

## ARREST REPORT

AGENCY INFO	Agency Name <b>Sanford Police Department</b>		ORI <b>0530100 S0005</b>		Date/Time Arrested <b>07/17/2014 17:00</b>		OCA <b>14003128</b>					
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) <b>315DBL</b>	Arrest Tract <b>600</b>		Residence Tract		Arrest Number <b>30450</b>					
ARRESTEE INFO	Name (Last, First, Middle) <b>GILLIAM, JOSEPH DALEXANDRO</b>			D.O.B. <b>02/21/1993</b>	Age <b>21</b>	Race <b>B</b>	Sex <b>M</b>	Place of Birth <b>FLINT, MI</b>	Country of Citizenship <b>US</b>			
	Current Address <b>184 Grady W Lane, CARTHAGE, NC</b>			Phone		Occupation		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name <b>ASHWOOD ESTATES</b>			Address <b>1115 CARTHAGE ST</b>			Phone					
	Also Known As (Alias Names)			Hgt <b>5'05</b>	Wgt <b>155</b>	Hair <b>BLK</b>	Eyes <b>BRO</b>	Skin Tone <b>DARK</b>	Consumed Drug/Alcohol <input 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					
ARREST	If Armed, Type of Weapon <b>PERSONAL WEAPONS</b>		<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 <b>225 E WEATHERSPOON ST, SANFORD</b>							
	Charge #1 <b>Fraud- Financial Transaction Card Theft</b>		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts <b>2</b>	DCI Code <b>1150</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>14-113.9</b>	Warr. Date <b>07/01/2014</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			
VEHICLE INFO	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 <b>07/17/2014 18:30:00</b>		Place Confined <b>LEE COUNTY JAIL</b>			Committing Magistrate <b>HARRY B STRYFFELER</b>						
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other		Bond Amount <b>\$15,000.00</b>	Trial Date <b>07/18/2014 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											
DRUGS ARREST	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 type="checkbox"/> Victim <input type="checkbox"/>			Address				Phone:				
STATUS	Arresting Officer Signature/ID # <b>BERRYMAN, W. P. (209)</b>			Date/Time Submitted <b>07/17/2014 17:00</b>		Supervisor Signature <b>LAYTON, H. L.</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							