

ARREST REPORT

A G E N C Y	Agency Name Wake Forest Police Department		ORI 0920700		Date/Time Arrested 08/20/2014 13:35		OCA 14002123	
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) 3283HNA		Arrest Tract Z2		Residence Tract Z2		Arrest Number 13035
A R R E S T E E	Name (Last, First, Middle) WATKINS, DEVON OMAR			D.O.B. 11/27/1990		Age 23	Race B	Sex M
	Current Address 427 6th St, WAKE FOREST, NC 27587			Phone 919-554-2368		Occupation Unemployed		<input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input checked="" type="checkbox"/> Unknown
	Employer's Name			Address			Phone	
	Also Known As (Alias Names)			Hgt 5'10	Wgt 175	Hair BLK	Eyes BRO	Skin Tone DBR <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 HANDS, FEET, TEETH,		<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 N. ALLEN RD. // E. JUNIPER ST., WAKE FOREST			
	Charge #1 Assault On Female		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 0810	Offense Jurisdiction (if not arresting agency)		Statute # 14-33(C)(2) Warr. Date 08/20/2014
	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 08/20/2014 13:43:55		Place Confined WAKE COUNTY JAIL			Committing Magistrate MAGISTRATE		
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other		Bond Amount \$2,000.00	Trial Date 09/10/2014 00:00		Court Of Wake County District City RALEIGH		
	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:	
	Arrested and transported to WCJ without incident.							
S T A T U S	Arresting Officer Signature/ID # BERRIAN, J. R. (963)			Date/Time Submitted 08/20/2014 13:35		Supervisor Signature RICHARDS, D.		
	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			