

## ARREST REPORT

A G E N C Y	Agency Name <b>Sanford Police Department</b>		ORI <b>0530100 S0005</b>		Date/Time Arrested <b>08/15/2014 00:01</b>		OCA <b>14006206</b>									
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract		Residence Tract <b>OUT</b>		Arrest Number <b>30699</b>								
A R R E S T E E	Name (Last, First, Middle) <b>PRUITT, MAURICE</b>			D.O.B. <b>09/12/1962</b>		Age <b>51</b>		Race <b>B</b>		Sex <b>M</b>		Place of Birth		Country of Citizenship		
	Current Address <b>4098 Fayetteville, RAEFORD, NC 28376</b>			Phone			Occupation			<input type="checkbox"/> Resident <input type="checkbox"/> Unknown		<input checked="" type="checkbox"/> Non-Resident				
	Employer's Name			Address			Phone									
	Also Known As (Alias Names)			Hgt <b>6'00</b>		Wgt <b>350</b>		Hair <b>GRY</b>		Eyes <b>BRO</b>		Skin Tone <b>LGT</b>		Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk		
	Scars, Marks, Tattoos			Social Security #			OLN and State			Misc. # and Type						
	Nearest Relative Name			Address			Phone									
A R R E S T	If Armed, Type of Weapon <b>NONE / NOT APPLICABLE</b>			<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 <b>3210 TRAMWAY RD, SANFORD</b>									
	Charge #1 <b>Poss W/intent To Sell A Controlled Substance</b>			<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd		Counts <b>1</b>		DCI Code <b>1810</b>		Offense Jurisdiction (if not arresting agency)			Statute # <b>90-95(A)</b>		Warr. Date <b>08/15/2014</b>	
	Charge #2 <b>Manufacture,sell,deliver A Controlled Substance</b>			<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd		Counts <b>1</b>		DCI Code <b>1810</b>		Offense Jurisdiction (if not arresting agency)			Statute # <b>90-95(A)(1)</b>		Warr. Date <b>08/15/2014</b>	
	Charge #3 <b>Trafficking In Opiates</b>			<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd		Counts <b>3</b>		DCI Code <b>1810</b>		Offense Jurisdiction (if not arresting agency)			Statute # <b>90-95(H)4</b>		Warr. Date <b>08/15/2014</b>	
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 <b>08/15/2014 00:00:00</b>			Place Confined <b>LCJ</b>			Committing Magistrate <b>RANDY CARTER</b>									
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other			Bond Amount <b>\$300,000.00</b>			Trial Date <b>08/18/2014 00:00</b>			Court Of <b>District Court</b>			City <b>SANFORD</b>			
	Assisting Officer Name/ID # <b>0</b>						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							
									Possess	Buy	Sale	Mfg.	Importing	Operating		
C O M P	Name: Complainant <input type="checkbox"/> Victim <input type="checkbox"/>			Address						Phone:						
	See Report.															
S T A T U S	Arresting Officer Signature/ID # <b>FOSTER, J. T. (266)</b>			Date/Time Submitted <b>08/15/2014 00:01</b>			Supervisor Signature <b>GODFREY, J. L.</b>									
	Case Status: <input checked="" type="checkbox"/> Further Inv. <input type="checkbox"/> Inactive <input type="checkbox"/> Closed			Case Disposition: <input checked="" type="checkbox"/> Cleared By Arrest / No Supplement Needed <input type="checkbox"/> Arrest / No Investigation			Arrestee Signature									

**ARREST REPORT (Additional Charges)**

Agency Name <b>Sanford Police Department</b>	ORI <b>0530100 S0005</b>	Date/Time Arrested <b>08/15/2014 00:01</b>	OCA <b>14006206</b>
Arrestee Name <b>PRUITT, MAURICE</b>			Arrest Number <b>30699</b>

Charge	Fel/Misd	Counts	DCI Code	(if not arresting agency) Offense Jurisdiction	Statute #	Warr. Date
<b>4) Possession Of Drug Paraphernalia</b>	<b>M</b>	<b>2</b>	<b>1834</b>		<b>90-113.22</b>	<b>08/15/2014</b>