

ARREST REPORT

A G E N C Y	Agency Name BURKE COUNTY SHERIFF'S OFFICE		ORI 0120000		Date/Time Arrested 07/10/2014 20:30		OCA 201402786					
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract D		Residence Tract D		Arrest Number 105563				
A R R E S T E E	Name (Last, First, Middle) WELLS, ALISHIA SAMOAN			D.O.B. 03/25/1995		Age 19	Race B	Sex F	Place of Birth	Country of Citizenship US		
	Current Address 4715 Homestead Dr, MORGANTON, NC 28655			Phone 828-584-8936		Occupation Unemployed		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name UNEMPLOYED			Address N/A					Phone			
	Also Known As (Alias Names)			Hgt 5'04	Wgt 220	Hair BLK	Eyes BRO	Skin Tone MED	Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input 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 NOT APPLICABLE/NONE		<input type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input checked="" type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest 1585 NC 126, MORGANTON							
	Charge #1 Possess Schedule Ii		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 1810	Offense Jurisdiction (if not arresting agency)		Statute # 90-95(A3)2	Warr. Date 07/10/2014			
	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 2003	Make NISS	Model SENTRA	Style 4D	Color TAN	Plate #/State BFD6356 NC 2014	VIN 3N1CB51D03L810910					
	Vehicle 1. <input type="checkbox"/> Left at Scene <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured Date/Time 07/10/2014 00:00 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? NONE											
C O N F I N E D	Date/Time Confined		Place Confined NOT CONFINED			Committing Magistrate						
	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 \$0.00	Trial Date 08/19/2014 09:00		Court Of District		City MORGANTON				
	Assisting Officer Name/ID # GRADY, P. K. 1			Released By (Name/Department/ID #) ANDERSON, D. T.			Date/Time Released 07/10/2014 20:45:06					
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					
	G	Z	6.50	DU	OXYCODONE		Possess Y	Buy	Sale	Mfg.	Importing	Operating
C O M P	Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address				Phone:				
	On 07-10-2014 I came in contact with a suspicious vehicle at the bus entrance to Table Rock Middle School. The vehicle was occupied by Alishia Wells in the passenger seat and Alexis Graybeal in the driver seat. Upon approach I observed Ms. Wells attempting to hide an orange pill bottle in her hands. I asked Ms. Wells to see the bottle and found the name on the label not to be hers. Ms. Wells stated she was holding onto her grandmother's pill bottle because her brother would											
S T A T U S	Arresting Officer Signature/ID # ANDERSON, D. T. (A2564)			Date/Time Submitted 07/10/2014 20:30			Supervisor Signature MCKINNEY, D. T.					
	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 BURKE COUNTY SHERIFF`S OFFICE	ORI 0120000	Date/Time Arrested 07/10/2014 20:30	OCA 201402786
Arrestee Name WELLS, ALISHIA SAMOAN			Arrest Number 105563

still them. I issued a citation to Ms. Wells and released her form my custody.