

## ARREST REPORT

A G E N C Y	Agency Name <b>BURKE COUNTY SHERIFF'S OFFICE</b>			ORI <b>0120000</b>		Date/Time Arrested <b>07/25/2014 08:40</b>		OCA <b>201403011</b>					
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos		Fingerprint Card Check Digit # (CKN)		Arrest Tract <b>F</b>		Residence Tract <b>D</b>		Arrest Number <b>105898</b>				
A R R E S T E E	Name (Last, First, Middle) <b>ROACH, NICOLE MICHELLE</b>				D.O.B. <b>09/02/1975</b>		Age <b>38</b>	Race <b>W</b>	Sex <b>F</b>	Place of Birth <b>OLATHE, KS</b>		Country of Citizenship <b>US</b>	
	Current Address <b>4075 Cobb St, MORGANTON, NC 28655</b>				Phone <b>269-993-8859</b>		Occupation <b>Unemployed</b>		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident		<input type="checkbox"/> Unknown <input type="checkbox"/> Consumed Drug/Alcohol		
	Employer's Name <b>UNEMPLOYED</b>				Address <b>N/A</b>				Phone <b>828- -</b>				
	Also Known As (Alias Names) <b>CHAPMAN, NICOLE</b>				Hgt <b>5'08</b>	Wgt <b>200</b>	Hair <b>BRO</b>	Eyes <b>BRO</b>	Skin Tone <b>FAIR</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk			
	Scars, Marks, Tattoos <b>TATT RIGH RIB CAGE / TRIBAL; TATT</b>				Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name <b>ROACH, DONNA</b>				Address <b>4209 PILSON RD, CAMERON, NC 28326</b>				Phone <b>919-895-8030</b>				
	If Armed, Type of Weapon <b>UNKNOWN/NOT STATED</b>				<input type="checkbox"/> On-View <input checked="" type="checkbox"/> Order for Arrest		<input type="checkbox"/> Criminal Summons <input type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest <b>201 S GREEN ST, MORGANTON</b>				
A R R E S T	Charge #1 <b>Probation Violation</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>2660</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>15A-305(B)(4)</b>		Warr. Date <b>07/23/2014</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		Place Confined				Committing Magistrate <b>DEBBIE CARSWELL</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>\$3,000.00</b>		Trial Date <b>07/29/2014 00:00</b>		Court Of <b>District</b>		City <b>MORGANTON</b>				
	Assisting Officer Name/ID # <b>0</b>				Released By (Name/Department/ID #) <b>HOLDER, B. I.</b>				Date/Time Released <b>07/25/2014 00:00:00</b>				
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:				
	I ARRESTED DEFENDANT NAMED ABOVE FOR CHARGES ABOVE. DEFENDANT WAS ADVISED OF HER NEXT COURT DATE. DEFENDANT WAS PROVIDED A COPY OF HER PAPER WORK. BOND WAS POSTED AT THE MAGISTRATE'S OFFICE BY DAVID LANN WITH ALWAYS BOND SERVICE. A PICTURE WAS TAKEN AND SHE WAS RELEASED.												
S T A T U S	Arresting Officer Signature/ID # <b>HOLDER, B. I. (H1167)</b>				Date/Time Submitted <b>07/25/2014 08:40</b>				Supervisor Signature <b>HUNTLEY, G. 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								