

ARREST REPORT

A G E N C Y	Agency Name Lenoir Police Department		ORI 0140200 C0015		Date/Time Arrested 08/25/2014 18:04		OCA 1404777						
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract 13		Residence Tract 13		Arrest Number 63611					
A R R E S T E E	Name (Last, First, Middle) COFFEY, SAVANNAH MARIE			D.O.B. 12/11/1995		Age 18		Race W	Sex F	Place of Birth	Country of Citizenship		
	Current Address 720 Kincaid Cir, 1, LENOIR, NC 28645			Phone 828-292-7051		Occupation Laborer		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident		<input type="checkbox"/> Unknown <input type="checkbox"/> Consumed Drug/Alcohol			
	Employer's Name UNEMPLOYED			Address					Phone 828- -				
	Also Known As (Alias Names)			Hgt 5'00	Wgt 189	Hair BLO	Eyes BLU	Skin Tone	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk				
	Scars, Marks, Tattoos TATT LEFT FOOT / MUSIC NOTE			Social Security #		OLN and State		Misc. # and Type					
	Nearest Relative Name GREENE, AMY TOWNSEND			Address 720-1 SW KINCAID CIR, LENOIR, NC 28645					Phone 828-292-7051				
A R R E S T	If Armed, Type of Weapon NOT APPLICABLE/NONE		<input type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant			Place of Arrest 720 SW KINCAID CIR, LENOIR							
	Charge #1 Assault (simple)		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 0810	Offense Jurisdiction (if not arresting agency)		Statute # 14.33(A)	Warr. Date 08/25/2014				
	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		Place Confined				Committing Magistrate						
	Type Bond <input checked="" 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 09/16/2014 00:00		Court Of District Court		City LENOIR				
	Assisting Officer Name/ID # 0				Released By (Name/Department/ID #) KING, S.				Date/Time Released 08/25/2014 18:30:00				
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 defendant was handcuffed behind the back and seat belted in the back of my patrol vehicle. [08/26/2014 14:50, BWOODY, 576, LPD]												
S T A T U S	Arresting Officer Signature/ID # HICKS, J. S. (JH1997)				Date/Time Submitted 08/25/2014 23:00			Supervisor Signature INGRAM, B. H.					
	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							