

## ARREST REPORT

A G E N C Y	Agency Name <b>Sanford Police Department</b>		ORI <b>0530100 S0005</b>		Date/Time Arrested <b>09/04/2014 00:03</b>		OCA <b>14006795</b>						
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract <b>500</b>		Residence Tract <b>600</b>		Arrest Number <b>30871</b>					
A R R E S T E E	Name (Last, First, Middle) <b>BROMELL, ALPHONSO</b>			D.O.B. <b>03/26/1965</b>		Age <b>49</b>		Race <b>B</b>	Sex <b>M</b>	Place of Birth	Country of Citizenship		
	Current Address <b>Talley Ave, SANFORD, NC 27330</b>			Phone		Occupation		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident					
	Employer's Name			Address			Phone						
	Also Known As (Alias Names)			Hgt <b>5'07</b>	Wgt <b>140</b>	Hair <b>BLK</b>	Eyes <b>BRO</b>	Skin Tone	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" 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 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 <b>200 S HORNER BLVD, SANFORD</b>								
	Charge #1 <b>Trespassing - 2nd Degree</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>2670</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>14-159.13</b>	Warr. Date <b>09/03/2014</b>				
	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 <b>09/04/2014 00:03:00</b>		Place Confined <b>LCJ</b>			Committing Magistrate <b>JIM EADS</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>\$1,000.00</b>		Trial Date <b>09/23/2014 09:00</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 checked="" type="checkbox"/>			Address <b>BOWEN, JOHN MORGAN</b>				Phone:					
				<b>5020 Simpson Dr, Sanford, NC 27330</b>									
S T A T U S	Arresting Officer Signature/ID # <b>SCHLITZ, A. O. (286)</b>			Date/Time Submitted <b>09/04/2014 00:03</b>			Supervisor Signature <b>YOUNG, J. B.</b>						
	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								