## **ARREST REPORT**

NABDY NAC	Agency Name							ORI			Date/Time Arrested OCA									
ËŅ	Sanford Police Department  Taken Fingerprint Card Check Digit # (CKN)						_	053010 Arrest Tract		-	09/22/2014 Residence Tract				14007342 rrest Number					
ÇO	☐ Prints ☐ Photos							Arrest Tract				600			31041					
A R R E S T E E	Name (Last, First, Middle)								D.O.B.	D.O.B. Age		Race Sex			F	Place of B		Country of Citizenship		
	BALDWIN, TIANDRA LYNA  Current Address								11/21/199	4 1	9	В	F			п	us			
	626 Matthews St, SANFORD, NC 27330							Phone					Cashier							
	Employer's Name KANGAROO							Addres		2062 HORN			IER BLVD			Phone				
	Also Known As (Alias Names)								Hgt <b>5'03</b>	1	- I			Eyes BRO	Skin Tone   Consumed Drug/Alcoho			-		
	Scars, Marks, Tattoos							Social Secu	rity #		OLN and State				Misc. # and Type					
	Nearest Relative Name							Addres	s							Pho	ne			
	If Armed, Type of Weapon								II Plac	Place of Arrest										
A RRFO T	L Oil-view L Ci						Cit	al Summons tation	Warrant	II	2062 HORNER BLVD., SANFORD									
	Charge #1 <b>Awdw</b> ☐ Fel							Counts	DCI Code		Offense Jurisdiction (if not arresting				agency) Statute # Warr. I			Warr. Date		
	Charge #2						1	Counts	0810 DCI Code	Off	Offense Jurisdiction (if not arresting ag				agency)		3(C)(1) Statute #	<b>09/22/2014</b> Warr. Date		
	Simple Assault- Non Aggravated						1		0810						14-33(A)			09/22/2014		
						☐ Fel ☐ Misd		Counts	DCI Code	DCI Code Offense J			Jurisdiction (if not arresting agency)				Statute #			
V E F O	VYR	Ma	ake	Model	S	Style		Color	Plate #/State	,			VIN					<u> </u>		
	Vehicle		Left at Scene		Secured	☐ Unse			Date/Time_			[								
			<ul><li>☐ Released to ot</li><li>☐ Impounded</li></ul>	her at owners  Place of		☐ Nam	e of Ot	ther								Inventory	on File?			
CONF-NE	Date/Time Confined   Place Confined   O9/22/2014 17:15:00   LEE COUNTY J							Committing Magistrate  MARTY COLE												
	Type Bond Bond Amount							Trial Date 10/22/2014 09:00				Court Of City  District Court SANFORD								
	Secured St No Bond Other  Assisting Officer Name/ID #					<b>Ф</b> О	.00	<u> </u>		y (Name/Department/ID #)						Date/Time Released				
D Status	Total Control																			
Codes	L - Los	t S-	- Stolen R - R	zea	d B - Burned C - Counterfeit / Forg					Found	Ch	neck up to	3 types	of activity for	each					
	DCI Status Quantity Type M				leasure		Suspecte	d Type		Possess			Buy	Sale	Mfg.	Importing	П			
												_								
D R U G S																				
ST																				
												_								
C O M	Name: Complainant☐ Victim ☐								Address							Phone:				
P N	Warı	rant#	14CR0528	29 was	Serve	d on arr	est													
A R R A		Warrant# 14CR052829 was served on arrestee																		
T I V																				
S T	Arrestin	Arresting Officer Signature/ID #							Date/Time Submitted				Supervisor Signature							
	GRIFFIN, M. L. (301) Case Status: Case Disposition:							09/22	:30											
Α	Casa C	tatus:			sition:				Arrestee C	ianatura										
		ther Inv.		Case Dispos	By Arrest	/ No Supplemen	nt Need	ded	Arrestee S	ignature	9									

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