

ARREST REPORT

A G E N C Y	Agency Name Rocky Mount Police Department		ORI 0330100 R0013		Date/Time Arrested 08/15/2014 20:34		OCA 2014006323					
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) BF9975V	Arrest Tract P34		Residence Tract P21		Arrest Number 149675					
A R R E S T E E	Name (Last, First, Middle) JOHNSON, JOAN DELOIS			D.O.B.	Age 60	Race B	Sex F	Place of Birth ENFIELD, NC	Country of Citizenship US			
	Current Address 1220 Sunset Ave, ROCKY MOUNT, NC 27804			Phone 843-505-1287		Occupation Csa Assistant		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown				
	Employer's Name HOME CARE MANAGEMENT			Address TARBORO NC 27886				Phone 252- -				
	Also Known As (Alias Names)			Hgt 5'07	Wgt 130	Hair BLK	Eyes BRO	Skin Tone MED	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk			
	Scars, Marks, Tattoos MOLE RIGH LIP / NATURAL BORN MOLE			Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name KENNETH JAMISON			Address 16 LABROSSE ST, DETROIT, MI				Phone				
A R R E S T	If Armed, Type of Weapon NOT APPLICABLE/NONE		<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 330 S CHURCH ST, ROCKY MOUNT							
	Charge #1 Murder	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts 1	DCI Code 0110	Offense Jurisdiction (if not arresting agency)		Statute # 14-17/MUR	Warr. Date 08/15/2014				
	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 08/15/2014 21:50:00		Place Confined NASH COUNTY JAIL			Committing Magistrate ROBIN JOYNER						
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input checked="" type="checkbox"/> No Bond <input type="checkbox"/> Other		Bond Amount \$0.00	Trial Date 08/19/2014 09:00		Court Of District Court - Nash		City NASHVILLE				
	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:				
	Warrant # - Nash - 14CR53503 Charge: First Degree Murder											
S T A T U S	Arresting Officer Signature/ID # HAYMORE, J. D. (5613)			Date/Time Submitted 08/15/2014 23:48		Supervisor Signature CARLTON, B. R.						
	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							