. 	<u> </u>									SANFORD				
	Assisting Officer Name/ID #							Released By (Name/Department/ID				nt/ID #)				Date/Time Released				
Status Codes	L - Los	t S-	- Stolen R - R	ecovered	D - Dama	ged Z - Seiz	zed	B - Burnec	C - Counte	rfeit / Fo	rged	F - F	ound		"					
D R U G S	DCI Status Quantity Type Measure							Suspected Type						Cl	neck up to	3 types	of activity for e	each		
	DCI Status Quantity Type M				leasure		Suspeciel				\perp	Possess	Buy	Sale	Mfg.	Importing	Operating			
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	Name: Complainant□ Victim□							Address								I D				
С О М	Name:	Comp	oiainant _		Address									Phone:						
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V E																				
v						Arresting Officer Signature/ID #							Supervisor Signature							
V E	Arrestin	g Officer	•				Date	/Time Subm			- [] :	Superv	isor Signa	ture						
S T A			•), I. (260	-		Date		3/2014 20:			Superv	isor Signa	ture						
S T	Case S		SOTO	Case Dispos	sition:	/ No Supplemen		08/13				Superv	isor Signa	ture						

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