

## ARREST REPORT

A G E N C Y	Agency Name <b>Sanford Police Department</b>		ORI <b>0530100 S0005</b>		Date/Time Arrested <b>08/14/2014 17:00</b>		OCA <b>13005695</b>	
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) <b>3195DBG</b>	Arrest Tract <b>800</b>		Residence Tract		Arrest Number <b>30678</b>	
A R R E S T E E	Name (Last, First, Middle) <b>POLK, CARLTON BROOKS</b>			D.O.B. <b>11/02/1969</b>	Age <b>44</b>	Race <b>W</b>	Sex <b>M</b>	Place of Birth
	Current Address <b>16581 Bogey Ct, WAGRAM, NC 283967002</b>			Phone		Occupation <b>Manager</b>		<input type="checkbox"/> Resident <input checked="" type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown
	Employer's Name <b>PRESTIGE LANDSCAPING</b>			Address		Phone		
	Also Known As (Alias Names)			Hgt <b>6'02</b>	Wgt <b>255</b>	Hair <b>BLN</b>	Eyes <b>BLU</b>	Skin Tone <input 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 <b>NONE / NOT APPLICABLE</b>		<input type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant		Place of Arrest <b>3484 CAMERON DR, SANFORD</b>			
	Charge #1 <b>True Bill Of Indictment</b>	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts <b>9</b>	DCI Code <b>2690</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>15A-305(B)(1)</b>	Warr. Date <b>07/23/2014</b>
	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			Committing Magistrate		
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other		Bond Amount <b>\$0.00</b>	Trial Date <b>10/13/2014 00:00</b>		Court Of <b>Superior Court</b>		City <b>SANFORD</b>
	Assisting Officer Name/ID # <b>0</b>			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 type="checkbox"/> Victim <input type="checkbox"/>			Address			Phone:	
S T A T U S	Arresting Officer Signature/ID # <b>BERRYMAN, W. P. (209)</b>			Date/Time Submitted <b>08/14/2014 17:00</b>		Supervisor Signature <b>LAYTON, H. L.</b>		
	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			