## ARREST REPORT

| A                 | Agency Name  |           |               |          |   |              |                      | ORI                                |                     |  | Date/Time Arrested OCA   |                  |            |  |                      | CA         |                     |                           |  |
|-------------------|--|-----------|---------------|----------|---|--------------|----------------------|------------------------------------|---------------------|--|--|------------------|------------|--|----------------------|------------|---------------------|---------------------------|--|
| G I<br>E N<br>N F | Sanford Police Department  |           |               |          |   |              |                      | 053010                             |                     | 06/06/2014                                   |  |                  | 11:53      |  | 140                  | 14004258   |                     |                           |  |
| CO                | Taken Fingerprint Card Check Digit # (CKN)   |           |               |          |   |              |                      | Arrest Tract                       | t                   |  | Residence Tract  |                  |            | Arrest Nur                               |                      |            |                     |                           |  |
| Y                 | ☐ Photos   |           |               |          |   |              |                      | 600                                | D.O.D.              |  | 600  |                  | .1 0       | 3010                                     |                      |            | inth II             | 0                         |  |
| A RR EST EE       | Name (Last, First, Middle)  WEAVER, SHERRIE NICOLE   |           |               |          |   |              |                      |                                    | D.O.B.<br>06/20/197 |  | Age<br><b>35</b>   | Race<br><b>B</b> | Sex F      |  | F                    | Place of B |                     | Country of<br>Citizenship |  |
|                   | Current Address  |           |               |          |   |              |                      |                                    | Phone               |  |  |                  | Occupation |  |                      |            |                     | Unknown                   |  |
|                   | 402 Maple Av, SANFORD, NC 27330 Employer's Name  |           |               |          |   |              |                      | Addres                             | iss .               |  |  |                  |            |  |                      | ∏ ∐ No     | n-Resident<br>Phone |                           |  |
|                   |  |           |               |          |   |              |                      |                                    |                     |  |  |                  |            |  |                      |            |                     |                           |  |
|                   | Also Known As (Alias Names)  |           |               |          |   |              |                      | •                                  | Hgt <b>5'04</b>     | 1  | 0 BRO B  |                  |            | Eyes<br>BRO                              | O                    |            |                     | Drug/Alcohol  No 🛂 Unk    |  |
|                   | Scars, Marks, Tattoos  |           |               |          |   |              |                      |                                    | urity #             |  | OLN and State  |                  |            |  | Misc. # and Type     |            |                     |                           |  |
|                   | Nearest Relative Name  |           |               |          |   |              |                      |                                    |                     |  |  |                  |            |  | II Phono             |            |                     |                           |  |
|                   | Nearest  | Relative  | e Name        |          | Addres  |              | Phone                |                                    |                     |  |  |                  |            |  |                      |            |                     |                           |  |
| A I N E S T       | If Armed, Type of Weapon    ☑ On-View  ☐ Crim  |           |               |          |   |              |                      | al Summons                         | Plac                | Place of Arrest                              |  |                  |            |  |                      |            |                     |                           |  |
|                   | PERSONAL WEAPONS   |           |               |          |   |              | ☐ Cit                |                                    | Warrant             |  | 402 MAPLE AV, SANFORD  |                  |            |  |                      |            |                     |                           |  |
|                   | Charge #1  Rdo - Resist, Delay Or Obstruct An Officer  |           |               |          |   |              |                      | Counts                             | DCI Code            | Off  | Offense Jurisdiction (if not arresting agency)  Statute # Warr |                  |            |  |                      |            | Warr. Date          |                           |  |
|                   | <u> </u>   |           |               |          |   |              | 1                    |                                    | 2690                |  |  |                  |            |  |                      | 14         | 06/06/2014          |                           |  |
|                   | Charge #2  |           |               |          |   | ☐ Fel ☐ Misd |                      | Counts DCI Code                    |                     | Off  | Offense Jurisdiction (if not arre                              |                  |            |  | ng agency) Statute # |            |                     | Warr. Date                |  |
|                   | Charge   | #3        |               |          |   | ☐ Fel ☐ Misd |                      | Counts                             | DCI Code            | offense Jurisdiction (if not arresting agenc |  |                  |            | agency)                                  | S                    | Warr. Date |                     |                           |  |
| V E F<br>H O      | VYR Make Model   |           |               | 5        | Style   |              |                      | Plate #/State                      | ,                   | VIN  |  |                  |            |  |                      | <u>'</u>   |                     |                           |  |
|                   | Vehicle  |           | Left at Scene | _        | Secured   | ☐ Unse       |                      |                                    | Date/Time_          |  |  |                  | !          |  |                      |            |                     |                           |  |
|                   | 2. ☐ Released to other at owners request ☐ Name of Other   |           |               |          |   |              |                      |                                    |                     |  |  |                  |            |  |                      |            |                     |                           |  |
| CONFINE           | Date/Tir   | me Confi  |               | riace of | Place Co  |              |                      | Committing Magistrate              |                     |  |  |                  |            |  |                      |            |                     |                           |  |
|                   | 06/06/2014 11:53:00 LEE COUNTY JA  |           |               |          |   |              |                      |                                    |                     |  |  | MARTY COLE       |            |  |                      |            |                     |                           |  |
