

ARREST REPORT

A G E N C Y	Agency Name Sanford Police Department				ORI 0530100 S0005		Date/Time Arrested 08/04/2014 14:00		OCA 14005928				
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos		Fingerprint Card Check Digit # (CKN)		Arrest Tract 600		Residence Tract 600		Arrest Number 30608				
A R R E S T E E	Name (Last, First, Middle) JONES, TRAVON EMMANUEL				D.O.B. 04/09/1991		Age 23	Race B	Sex M	Place of Birth		Country of Citizenship US	
	Current Address 5769 Pondarosa Rd, SANFORD, NC 273305514				Phone		Occupation		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident		<input type="checkbox"/> Unknown		
	Employer's Name PROVISION ACADEMY				Address SANFORD, NC 27330				Phone				
	Also Known As (Alias Names)				Hgt 5'08	Wgt 145	Hair BRO	Eyes BRO	Skin Tone DARK	Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos TATT LOWL ARM / HOV; TATT LOWR ARM /				Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name DWIGHT JONES				Address 1918 TRAMWAY RD, SANFORD, NC 27330				Phone				
A R R E S T	If Armed, Type of Weapon NONE / NOT APPLICABLE		<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 215 N FIFTH ST, SANFORD						
	Charge #1 Possession Of Marijuana		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 1810	Offense Jurisdiction (if not arresting agency)		Statute # 90-95(D)(4)	Warr. Date 08/04/2014				
	Charge #2 Possession Of Cocaine		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 1810	Offense Jurisdiction (if not arresting agency)		Statute # 90-95(A)(3)	Warr. Date 08/04/2014				
	Charge #3 Possession Of Drug Paraphernalia		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 1834	Offense Jurisdiction (if not arresting agency)		Statute # 90-113.22	Warr. Date 08/04/2014				
V E H I C L E	VYR	Make	Model	Style	Color	Plate #/State		VIN					
	Vehicle 1. <input type="checkbox"/> Left at Scene 2. <input type="checkbox"/> Released to other at owners request 3. <input type="checkbox"/> Impounded <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured <input type="checkbox"/> Name of Other <input type="checkbox"/> Place of storage Date/Time Inventory on File?												
C O N F I N E D	Date/Time Confined 08/04/2014 00:00:00		Place Confined LEE CO JAIL				Committing Magistrate HARRY B STRYFFELER						
	Type Bond <input type="checkbox"/> Written Promise <input checked="" type="checkbox"/> Secured <input type="checkbox"/> Unsecured <input type="checkbox"/> No Bond <input type="checkbox"/> Other		Bond Amount \$11,000.00		Trial Date 08/05/2014 00:00		Court Of City						
	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					
	B	Z	0.20	GM	COCAINE			Possess	Buy	Sale	Mfg.	Importing	Operating
	E	Z	15.00	GM	MARIJUANA			Y					
C O M P	Name: Complainant <input type="checkbox"/> Victim <input type="checkbox"/>				Address				Phone:				
S T A T U S	Arresting Officer Signature/ID # D'ANGELO, T. D. (259)				Date/Time Submitted 08/04/2014 14:00			Supervisor Signature BULLARD, G. R.					
	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							