

## ARREST REPORT

A G E N C Y	Agency Name <b>Rocky Mount Police Department</b>		ORI <b>0330100 R0013</b>		Date/Time Arrested <b>09/07/2014 09:30</b>		OCA <b>2014007072</b>					
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) <b>BG0026R</b>	Arrest Tract <b>P15</b>		Residence Tract <b>P15</b>		Arrest Number <b>149992</b>					
A R R E S T E E	Name (Last, First, Middle) <b>FERGERSON, MICHAEL ANTHONY</b>			D.O.B.	Age <b>48</b>	Race <b>B</b>	Sex <b>M</b>	Place of Birth <b>NEW YORK, NY</b>	Country of Citizenship <b>US</b>			
	Current Address <b>1100 Bear Wallow Rd, ROCKY MOUNT, NC 27804</b>			Phone <b>252-316-1065</b>		Occupation <b>Maintenance</b>		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown				
	Employer's Name <b>ATLANTIC PACIFIC PROPERTY MANA</b>			Address <b>LYNN LAKE APTS RALEIGH, NC</b>			Phone					
	Also Known As (Alias Names) <b>FERGUSON, MICHAEL ANTHONY</b>			Hgt <b>5'07</b>	Wgt <b>215</b>	Hair <b>BLK</b>	Eyes <b>BRO</b>	Skin Tone <b>MED</b>	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos <b>TATT ABOR ARM / "MIKES BRONX</b>			Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name <b>JOHNSON, KELLY</b>			Address <b>1100 BEAR WALLOW, ROCKY MOUNT, NC</b>			Phone <b>252-316-1065</b>					
A R R E S T	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</b>		<input type="checkbox"/> On-View <input type="checkbox"/> Order for Arrest		<input type="checkbox"/> Criminal Summons <input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant		Place of Arrest <b>1100 BEAR WALLOW RD, ROCKY MOUNT</b>					
	Charge #1 <b>Rape</b>	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>0200</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>14-27/RAP</b>	Warr. Date <b>03/15/1994</b>				
	Charge #2 <b>Fugitive Warrant From Ny</b>	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>9910</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>005</b>	Warr. Date <b>09/07/2014</b>				
	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>09/07/2014 11:00:00</b>		Place Confined <b>NASH COUNTY JAIL</b>			Committing Magistrate <b>CHRISTOPHER MCPHATTER</b>						
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input checked="" type="checkbox"/> No Bond <input type="checkbox"/> Other		Bond Amount <b>\$0.00</b>	Trial Date <b>09/09/2014 09:00</b>		Court Of <b>District Court - Nash</b>		City <b>NASHVILLE</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 checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address				Phone:				
	<b>Same was NCIC wanted out of NY. Warrant and extradition were confirmed with NY.</b>											
S T A T U S	Arresting Officer Signature/ID # <b>KEETER, W. B. (5405)</b>			Date/Time Submitted <b>09/07/2014 09:30</b>			Supervisor Signature <b>SEIGHMAN, T. G.</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						