

ARREST REPORT

A G E N C Y	Agency Name Chapel Hill Police Department				ORI 0680100 C0004		Date/Time Arrested 08/12/2014 07:53		OCA 1409935				
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos		Fingerprint Card Check Digit # (CKN)		Arrest Tract		Residence Tract		Arrest Number 32386				
A R R E S T E E	Name (Last, First, Middle) LEAKE, CEDRICK				D.O.B.		Age 35	Race B	Sex M	Place of Birth			
	Current Address 100 West Rosemary Street, CHAPEL HILL, NC 27516				Phone		Occupation		<input type="checkbox"/> Resident <input checked="" type="checkbox"/> Non-Resident		<input type="checkbox"/> Unknown		
	Employer's Name UNEMPLOYED				Address				Phone				
	Also Known As (Alias Names)				Hgt 6'00	Wgt 180	Hair BLK	Eyes BRO	Skin Tone DBR	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" 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 UNKNOWN/NOT STATED		<input type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input checked="" type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest 903 GROVE STREET, CHAPEL HILL								
	Charge #1 Soliciting Without A Permit		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 2680	Offense Jurisdiction (if not arresting agency)		Statute # CO 13-2	Warr. Date				
	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		Place Confined				Committing Magistrate						
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other		Bond Amount \$0.00		Trial Date 09/23/2014 09:00		Court Of District Criminal Court		City CHAPEL HILL				
	Assisting Officer Name/ID # 0		Released By (Name/Department/ID #) FUNK, D. A.				Date/Time Released 08/12/2014 15:30:00						
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:				
	Subject was cited and released on the above charge during a suspicious person investigation.												
S T A T U S	Arresting Officer Signature/ID # FUNK, D. A. (6388)				Date/Time Submitted //		Supervisor Signature BRITT, D. N.						
	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								