

## 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>07/11/2014 11:53</b>		OCA <b>2014005330</b>					
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos		Fingerprint Card Check Digit # (CKN)		Arrest Tract <b>P41</b>		Residence Tract		Arrest Number <b>149106</b>				
A R R E S T E E	Name (Last, First, Middle) <b>BELL, DANNY RAY</b>				D.O.B.		Age <b>61</b>	Race <b>B</b>	Sex <b>M</b>	Place of Birth <b>ROCKY MOUNT, NC</b>	Country of Citizenship <b>US</b>		
	Current Address <b>120 S Glendale Dr, ROCKY MOUNT, NC 27801</b>				Phone <b>252-212-1774</b>		Occupation		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name <b>DISABLE</b>				Address				Phone <b>252-446-4651</b>				
	Also Known As (Alias Names)				Hgt <b>5'11</b>	Wgt <b>195</b>	Hair <b>BLK</b>	Eyes <b>BRO</b>	Skin Tone <b>DAR</b>	Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos <b>SCAR BOTH KNEE</b>				Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name <b>BELL, ELLEN</b>				Address <b>RT 6, TARBORO, NC 27886</b>				Phone <b>252-823-4496</b>				
A R R E S T	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</b>		<input checked="" type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest <b>853 STARLING WAY, ROCKY MOUNT</b>								
	Charge #1 <b>Dwi - Alcohol And/or Drugs</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>2100</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>20-138</b>	Warr. Date <b>07/10/2014</b>				
	Charge #2 <b>Driving While License Is Suspended/revoked</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>4010</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>20-28 (A)</b>	Warr. Date <b>07/10/2014</b>				
	Charge #3 <b>Speeding</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>4010</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>20-141 (M)</b>	Warr. Date <b>07/10/2014</b>				
V E H I C L E	VYR <b>2002</b>	Make <b>MIT</b>	Model <b>LANCER</b>	Style <b>4D</b>	Color <b>BLU</b>	Plate #/State <b>BLH1526 NC 2014</b>	VIN <b>JA3AJ26E62U054087</b>						
	Vehicle 1. <input type="checkbox"/> Left at Scene <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured 2. <input type="checkbox"/> Released to other at owners request <input type="checkbox"/> Name of Other _____ 3. <input type="checkbox"/> Impounded <input checked="" type="checkbox"/> Place of storage <b>COASTAL</b> Inventory on File? <b>N</b>												
C O N F I N E D	Date/Time Confined <b>07/11/2014 00:00:00</b>		Place Confined				Committing Magistrate <b>CHRISTOPHER MCPHATTER</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>\$2,000.00</b>		Trial Date <b>09/11/2014 00:00</b>		Court Of <b>District Court - Nash</b>		City <b>ROCKY MOUNT</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 type="checkbox"/>				Address				Phone:				
	<b>DWI: Citation number c30677846</b>  <b>DWLRL and Speeding: Citation number c30677846</b>												
S T A T U S	Arresting Officer Signature/ID # <b>INGRAM, P. M. (4829)</b>				Date/Time Submitted <b>07/11/2014 11:53</b>			Supervisor Signature <b>BALLARD, C. L.</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							