ARREST REPORT

Α.	Agency	Name			ORI			Date/Time Arrested OCA					4							
G I E N N F	Lenoir Police Department							014020	0 C0015	07/	12/2	014				1403889				
CO	Taken Fingerprint Card Check Digit # (CKN)							Arrest Tract			esidence Tract				Arrest Number					
Υ	☐ Photos							13	1 000	13						62726				
	Name (Last, First, Middle) MOSS, CHRISTOPHER ALAN								D.O.B. 05/12/1979		35 W M				Place of Birth Country of Citizenship US					
A R I N F O E S T E E	Current Address 1017 Sw Overlook Dr. I ENOIP NC 28645							Phone			Occupation Laborer					Resident Unknown				
	1017 Sw Overlook Dr, LENOIR, NC 28645 Employer's Name							Addres	is s				Laborer			Non-Resident Phone				
	UNEMPLOYED																828			
	Also Known As (Alias Names)							•	Hgt 5'09	1				Eyes GRN	RN LT		☑ Yes □ No □ Unk			
	Scars, M	∕larks, Ta	attoos				Social Secu	urity #	OLI		l and State			M	isc. # and Type					
			PPR ARM	/ DRAG	ON; T	ATT RIGH	1													
		Relative	e Name OKS, KAR		Addres		AVE SE. HILDERBRAN. NC 828-781-251						16							
			of Weapon	rimina	al Summons	II Discout Assert								J-701-2J	10					
	U On-view L Cit						Cit		Warrant	Warrant 1017			SW OVERLOOK DR,				LENOIR			
A I N E O T	Charge #1 Involuntary Commitment							Counts	DCI Code	DCI Code Off		Offense Jurisdiction (if not arresting agency) Statute						Warr. Date		
	Misd								4040	4040							122C-261			
	Charge #2							Counts	DCI Code	DCI Code Offense J			e Jurisdiction (if not arresting agency)				Statute #	Warr. Date		
- V E F O	Charge			☐ Fel ☐ Misd		Counts	DCI Code	Of	fense .	Jurisdicti	diction (if not arresting agency)				Statute #	Warr. Date				
	VYR Make Model					Style		Color	Plate #/State			VIN					Į			
	Vehicle		☐ Left at Scene		Secured				Date/Time_			l.								
НÓ			☐ Released to ot ☐ Impounded	ther at owners Place of		☐ Name	e of Ot	ther								Inventory	on File?			
CONFINE	Date/Tir	ne Confi	<u>·</u>		Place C	onfined							Con	nmitting I	Magistrate		OITT IIC:			
								WALKER MATT												
	Type Bond Written Promise Unsecured Society Of No Bond Other						00	Trial Date				Court Of City								
	Secured No Bond Other Assisting Officer Name/ID #						.00	Released By (Name/De			tment/ID #)				Date/Time Released					
D		RE, J					, , , , , , , , , , , , , , , , , , , ,													
Status Codes	L - Lost	s -	- Stolen R - R	ecovered	D - Dama	ged Z - Seiz	zed	B - Burne	d C - Counte	rfeit / Fo	orged	F - I	ound							
	DCI Status Quantity Type Measure							Suspecte	ed Type	Check up to 3 types of activity for each						1				
ARRAT AT DRUGS											Possess	Buy	Sale	Mfg.	Importing	Operating				
															1					
G TE																				
SŤ												+								
+		 												+						
İ																				
				Victim																
C O M P	Name:	Comp	olainant ∑		Address							Phone:								
N	The defendant was handcuffed behind his back and transported to Caldwell Memorial Hospital. He is															He is				
A R	beir	ng he	eld there	awaitin	ng a 2	4 hour f	aci	lity.												
R A T	[07 /	14/2	2014 14:38	B BWOOD	Y, 57	6, LPD1														
ľ	'	. –				•														
E																				
S T	Arresting Officer Signature/ID #							e/Time Subr					Supervisor Signature MOORE, J. E.							
Α	HAMBY, R. L. (RH2013) Case Status: Case Disposition:							07/14	4/2014 02:			IVIO	OKE,	J. E.	•					
T U	☐ Further Inv. ☐ Cleared By Arrest / No Supplemen						t Need	ded	Arrestee Signature											
S	S																			

DCI-608F Rev. 3/92