

## ARREST REPORT

A G E N C Y	Agency Name <b>Sanford Police Department</b>		ORI <b>0530100 S0005</b>		Date/Time Arrested <b>09/17/2014 17:56</b>		OCA <b>14007209</b>																	
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos		Fingerprint Card Check Digit # (CKN)		Arrest Tract <b>900</b>		Residence Tract <b>777B</b>																	
	Arrest Number <b>30992</b>																							
A R R E S T E E	Name (Last, First, Middle) <b>MCLEAN, QUINTIN LAMAR</b>				D.O.B. <b>02/03/1987</b>		Age <b>27</b>		Race <b>B</b>		Sex <b>M</b>		Place of Birth <b>LEE COUNTY, NC</b>		Country of Citizenship <b>US</b>									
	Current Address <b>2517 Summerfield Dr, SANFORD, NC 27332</b>				Phone		Occupation		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident		<input type="checkbox"/> Unknown													
	Employer's Name <b>UNEMPLOYED</b>				Address				Phone															
	Also Known As (Alias Names) <b>MCLEAN, QUINTIN LAMAR</b>				Hgt <b>6'00</b>		Wgt <b>170</b>		Hair <b>BLK</b>		Eyes <b>BRO</b>		Skin Tone <b>MED</b>		Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk									
	Scars, Marks, Tattoos <b>SCAR LEFT NECK; TATT FRON HAND /</b>				Social Security #		OLN and State		Misc. # and Type															
	Nearest Relative Name <b>MCLEAN, PAT</b>				Address <b>2232 EVETON LN, SANFORD, NC 27330</b>				Phone															
A R R E S T	If Armed, Type of Weapon <b>PERSONAL WEAPONS</b>		<input checked="" type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest <b>2820 EAMES DR, SANFORD</b>																			
	Charge #1 <b>Assault On A Female</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd		Counts <b>1</b>		DCI Code <b>0810</b>		Offense Jurisdiction (if not arresting agency)		Statute # <b>14-33(C)(2)</b>		Warr. Date <b>09/16/2014</b>											
	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											
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 <b>09/17/2014 00:00:00</b>		Place Confined <b>LEE COUNTY JAIL</b>				Committing Magistrate <b>JIM EADS</b>																	
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input checked="" type="checkbox"/> No Bond <input type="checkbox"/> Other		Bond Amount <b>\$0.00</b>		Trial Date <b>10/22/2014 00:00</b>		Court Of <b>District Court</b>		City <b>SANFORD</b>															
	Assisting Officer Name/ID # <b>0</b>				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 type="checkbox"/> Victim <input type="checkbox"/>				Address				Phone:															
S T A T U S	Arresting Officer Signature/ID # <b>RODGERS, B. J. (120)</b>				Date/Time Submitted <b>09/17/2014 17:56</b>				Supervisor Signature <b>SINGER, R. E.</b>															
	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																			