

ARREST REPORT

A G E N C Y	Agency Name Lenoir Police Department		ORI 0140200 C0015		Date/Time Arrested 07/22/2014 22:59		OCA 1404117	
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)	Arrest Tract 12		Residence Tract 99		Arrest Number 62927	
A R R E S T E E	Name (Last, First, Middle) MCCLURE, JAMES HARRY JR			D.O.B. 02/25/1959	Age 55	Race W	Sex M	Place of Birth
	Current Address 16 Duke Power Rd, C, GRANITE FALLS, NC			Phone		Occupation Laborer		<input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input checked="" type="checkbox"/> Unknown
	Employer's Name UNEMPLOYED			Address			Phone 828- -	
	Also Known As (Alias Names)			Hgt 6'00	Wgt 165	Hair BRO	Eyes BRO	Skin Tone LT 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 NOT APPLICABLE/NONE		<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 321 SW MULBERRY ST, LENOIR			
	Charge #1 Hold Until Sober	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 4040	Offense Jurisdiction (if not arresting agency)		Statute # 122 (C)-301	Warr. Date 07/22/2014
	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 07/22/2014 23:15:00		Place Confined CCDC			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		Court Of _____ City		
	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	
							Possess	Buy
							Sale	Mfg.
							Importing	Operating
C O M P	Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>			Address			Phone:	
	The Offender was handcuffed behind the back and secured in the rear of my patrol unit. The Offender consumed multiple malt beverages, was highly intoxicated, unable to care for himself and had no other place to go. [07/23/2014 11:28, BWOODY, 576, LPD]							
S T A T U S	Arresting Officer Signature/ID # CRISP, M. S. (MC2010)			Date/Time Submitted 07/23/2014 00:00		Supervisor Signature MOORE, J. E.		
	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			