

ARREST REPORT

A G E N C Y	Agency Name BURKE COUNTY SHERIFF'S OFFICE		ORI 0120000		Date/Time Arrested 09/17/2014 22:57		OCA 201403794	
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract C		Residence Tract F		Arrest Number 107339
A R R E S T E E	Name (Last, First, Middle) WEEKS, RITA GAIL			D.O.B. 12/24/1978		Age 35	Race W	Sex F
	Current Address 3204 Antioch Rd, MORGANTON, NC 28690			Phone 828-391-8559		Occupation		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident
	Employer's Name UNEMPLOYEED			Address			Phone	
	Also Known As (Alias Names)			Hgt 5'04	Wgt 165	Hair BLO	Eyes BRO	Skin Tone Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk
	Scars, Marks, Tattoos			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 checked="" type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest 2160 NC 18-US 64, MORGANTON			
	Charge #1 Non Support		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 2020	Offense Jurisdiction (if not arresting agency)		Statute # 14-322 Warr. Date 06/27/2011
	Charge #2 Non Support		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 2020	Offense Jurisdiction (if not arresting agency)		Statute # 14-322 Warr. Date 09/26/2012
	Charge #3 Non Support		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 2020	Offense Jurisdiction (if not arresting agency)		Statute # 14-322 Warr. Date 06/27/2011
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 09/17/2014 20:03:00		Place Confined BURKE CATAWBA JAIL			Committing Magistrate ERIC DUCKWORTH		
	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 \$1,650.00		Trial Date 09/22/2014 09:00		Court Of District City MARSHALL	
	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:	
	On September 17 2014 , I served Rita Weeks with three non-support warrants. I advised Mrs. Weeks of her charges and court date. Mrs. Weeks is confined at Burke Catawba Jail at this time. At this time I have no further.							
S T A T U S	Arresting Officer Signature/ID # GRADY, P. K. (G3729)			Date/Time Submitted 09/17/2014 22:57		Supervisor Signature MCKINNEY, D. T.		
	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			