

## ARREST REPORT

A G E N C Y	Agency Name <b>Lenoir Police Department</b>		ORI <b>0140200 C0015</b>		Date/Time Arrested <b>07/10/2014 02:08</b>		OCA <b>1403841</b>					
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract <b>12</b>		Residence Tract <b>12</b>		Arrest Number <b>62637</b>				
A R R E S T E E	Name (Last, First, Middle) <b>WILSON, CASEY MORGAN</b>			D.O.B. <b>09/09/1988</b>	Age <b>25</b>	Race <b>W</b>	Sex <b>F</b>	Place of Birth <b>LENOIR, NC, NC</b>		Country of Citizenship <b>US</b>		
	Current Address <b>2151 Nw Frontier Way, LENOIR, NC 28645</b>			Phone <b>828-303-8247</b>		Occupation <b>Laborer</b>		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident		<input type="checkbox"/> Unknown		
	Employer's Name <b>UNEMPLOYED</b>			Address			Phone					
	Also Known As (Alias Names)			Hgt <b>5'08</b>	Wgt <b>200</b>	Hair <b>BRO</b>	Eyes <b>BLU</b>	Skin Tone <b>LT</b>	Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos <b>TATT LEFT HAND / STAR; TATT LEFT</b>			Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name <b>WILSON, AMY LOUISE</b>			Address <b>1251 FRONTIER WAY, LENOIR, NC 28645</b>			Phone <b>828-303-8247</b>					
A R R E S T	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</b>		<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 <b>321 NW MULBERRY ST, LENOIR</b>						
	Charge #1 <b>Hold Until Sober</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>4040</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>122 (C)-301</b>	Warr. Date <b>07/10/2014</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 <b>07/10/2014 02:35:00</b>		Place Confined <b>CCDC</b>			Committing Magistrate						
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input checked="" type="checkbox"/> No Bond <input type="checkbox"/> Other		Bond Amount <b>\$0.00</b>		Trial Date		Court Of _____ City					
	Assisting Officer Name/ID # <b>GREENE, D. P. 1</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 checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address				Phone:				
	The subject consumed an unknown substance. The subject was impaired and unable to care for herself. The subject was handcuffed in the front and seatbelted in the back seat of my patrol vehicle.  [07/11/2014 15:16, BWOODY, 576, LPD]											
S T A T U S	Arresting Officer Signature/ID # <b>SANDERS, T. G. (TS2013)</b>			Date/Time Submitted <b>07/10/2014 03:50</b>			Supervisor Signature <b>GREENE, D. P.</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						