## ARREST REPORT

Α.	Agency Name									Date/	Date/Time Arrested OCA						CA			
G I E N N F	Sanford Police Department							053010			09/04/2014 21:2			)	14006830					
CO	Taken Fingerprint Card Check Digit # (CKN)							Arrest Tract	t	esidence Tract				Arrest Number						
Υ	☐ Photos							900	D 0 D	700						0878  Place of Birth Country of				
- ZFO - ZFO - ZFO	Name (Last, First, Middle)  JONES, JONAH LEMONT								D.O.B. 02/08/197		Age Race Sex 42 B M				Place of Birth Country of Citizenship US					
	Current Address								Phone	r Resident							Unknown			
	1206 Pinehurst St, SANFORD, NC 27330 Employer's Name								SS S					None		∐ LI No	n-Resident Phone			
	Also Known As (Alias Names)								Hgt <b>6'01</b>	205		1	Hair Eyes BLK BRO			kin Tone	Drug/Alcohol  No Unk			
	Scars, N	Лarks, Та	attoos	T	Social Secu				and Sta				Misc. # and Type							
	Nearest Relative Name Address Phone																			
			WATSON		1			_	06 JEFFERSON ST, SANFORD, NC 27330											
A R R F O T								al Summons tation	Warrant	ll l			O S HORNER BLVD/DALRYMPLE ST,							
	Charge #1							Counts									Warr. Date			
	Posšession Of Marijuana								1810								5(D)(4)	09/04/2014		
	Charge #2 Driving While License Revoked							Counts			Offense Jurisdiction (if not arre			arresting	agency)		Statute #	Warr. Date		
	Charge #3							Counts	4010 DCI Code		Offense Inviendiation (it not one			arrostina	20-28(A			<b>09/04/2014</b> Warr. Date		
	Charge #3							Counts	DOICOGE	DCI Code   Ollerise			se Jurisdiction (if not arresting agency				Statute #			
	VYR	Ma	ake	Model	5	Style		Color	Plate #/Stat	е			VIN							
V N E F O																				
	Vehicle		Left at Scene		Secured	Unse		thor	Date/Time_											
	2. Released to other at owners request Name of Other Inventory on File? Inventory on File?																			
	Date/Tir	ne Confi	ined		Place Co	onfined			Committing Magistrate											
	Type Bond Bond Amount							Trial Date Co.					urt Of City							
	☐ Written Promise ☐ Unsecured ☐ Secured ☐ No Bond ☐ Other \$0.0						.00	10/28/2		District Court					SANFORD					
	Assisting Officer Name/ID #							Released By (Name/Department/II				:nt/ID #)				Date/Time Released				
Status	atus																			
D R A R U G S T						1200	Check up to 3 types of activity for ea									each				
	DCI Status Quantity Type Measure							Suspecte	ed Type	Possess				Buy	Sale	Mfg.	Importing	Operating		
												-+			-					
UTE																				
SŤ									_											
ŀ												-			<u> </u>					
Ī																				
С	Name: Complainant <b>⅓</b> Victim □							Address								l Pr	none:			
С О М					INA.				5 E Weatherspoon St, Sanford, NC 27330											
P N	STATE OF NORTH CAROLINA, 225 E Weatherspoon St, Sanford, NC 27330																			
A R																				
R A																				
T I V																				
E																				
S T	Arresting Officer Signature/ID #  AILERSON, K. J. (290)							te/Time Subr		.20	Supervisor Signature									
Α	Case Status: Case Disposition:							09/04	09/04/2014 21:20   MURPHY, S. K.											
T U S	☐ Further Inv. ☐ Cleared By Arrest / No Supplement ☐ Inactive ☐ Arrest / No Investigation						nt Need	ded	II *											
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DCI-608F Rev. 3/92