

ARREST REPORT

A G E N C Y	Agency Name Lenoir Police Department		ORI 0140200 C0015		Date/Time Arrested 09/19/2014 23:24		OCA 1405303					
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)	Arrest Tract 13		Residence Tract 13		Arrest Number 64110					
A R R E S T E E	Name (Last, First, Middle) GREEN, CHRISTINA LYNNE			D.O.B. 10/01/1986	Age 27	Race W	Sex F	Place of Birth MIAMI, FL	Country of Citizenship US			
	Current Address 2619 Sw Friendswood Ct, LENOIR, NC 28645			Phone 828-572-3265		Occupation Laborer		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name UNEMPLOYED			Address				Phone				
	Also Known As (Alias Names)			Hgt 5'02	Wgt 150	Hair BRO	Eyes GRN	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 NICHOLAS CLARK			Address 2619 FRIENDSWOOD CT, LENOIR, NC				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 2619 SW FRIENDSWOOD CT, 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 # 122C-301	Warr. Date 09/19/2014				
	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 09/19/2014 23:35:00		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 checked="" 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:				
	Defendant was placed in handcuffs and transported per department policy. She had consumed several malt beverages prior to being taken into custody. She had no one to contact and no one to care for her. her BAC at the jail was .21. [09/22/2014 11:27, BWOODY, 576, LPD]											
S T A T U S	Arresting Officer Signature/ID # GREENE, C. L. (CG2010)			Date/Time Submitted 09/21/2014 06:15		Supervisor Signature INGRAM, B. H.						
	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							