

ARREST REPORT

A G E N C Y	Agency Name Sanford Police Department		ORI 0530100 S0005		Date/Time Arrested 06/18/2014 21:10		OCA 14004582	
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract 900		Residence Tract 700		Arrest Number 30213
A R R E S T E E	Name (Last, First, Middle) THOMPSON, JAHID NY-SHAUN			D.O.B. 04/07/1993		Age 21	Race B	Sex M
	Current Address 100 Beatties Ford Rd, CHARLOTTE, NC 28216			Phone		Occupation		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident
	Employer's Name DOMINOS PIZZA			Address		Phone		<input type="checkbox"/> Unknown <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk
	Also Known As (Alias Names)			Hgt 5'04	Wgt 0	Hair BLK	Eyes BRO	Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input 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 type="checkbox"/> Order for Arrest <input checked="" type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest 699 COX MADDOX RD/MT PISGAH CHURCH RD,			
	Charge #1 Possession Of Marijuana		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 1810	Offense Jurisdiction (if not arresting agency)		Statute # 90-95(D)(4)
	Charge #2 Possession Of Drug Paraphernalia		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 1834	Offense Jurisdiction (if not arresting agency)		Statute # 90-113.22
	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 08/18/2020 14:09		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	
	E	Z	20.00	GM	MARIJUANA		Y	
C O M P	Name: Complainant <input type="checkbox"/> Victim <input checked="" type="checkbox"/>			Address			Phone:	
	State Of North Carolina							
S T A T U S	Arresting Officer Signature/ID # COX, A. T. (211)			Date/Time Submitted 06/18/2014 21:10		Supervisor Signature GENTHE, W. C.		
	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			