

ARREST REPORT

A G E N C Y	Agency Name Lenoir Police Department		ORI 0140200 C0015		Date/Time Arrested 08/23/2014 00:55		OCA 1404721	
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract 11		Residence Tract 99		Arrest Number 63543
A R R E S T E E	Name (Last, First, Middle) CHADWICK, SABRINA LYTRELL			D.O.B. 08/01/1983		Age 31	Race B	Sex F
	Current Address 323 Harrington St Apt 8c, LENOIR, NC 28645			Phone 828-610-3340		Occupation Laborer		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident
	Employer's Name UNEMPLOYED			Address			Phone	
	Also Known As (Alias Names)			Hgt 5'06	Wgt 240	Hair BLK	Eyes BRO	Skin Tone MED <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk
	Scars, Marks, Tattoos TATT RIGH ARM / D ANNA			Social Security #		OLN and State		Misc. # and Type
	Nearest Relative Name			Address			Phone	
A R R E S T	If Armed, Type of Weapon NOT APPLICABLE/NONE		<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 215 BLOWING ROCK BLVD, LENOIR			
	Charge #1 Fail To Appear		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 2640	Offense Jurisdiction (if not arresting agency) BUMCOMBE		Statute # 15A-305 Warr. Date 06/30/2014
	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 08/23/2014 02:12:00		Place Confined CCDC		Committing Magistrate TYISINGER WILLIAM S			
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input type="checkbox"/> No Bond <input checked="" type="checkbox"/> Other		Bond Amount \$651.00	Trial Date 08/29/2014 00:00	Court Of District Court		City ASHEBORO - RAND	
	Assisting Officer Name/ID # 0			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:	
	The subject was handcuffed behind the back, secured in the rear of my patrol car, and transported to the Caldwell County Detention Center. The subject received a cash bond. [08/25/2014 14:19, BWOODY, 576, LPD]							
S T A T U S	Arresting Officer Signature/ID # COFFEY, M. S. (MC2013)			Date/Time Submitted 08/23/2014 04:00		Supervisor Signature BLACHE, N. C.		
	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			