ARREST REPORT

Α.	Agency Name								ORI I				Date/Time Arrested OCA									
G I E N N F	Lenoir Police Department							014020	0 C0015	07/2	07/23/2014 1											
N F C O Y	Taken Fingerprint Card Check Digit # (CKN) Prints Photos							Arrest Tract	Residence T							rest Num 5 2943	st Number 2943					
	Name (Last, First, Middle)								D.O.B.			Age Race Sex					Place of Birth Country of Citizenship					
A RR EST EE	BRYANT, JARRED GRANT Current Address								05/04/1988 26 Phone				N		VALDESE,NC, US							
	4620 Rudisill Dr, B, MORGANTON, NC 28655								828-764-4	Occupation None					□ Re	esident on-Resident	Unknown					
	Employer's Name UNEMPLOYED								Address										Phone 828- -			
	Also Known As (Alias Names)								Hgt	Wgt		l	RO BLU				kin Tone	Consume	d Drug/Alcohol			
	Scars, I	Marks, Ta	attoos	Т	Social Secu	5'08 urity #		228 BF OLN and S					MED		□ No □ Unk							
	TAT	Т	STOMACH	/ RALPI	H LAU																	
		Relative	Name , GARY			Addres	Address 329 SUNSET ST, HUDSON, NC							- 11	Phone 828-728-5754							
A R R F O	If Armed	d, Type o	of Weapon		Summons Place of Arrest																	
	Charge #1							cation Counts	Warrant DCI Code O		Offense Jurisdiction (if not arresting agency) Statute # Warr								Warr. Date			
	Breaking And Entering X Fel Misd						1		0510								14-54(A)					
	Charge #2							Counts	DCI Code	Offense Jurisdi			diction (if not arresting agency)				Statute #		Warr. Date			
	Charge	#3			☐ Fel ☐ Misd		Counts	DCI Code	Of	fense 、	Jurisdict	tion (if not arresting agency)				Statute #		Warr. Date				
V N E F H O	VYR Make Model			Model	Style			Color	Plate #/State				VIN						<u>U</u>			
	Vehicle		Left at Scene		Secured			hor	Date/Time_													
	2. Released to other at owners request Name of Other 3. Impounded Place of storage Inventory on File?																					
007F-7ED	Date/Tir	me Confi	ined		Committing Magistrate																	
	Type Bond Bond Amount Written Promise Unsecured							Trial Date				Court Of City										
	☐ Secured ☐ No Bond ☐ Other Assisting Officer Name/ID #						\$0.00 Released By (Name/Department/ID					ID#) Date/Time Released										
Status	ttus																					
D R A R U G S T							<u> </u>	Check up to 3 types of activity for each														
	DCI Status Quantity Type Measure							Suspecte				\dashv	Posse	ss	Buy	Sale	Mfg.	Importin	Operating			
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GS						\dashv		+														
•																						
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MOO	Name:	Comp	olainant□		Address						Phone:											
P N																						
A R R A T I V E																						
S T	Arrestin	-	Signature/ID #		Date	Date/Time Submitted				Super	visor Si	gnatu	ire									
T A T U S	SANDERS, T. G. (TS2013) Case Status: Case Disposition:								//	Sinatura												
	☐ Further Inv. ☐ Cleared By Arrest / No Supplement							led	d Arrestee Signature													
	☐ Ina		Closed	Arrest /	ino investi	yation													Day 2/0			

DCI-608F Rev. 3/92