|                   | Type Bond Bond Amount  Written Promise Unsecured Secured Department Office Secured Department Department Secured Secured Department Secured Department Department Secured Department Depart |           |               |          |   |              | 00                   | Trial Date <b>07/24/</b> 2         |                     | Court Of City  District Court SANFORD        |  |                  |            |  |                      |            |                     |                           |  |
|                   | ☐ Secured ☐ No Bond ☐ Other  Assisting Officer Name/ID #   |           |               |          |   |              | .00                  | L.                                 |                     |  |  |                  |            |  | Date/Time Released   |            |                     |                           |  |
| D                 | Assisting Officer Name/ID #  |           |               |          |   |              |                      | Released By (Name/Department/ID #) |                     |  |  |                  | )          |  |                      |            | ate/Time released   |                           |  |
| Status<br>Codes   | tatus<br>L - Lost S - Stolen R - Recovered D - Damaged Z - Seized B - Burned C - Counterfeit / Forged F - Found  |           |               |          |   |              |                      |                                    |                     |  |  |                  |            |  |                      |            |                     |                           |  |
| ARRIEST<br>DRUGS  | DCI Status Quantity Type Measure   |           |               |          |   |              |                      | Suspecte                           | ed Type             |  |  |                  |            | Check up to 3 types of activity for each |                      |            |                     |                           |  |
|                   | . туро п   |           |               |          |   |              |                      |                                    |                     |  | Possess  |                  |            | Buy                                      | Sale                 | Mfg.       | Importing           | Operating                 |  |
|                   |  |           |               |          |   |              |                      |                                    |                     |  |  | -                |            |  |                      |            |                     |                           |  |
|                   |  |           |               |          |   |              |                      |                                    |                     |  |  |                  |            |  |                      |            |                     |                           |  |
| U TE              |  |           |               |          |   |              |                      |                                    |                     |  |  |                  |            |  |                      |            |                     |                           |  |
| ST                |  |           |               | -        |   |              |                      |                                    |                     | -  |  |                  |            |  |                      |            |                     |                           |  |
| -                 |  |           |               |          |   |              |                      |                                    |                     |  |  | +                |            |  |                      |            |                     |                           |  |
| İ                 |  |           |               |          |   |              |                      |                                    |                     |  |  |                  |            |  |                      |            |                     |                           |  |
|                   | Name: Complainant <b>∑</b> Victim □  |           |               |          |   |              |                      | 1                                  |                     |  |  |                  |            |  |                      | 1 5        |                     |                           |  |
| C<br>O<br>M       | Name:  |           |               | 1        | Address  225 E Weatherspoon St, Sanford, NC 27330 |              |                      |                                    |                     |  |  |                  |            |  |                      |            |                     |                           |  |
| P                 | SIA  | ILE C     | F NORTH       | CAROL    | INA,  |              |                      | 225                                | E Weathe            | erspo  | oon  | St, 3            | Santo      | d, N                                     | 3 2/3                | 30         |                     |                           |  |
| N<br>A            |  |           |               |          |   |              |                      |                                    |                     |  |  |                  |            |  |                      |            |                     |                           |  |
| R<br>R            |  |           |               |          |   |              |                      |                                    |                     |  |  |                  |            |  |                      |            |                     |                           |  |
| A<br>Ţ            |  |           |               |          |   |              |                      |                                    |                     |  |  |                  |            |  |                      |            |                     |                           |  |
| V<br>E            |  |           |               |          |   |              |                      |                                    |                     |  |  |                  |            |  |                      |            |                     |                           |  |
|                   | Arrestin   | g Officer | Signature/ID# | Date     | e/Time Subr                                       |              | Supervisor Signature |                                    |                     |  |  |                  |            |  |                      |            |                     |                           |  |
| S<br>T<br>A       | AILERSON, K. J. (290)  |           |               |          |   |              |                      |                                    | 6/2014 11           | :53  |  |                  | RPHY       |  | <b>(</b> .           |            |                     |                           |  |
| T<br>U            | Case Status: Case Disposition:   |           |               |          |   |              |                      |                                    | Arrestee Signature  |  |  |                  |            |  |                      |            |                     |                           |  |
| S                 | ☐ Further Inv. ☐ Inactive ☐ Closed ☐ Arrest / No Investigation   |           |               |          |   |              | nt Need              | aea                                | 1                   |  |  |                  |            |  |                      |            |                     |                           |  |
|                   | DCI co   |           | _             | -        | _   | _            |                      | _                                  |                     |  |  |                  | _          |  |                      |            |                     | D 0/0                     |  |

DCI-608F Rev. 3/92