ARREST REPORT

Α.	Agency Name							ORI	Date/	Date/Time Arrested OCA									
G I E N N F	Rocky Mount Police Department							033010	0 R0013	07/	31/2	014	17:15	201	2014004441				
N F C O	Taken Fingerprint Card Check Digit # (CKN) ☐							Arrest Tract	t	Resid	dence ⁻	Fract	Arrest I			st Number			
Ŷ	☐ Photos BF9940R							P34	P43						149441				
4 RR EST EE	Name (Last, First, Middle) WINSTEAD, ROBERT DEANGELO								D.O.B.		17 B M				Place of Birth ROCKY MOUNT, NC US				
	901 Hill St, ROCKY MOUNT, NC 27801							Phone 252-366-1326					Occupation Student Unknown Non-Resident Unknown					Unknown	
	ROCKY MOUNT SENIOR HIGH							Addres		KY MOUNT				Phone					
	Also Known As (Alias Names)								Hgt 5'08	1	-			Eyes BRO	- 1	kin Tone MED	II	Drug/Alcohol	
	Scars, Marks, Tattoos							Social Secu	urity #	OLN and			State			Aisc. # and Type			
	I	t Relative	Name NGELA		I	Address 901 HILL ST, ROCKY MOUNT, NC 27801						Pho 25 2	ne 2-366-13 2	26					
A R R F O T	If Armond Time of Weenen											ce of Arrest							
							☐ Cit		Warrant		330 S CHURCH ST, ROCKY MOUNT								
	Charge #1 Residential B&e - Forcible Entry Misd						1	Counts	DCI Code 0510	Ottense Jurisdic			iction (if not arresting agency)			Statute # 14-51/BURR		Warr. Date	
	Charge #2 Larceny						1	Counts	DCI Code 0600			e Jurisdiction (if not arresting agency)			agency)	Statute # 14-72A		Warr. Date	
	Charge #3							Counts	DCI Code	Of	ffense	Jurisdicti	liction (if not arresting agency)			Statute #		Warr. Date	
Н А С О Н Д —	VYR Make Model			(Style		Color	Plate #/State			VIN				•	=======================================			
	Vehicle	Vehicle 1. Left at Scene Secured Unsecure Date/Time 2. Released to other at owners request Name of Other																	
٥			☐ Impounded	Place of	•											Inventory	on File?		
CONFINED	Date/Time Confined							Committing Magistrate JAMES HILL											
	Type Bond Bond Amount						. 00	Trial Date Court					city Prior Court - Edge TARBORO						
	Secured No Bond Other \$5,500 Assisting Officer Name/ID #					.00	00 08/06/2014 09:00 S Released By (Name/Department/ID #)				Date/Time Released								
Status	L - Los	t S.	- Stolen R - R	ecovered	D - Damag	0 ged Z - Sei	zod	B - Burne	d C - Counte	rfoit / E	orgod	E .	Found						
D R A R U G S T			<u> </u>	ecovered	D - Dallia	Zeu	B - Buille	u C - Counte	1	Ourid	С	heck up to	o 3 types	of activity for e	each				
	DCI Status Quantity Type Measure						Suspected Type					- "	Possess	Buy	Sale	Mfg.	Importing	Operating	
		 										+							
ST																			
												_							
C O M P	Name: Complainant ⊠ Victim □							Addre		Phone:									
N A R A T I V E	NCAV	VARE	WARRANT #	14CR523	321 -	EDGE		•											
	Arresting Officer Signature/ID # KEARNEY, L. I. (5135)						Det	Date/Time Submitted				Supervisor Signature INGRAM, P. M.							
S T	Arrestin	ig Officer	-	Y <i>(</i> #	135)		Date			15					1				
S T A T U	Case S		KEARNE	Case Dispos	sition:	/ No Supplemer		07/3	1/2014 18:		e				1.				

DCI-608F Rev. 3/92