

ARREST REPORT

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|--------------------------------------|---|--------------------------------------|-----------------------------|---|---|---------------------------------------|---|-----------------------------------|--|--|---------------|------------------------------|-----------|---|--|
| A G E N C Y | Agency Name Sanford Police Department | | ORI 0530100 S0005 | | Date/Time Arrested 06/22/2014 18:48 | | OCA 14004690 | | | | | | | | |
| | <input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos | Fingerprint Card Check Digit # (CKN) | | Arrest Tract 800 | | Residence Tract OUT | | Arrest Number 30247 | | | | | | | |
| A R R E S T E E | Name (Last, First, Middle) MCLEAN, JAMES LEVON | | | D.O.B. 02/07/1996 | | Age 18 | | Race B | | Sex M | | Place of Birth | | Country of Citizenship US | |
| | Current Address 20 Gibbs Rd, LILLINGTON, NC 27546 | | | Phone | | | Occupation | | | <input type="checkbox"/> Resident <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> Non-Resident | | | | | |
| | Employer's Name | | | Address | | | Phone | | | | | | | | |
| | Also Known As (Alias Names) | | | Hgt ' | | Wgt 0 | | Hair | | Eyes | | 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 NONE / NOT APPLICABLE | | | <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 3310 NC 87 HWY, SANFORD | | | | | | | | |
| | Charge #1 Larceny | | | <input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd | | Counts 1 | | DCI Code 0690 | | Offense Jurisdiction (if not arresting agency) | | Statute # 14-72(A) | | Warr. Date 06/22/2014 | |
| | Charge #2 Possessing Stolen Goods | | | <input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd | | Counts 1 | | DCI Code 1330 | | Offense Jurisdiction (if not arresting agency) | | Statute # 14-71.1 | | Warr. Date 06/22/2014 | |
| | 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 06/22/2014 18:26:00 | | | Place Confined LEE CO JAIL | | | Committing Magistrate MARTY COLE | | | | | | | | |
| | 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 \$500.00 | | Trial Date 07/22/2014 09:00 | | Court Of District Court | | City SANFORD | | | | | |
| | 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 | |
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| C O M P | Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/> | | | Address WALMART, 3310 Nc 87 Hwy, Sanford, NC 27330 | | | | | | Phone: | | | | | |
| | NARRATIVE | | | | | | | | | | | | | | |
| S T A T U S | Arresting Officer Signature/ID # MURDOCK, F. R. (154) | | | Date/Time Submitted 06/22/2014 18:48 | | | Supervisor Signature MURPHY, S. K. | | | | | | | | |
| | 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 | | | | | | | | |