

## 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>06/06/2014 18:31</b>		OCA <b>201403508</b>					
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract <b>9600</b>		Residence Tract <b>9999</b>		Arrest Number <b>104680</b>				
A R R E S T E E	Name (Last, First, Middle) <b>ANDREWS, JAMES EDWARD</b>			D.O.B. <b>09/03/1953</b>		Age <b>60</b>	Race <b>W</b>	Sex <b>M</b>	Place of Birth <b>CALDWELL CO, NC</b>	Country of Citizenship <b>US</b>		
	Current Address <b>901 Eldred St Se, VALDESE, NC 28690</b>			Phone <b>828-874-2007</b>		Occupation <b>Unemployed</b>		<input type="checkbox"/> Resident <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> Non-Resident				
	Employer's Name <b>UNEMPLOYED</b>			Address			Phone					
	Also Known As (Alias Names)			Hgt <b>6'00</b>	Wgt <b>160</b>	Hair <b>BRO</b>	Eyes <b>BLU</b>	Skin Tone <b>FAIR</b>	Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos <b>TATT BACK BACK / REBEL FLAG; TATT</b>			Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name <b>LEDFOORD, LISA</b>			Address <b>901 ELDRED ST SE, VALDESE, NC 28690</b>			Phone <b>828-874-2007</b>					
A R R E S T	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</b>		<input checked="" type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest <b>2505 S STERLING ST, MORGANTON</b>							
	Charge #1 <b>Dwi</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>2100</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>20-138.1</b>	Warr. Date			
	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 <b>1999</b>	Make <b>FORD</b>	Model <b>RANGER</b>	Style <b>TK</b>	Color <b>BLU</b>	Plate #/State <b>CJC2158 NC 2015</b>		VIN <b>1FTYR10C6XUA00774</b>				
	Vehicle 1. <input checked="" type="checkbox"/> Left at Scene <input checked="" type="checkbox"/> Secured <input type="checkbox"/> Unsecured Date/Time <b>06/06/2014 00:00</b> 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 <b>06/06/2014 20:45:00</b>		Place Confined <b>BURKE CATAWBA</b>			Committing Magistrate <b>DAVID WHITESIDES</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 responded to a motor vehicle collision in the PVA of City Limit Beverage. The defendant had been backing from his parking space and struck another vehicle that was in the PVA waiting to pull onto S Sterling St.  The defendant had a strong odor of alcoholic beverages about him, was staggering (difficulty in											
S T A T U S	Arresting Officer Signature/ID # <b>GILLSTRAP, J. L. (G3628)</b>			Date/Time Submitted <b>06/06/2014 18:31</b>			Supervisor Signature <b>FERRARO, M. J.</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							

\*\* Continued \*\*

### ARREST REPORT (Additional Narrative)

Agency Name	ORI	Date/Time Arrested	OCA
<b>Morganton Department Public Safety</b>	<b>0120100 B0003</b>	<b>06/06/2014 18:31</b>	<b>201403508</b>
Arrestee Name			Arrest Number
<b>ANDREWS, JAMES EDWARD</b>			<b>104680</b>

walking straight), swaying (leaning against car for support) and had urinated on himself. The defendant admitted to driving when asked and stated he had not seen the other car.

I noticed indicators of impairment during a series of field sobriety tests I administered to the defendant. I formed the opinion that he had consumed a sufficient amount of an impairing substance to appreciably impair his mental and physical abilities. I believe that he was impaired by alcoholic beverages. I placed him under arrest for DWI.

I took the defendant to BCDP and administered an intoximeter test. The defendant provided a sample of breath for the test.

We went before the magistrate and the defendant was placed in jail under a custody release. I also issued him a citation for the unsafe movement.