

ARREST REPORT

A G E N C Y	Agency Name BURKE COUNTY SHERIFF'S OFFICE				ORI 0120000		Date/Time Arrested 06/16/2014 10:39		OCA 201402399	
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos		Fingerprint Card Check Digit # (CKN)		Arrest Tract E		Residence Tract N		Arrest Number 104950	

A R R E S T E E	Name (Last, First, Middle) LAIL, GLENN DENIA LYNN				D.O.B. 10/26/1975		Age 38	Race W	Sex F	Place of Birth CATAWBA CO, NC		Country of Citizenship US
	Current Address 3918 E Burke Blvd Lot 4, CONNELLY SPRINGS, NC				Phone 828-228-4895		Occupation Phlebotomist		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident		<input type="checkbox"/> Unknown	
	Employer's Name CATAWBA VALLEY MEDICAL CENTER				Address HICKORY, NC				Phone			
	Also Known As (Alias Names) LUNSFORD, GLENNIE LYNN; LUNSFORD,				Hgt 5'02	Wgt 114	Hair BLO	Eyes BLU	Skin Tone FAIR	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk		
	Scars, Marks, Tattoos TATT LEFT ANKLE; TATT LEFT LEG / ROSE				Social Security #		OLN and State		Misc. # and Type			
	Nearest Relative Name LAIL, TANYA				Address 4140 HUFFMAN MTN RD, CONNELLY				Phone 828-409-1908			

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 type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant		Place of Arrest 201 S GREEN ST, MORGANTON			
	Charge #1 Larceny By Trick Misd		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 0690	Offense Jurisdiction (if not arresting agency)	Statute # 14-72(A)	Warr. Date 06/15/2014
	Charge #2 Damage To Personal Property		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 1400	Offense Jurisdiction (if not arresting agency)	Statute # 14-160	Warr. Date 06/15/2014
	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 DAVID WHITESIDES	
	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 07/09/2014 00:00	Court Of City District MORGANTON	
	Assisting Officer Name/ID # 0		Released By (Name/Department/ID #) HASSON, R. E.		Date/Time Released 06/16/2014 10:55:00	
	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 THIS DATE ARRESTED SUBJECT ON LISTED CHARGES. WRITTEN PROMISE									

S T A T U S	Arresting Officer Signature/ID # HASSON, R. E. (H6780)		Date/Time Submitted 06/16/2014 10:39		Supervisor Signature MCKINNEY, D. T.	
	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		