

ARREST REPORT

AGENCY	Agency Name Lenoir Police Department		ORI 0140200 C0015		Date/Time Arrested 07/15/2014 15:31		OCA 1403967		
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)	Arrest Tract 13		Residence Tract 99		Arrest Number 62788		
ARRESTEE	Name (Last, First, Middle) COFFEY, COLLIN ERVIN			D.O.B. 03/05/1991	Age 23	Race W	Sex M	Place of Birth LENOIR, NC	Country of Citizenship US
	Current Address 1175 Newton Ln, 8, GRANITE FALLS, NC 28630			Phone 828-729-2505		Occupation Laborer		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident	
	Employer's Name UNEMPLOYED			Address				Phone 828- -	
	Also Known As (Alias Names)			Hgt 6'04	Wgt 173	Hair BRO	Eyes BLU	Skin Tone LT	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk
	Scars, Marks, Tattoos TATT FRON CHEST / HONDA SYMBOL			Social Security #		OLN and State		Misc. # and Type	
	Nearest Relative Name COFFEY, JANET ELIZABETH			Address 719 SW JASON PL, LENOIR, NC 28645				Phone 828-729-1719	
ARREST	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 719 SW JASON PL, LENOIR				
	Charge #1 Assault On A Female	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 0810	Offense Jurisdiction (if not arresting agency)		Statute # 14-33(C)(2)	Warr. Date 06/26/2014	
	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	
VEHICLE	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? _____								
CONFINED	Date/Time Confined		Place Confined			Committing Magistrate KEENE JILL			
	Type Bond <input type="checkbox"/> Written Promise <input checked="" type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other		Bond Amount \$1,000.00	Trial Date 07/22/2014 00:00		Court Of District Court		City LENOIR	
	Assisting Officer Name/ID # GREENE, D. P. 1		Released By (Name/Department/ID #) KEENE, J.			Date/Time Released 07/15/2014 17:10:00			
Status Codes	L - Lost S - Stolen R - Recovered D - Damaged Z - Seized B - Burned C - Counterfeit / Forged F - Found								
DRUGS	DCI	Status	Quantity	Type Measure	Suspected Type		Check up to 3 types of activity for each		
							Possess	Buy	
							Sale	Mfg.	
							Importing	Operating	
COMP	Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address			Phone:		
	The subject was handcuffed behind his back and seated in the back seat of my patrol vehicle. [07/16/2014 14:36, BWOODY, 576, LPD]								
STATUS	Arresting Officer Signature/ID # SANDERS, T. G. (TS2013)			Date/Time Submitted 07/15/2014 17:50		Supervisor Signature MILLS, C. 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				