

ARREST REPORT

A G E N C Y	Agency Name Lenoir Police Department		ORI 0140200 C0015		Date/Time Arrested 06/14/2014 00:22		OCA 1403386					
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract 13		Residence Tract 99		Arrest Number 62116				
A R R E S T E E	Name (Last, First, Middle) CORNE, DANIEL RAY			D.O.B. 03/12/1973	Age 41	Race W	Sex M	Place of Birth LENOIR, NC	Country of Citizenship US			
	Current Address 6064 Log Cabin Pl, LENOIR, NC 28645			Phone 828-728-7881		Occupation Laborer		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name UNEMPLOYED			Address				Phone 828- -				
	Also Known As (Alias Names)			Hgt 5'06	Wgt 145	Hair BRO	Eyes BRO	Skin Tone LT	Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos TATT LEFT FOREARM / COBRA; TATT			Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name MCGUIRE, NANCY			Address 6064 LOG CABIN PL, LENOIR, NC 28645				Phone 828-292-3401				
A R R E S T	If Armed, Type of Weapon NOT APPLICABLE/NONE		<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 SW JASON PL/SW NORWOOD ST, LENOIR						
	Charge #1 Hold Until Sober		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 4040	Offense Jurisdiction (if not arresting agency)		Statute # 122 (C)-301	Warr. Date 06/14/2014			
	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 06/14/2014 00:33:00		Place Confined CCDC			Committing Magistrate						
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other		Bond Amount \$0.00		Trial Date		Court Of _____ City					
	Assisting Officer Name/ID # HAMRICK, J. E. 1			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					
	P	Z	3.00	DU	ADDERALL		Possess	Buy	Sale	Mfg.	Importing	Operating
C O M P	Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address				Phone:				
	The subject was handcuffed behind the back, secured in the rear of my patrol car, and transported to the Caldwell County Detention Center. The subject had consumed multiple malt beverages, was highly intoxicated, and unable to care for himself. [06/17/2014 09:45, BWOODY, 576, LPD]											
S T A T U S	Arresting Officer Signature/ID # COFFEY, M. S. (MC2013)			Date/Time Submitted 06/14/2014 04:00		Supervisor Signature ROBINSON, C. A.						
	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							