

ARREST REPORT

A G E N C Y	Agency Name Morganton Department Public Safety				ORI 0120100 B0003		Date/Time Arrested 09/11/2014 17:17		OCA 201406076			
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos		Fingerprint Card Check Digit # (CKN)		Arrest Tract 1600		Residence Tract		Arrest Number 107161			
A R R E S T E E	Name (Last, First, Middle) COFFING, AMANDA DUNLOP				D.O.B. 04/14/1979		Age 35	Race W	Sex F	Place of Birth	Country of Citizenship US	
	Current Address 3008 Huffman Rd, LENOIR, NC 28561				Phone		Occupation		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident			
	Employer's Name UNEMPLOYED				Address				Phone			
	Also Known As (Alias Names)				Hgt 5'05	Wgt 250	Hair BRO	Eyes GRE	Skin Tone FAIR	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" 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 120G MORGANTON HEIGHTS BLVD,						
	Charge #1 Larceny All Other		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 0690	Offense Jurisdiction (if not arresting agency)		Statute # 14-72	Warr. Date 09/11/2014			
	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	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 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 10/28/2014 09:00		Court Of District		City MORGANTON			
	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					
							Possess	Buy	Sale	Mfg.	Importing	Operating
C O M P	Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>				Address				Phone:			
	On the above date and time I arrested Amanda Coffing on citation for the above charge.											
S T A T U S	Arresting Officer Signature/ID # SUTTLES, J. E. (S4260)				Date/Time Submitted 09/11/2014 17:17		Supervisor Signature TRIPLETT, R. E.					
	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						