ARREST REPORT

A	Agency Name							ORI		Date/Time Arrested OCA									
G I E N N F	Lenoir Police Department							014020			08/09/2014 (03:29 140			404444		
CO	Taken ☐ Prints Fingerprint Card Check Digit # (CKN)							Arrest Tract			Residence Tract			ll l					
Y	☐ Photos Name (Last, First, Middle)							12	D.O.B.	D.O.B. Age			Sex	- 	Place of Birth Country of				
	COFFEY, JORDAN THOMAS								02/06/1987		27	LENOIR							
A R R E S T E E	Current Address 112 Shadow Mountain Rd, ROAN MOUNTAIN							Phone				Occupation Laborer				Resident Unknown Non-Resident			
	Employer's Name UNEMPLOYED							Addres							Phone 828-				
	Also Known As (Alias Names) COFFEY, FATTS; COFFEY, JORDON T; CO Scars, Marks, Tattoos								5'11	1	Wgt Hair 180 BLO			BRO			kin Tone		
			attoos RIGH CHES		Social Secu	urity #		OLN and State Misc. # and Type											
	Nearest	Relative				Address 2698 PISGAH CHURCH RD, LENOIR, NC 828-7							ne 8-758-16	34					
ARREST - ZEO	If Armed	d, Type o	of Weapon	rimina	al Summons		ace of Arrest												
	NOT APPLICABLE/NONE Order for Arrest Charge #1								Warrant DCI Code		321 SW MULBERRY ST, LENOIR Offense Jurisdiction (if not arresting agency) Statute # Warr. Date								
	Hold Until Sober						1	Counts	4040	Oii	Offerise Jurisdiction (I			(ii not arresting agency)			C)-301	Warr. Date 08/09/2014	
	Charge #2							Counts	DCI Code	Off	fense .	Jurisdicti	on (if not a	(if not arresting agency)			Statute #	Warr. Date	
	Charge #3					☐ Fel ☐ Misd		Counts	DCI Code	Off	fense .	Jurisdicti	on (if not a	(if not arresting agency)			Statute #	Warr. Date	
	VYR Make Model				Style			Color	Plate #/State			VIN				<u> </u>			
	Vehicle 1. Left at Scene Secured Unsecure Date/Time 2. Released to other at owners request Name of Other																		
			Impounded	☐ Place of	f storage_											Inventory	on File?		
BOZD BOZD		ne Confi 9/201 4	ned 4 03:50:00		Committing Magistrate														
	Type Bond Bond Amount							Trial Date				ourt Of City							
	Gecured A No Borid Group						.00	00											
	Assisting Officer Name/ID # COFFEY, S. M. 1							Released By (Name/Department/ID #)					Date/Time Released						
Status Codes	us Live C Culte D Developed D Developed 7 Colored D Developed C Constativity Found D Found																		
	DOI	04-4	O	Torres	I			0		П	Check up to 3 types of activity for each								
	DCI Status Quantity Type Measure						Suspected Type						Possess Buy Sale				 		
									-										
R U G S																			
ST																			
	- 									-									
_												-							
C O M P	Name:	Comp	olainant⊠	Victim				Addre	SS							Ph	none:		
N	The defendant was found in an intoxicated state when released from Caldwell UNC Health Care. The defendant had no one to care for him. The defendant was handcuffed and placed in the back of my															-			
A R							Th	e defe	ndant was	har	ndcu	iffec	and	plac	ed i	n the	back c	of my	
R A T	Paci	.01 6	ar for tr	ansport	.acIOI	1.													
i	[08]	12/2	2014 13:09	, BWOOD	Y, 57	6, LPD]													
E	A	- 0"	0:				۱.	- m: :	-tu - d		п	0	d 6:						
S T	Arresting Officer Signature/ID # HAMRICK, J. E. (JH2011)							Date/Time Submitted				Supervisor Signature							
Å T	Case Status: Case Disposition:							08/09/2014 04:19 ROBINSON, C. A.											
υ s	☐ Further Inv. ☐ Cleared By Arrest / No Supplement						t Need	ded											
	☐ Ina		☑ Closed	Arrest /	ino investi	gation			Ш									D 0/0	

DCI-608F Rev. 3/92