

ARREST REPORT

AGENCY INFO	Agency Name Lenoir Police Department		ORI 0140200 C0015		Date/Time Arrested 08/19/2014 02:25		OCA 1404600					
	Taken <input checked="" type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) HP6505R	Arrest Tract 11		Residence Tract 12		Arrest Number 63442					
ARRESTEE INFO	Name (Last, First, Middle) ANGOVE, SCOTT CHRISTOPHER			D.O.B. 11/01/1982	Age 31	Race W	Sex M	Place of Birth HICKORY, NC	Country of Citizenship US			
	Current Address 1514 Hedden PI Nw, LENOIR, NC 28645			Phone 828-759-0763		Occupation Laborer		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown				
	Employer's Name SELF EMPLOYED			Address			Phone 828-758-4428					
	Also Known As (Alias Names)			Hgt 6'01	Wgt 165	Hair BRO	Eyes HAZ	Skin Tone LT	Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos SCAR LEFT EYE			Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name ANGOVE, TERESA JOAN			Address 1514 NW HEDDEN PL, LENOIR, NC 28645			Phone 828-758-0763					
ARREST	If Armed, Type of Weapon HANDGUN		<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 1115 BLOWING ROCK BLVD, LENOIR						
	Charge #1 Possess Firearm By Convicted Felon		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 1530	Offense Jurisdiction (if not arresting agency)		Statute # 14-415.1	Warr. Date 08/19/2014			
	Charge #2 Carry Concealed Handgun		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 1530	Offense Jurisdiction (if not arresting agency)		Statute # 14-269(A1)	Warr. Date 08/19/2014			
	Charge #3		<input type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts	DCI Code	Offense Jurisdiction (if not arresting agency)		Statute #	Warr. Date			
VEHICLE INFO	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? _____											
CONFINED	Date/Time Confined 08/19/2014 04:11:00		Place Confined CCDC			Committing Magistrate WALKER MATT						
	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 \$25,000.00	Trial Date 08/21/2014 00:00		Court Of District Court		City LENOIR				
	Assisting Officer Name/ID # COFFEY, S. M. 1			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											
DRUGS ARREST	DCI	Status	Quantity	Type Measure	Suspected Type		Check up to 3 types of activity for each					
							Possess	Buy	Sale	Mfg.	Importing	Operating
COMP	Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address				Phone:				
	The subject was handcuffed behind the back, secured in the rear of my patrol car, and transported to the Caldwell County Detention Center. [08/19/2014 09:50, BWOODY, 576, LPD]											
STATUS	Arresting Officer Signature/ID # COFFEY, M. S. (MC2013)			Date/Time Submitted 08/19/2014 05:00			Supervisor Signature ROBINSON, C. A.					
	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						