

## 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>08/04/2014 16:16</b>		OCA <b>2014005145</b>				
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos		Fingerprint Card Check Digit # (CKN)		Arrest Tract <b>P15</b>		Residence Tract <b>P15</b>		Arrest Number <b>149486</b>				
A R R E S T E E	Name (Last, First, Middle) <b>ALSTON, KELVIN TONNELL</b>				D.O.B.		Age <b>44</b>	Race <b>B</b>	Sex <b>M</b>	Place of Birth <b>NC</b>	Country of Citizenship <b>US</b>		
	Current Address <b>33 Live Oaks Trl, ROCKY MOUNT, NC 27804</b>				Phone <b>252-210-2019</b>		Occupation <b>Delivery</b>		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name <b>HAMPTON HOUSE</b>				Address <b>900 BENVENUE RD</b>				Phone <b>252-446-1670</b>				
	Also Known As (Alias Names) <b>K DOG</b>				Hgt <b>5'11</b>	Wgt <b>190</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>SCAR LOW EYE / NFD; TATT RIGH CHES /</b>				Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name <b>BOBBITT, JACKOLYN</b>				Address <b>33 COBBS MHP, ROCKY MOUNT, NC</b>				Phone <b>252-977-2104</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"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant		Place of Arrest <b>33 LIVE OAKS TRL, ROCKY MOUNT</b>								
	Charge #1 <b>Larceny - Shoplifting</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>0630</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>14-72D</b>	Warr. Date <b>07/05/2014</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>08/04/2014 11:00:00</b>		Place Confined <b>NASH CO. JAIL</b>				Committing Magistrate <b>YOLANDA SPELLER</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>\$500.00</b>		Trial Date <b>09/08/2014 09:00</b>		Court Of <b>District Court - Nash</b>		City <b>ROCKY MOUNT</b>				
	Assisting Officer Name/ID # <b>MOORE, M. D. 2</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>NEW WARRANT IN NCAWARE</b>  <b>14CR052791-WFA-MISDEMEANOR LARCENY-COURT DATE 09-08-14 AT 305 COKEY RD. ROCKY MOUNT</b>												
S T A T U S	Arresting Officer Signature/ID # <b>GRAY, M. A. (6527)</b>				Date/Time Submitted <b>08/04/2014 16:16</b>			Supervisor Signature <b>KEETER, W. 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							