

## ARREST REPORT

A G E N C Y	Agency Name <b>BURKE COUNTY SHERIFF'S OFFICE</b>		ORI <b>0120000</b>		Date/Time Arrested <b>08/31/2014 17:11</b>		OCA <b>201403532</b>				
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract <b>G</b>		Residence Tract <b>G</b>		Arrest Number <b>106901</b>			
A R R E S T E E	Name (Last, First, Middle) <b>MOSES, RILEY PAUL</b>			D.O.B. <b>08/22/1987</b>		Age <b>27</b>	Race <b>W</b>	Sex <b>M</b>	Place of Birth <b>MECKLENBURG CO, NC</b>	Country of Citizenship <b>US</b>	
	Current Address <b>5288 Jenkins Rd, LOT 1, MORGANTON, NC 28655</b>			Phone <b>828-390-6512</b>		Occupation <b>Laborer</b>		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident			
	Employer's Name <b>ROCKY TOP TREE SERVICE</b>			Address <b>MORGANTON, NC 28655</b>			Phone <b>828-439-0821</b>				
	Also Known As (Alias Names)			Hgt <b>5'08</b>	Wgt <b>155</b>	Hair <b>BRO</b>	Eyes <b>BRO</b>	Skin Tone <b>FAIR</b>	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk		
	Scars, Marks, Tattoos <b>SCAR LEFT CHEEK / SMALL SCAR</b>			Social Security #		OLN and State		Misc. # and Type			
	Nearest Relative Name <b>GREENE, MARY</b>			Address <b>216 FERNWOOD DR, MORGANTON, NC</b>			Phone <b>828-584-0232</b>				
A R R E S T	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</b>		<input type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input checked="" type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest <b>5288 JENKINS RD - LOT 1, MORGANTON</b>						
	Charge #1 <b>Fail To Appear/ Failure To Comply</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>2690</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>15A-305</b>	Warr. Date <b>07/21/2014</b>		
	Charge #2 <b>Fail To Appear/ Failure To Comply</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>2690</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>15A-305</b>	Warr. Date <b>07/15/2014</b>		
	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>08/31/2014 18:11:53</b>		Place Confined <b>BURKE/CATAWBA JAIL</b>			Committing Magistrate <b>DEBBIE CARSWELL</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>\$5,000.00</b>	Trial Date <b>09/08/2014 09:00</b>		Court Of <b>District</b>		City <b>MORGANTON</b>			
	Assisting Officer Name/ID # <b>SMITH, N. K. 1</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 checked="" type="checkbox"/> Victim <input type="checkbox"/>				Address				Phone:		
	I served two Orders for Arrest to Riley Moses at the Burke County Magistrate's Office. I advised Mr. Moses of his court dates and bonds, and confined him into the Burke/Catawba Jail. Mr. Moses must also appear in Burke County District Court on 09-10-2014 for 13-CR-001675.										
S T A T U S	Arresting Officer Signature/ID # <b>ANDERSON, D. T. (A2564)</b>			Date/Time Submitted <b>08/31/2014 17:50</b>			Supervisor Signature <b>MCKINNEY, D. T.</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					