

## 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>09/07/2014 16:34</b>		OCA <b>201403620</b>					
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos		Fingerprint Card Check Digit # (CKN)		Arrest Tract <b>F</b>		Residence Tract <b>F</b>		Arrest Number <b>107066</b>				
A R R E S T E E	Name (Last, First, Middle) <b>THOMAS, ERIN MELISSA</b>				D.O.B. <b>03/11/1981</b>		Age <b>33</b>	Race <b>W</b>	Sex <b>F</b>	Place of Birth <b>MARYLAND, MD</b>	Country of Citizenship <b>US</b>		
	Current Address <b>1635 Butler Hill Rd, MORGANTON, NC 28655</b>				Phone <b>828-803-7674</b>		Occupation <b>Na</b>		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown				
	Employer's Name <b>UNEMPLOYED</b>				Address				Phone				
	Also Known As (Alias Names) <b>THOMAS, ERIN</b>				Hgt <b>5'08</b>	Wgt <b>125</b>	Hair <b>BLO</b>	Eyes <b>HAZ</b>	Skin Tone <b>MED</b>	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos <b>TATT LOW BACK / STARS WITH SWIRLS;</b>				Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name <b>SPARKS, SHEILA</b>				Address <b>5217 JENKINS ROAD, MORGANTON, NC</b>				Phone <b>828-437-2682</b>				
	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</b>		<input type="checkbox"/> On-View <input checked="" type="checkbox"/> Order for Arrest <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest <b>1635 BUTLER HILL RD, MORGANTON</b>								
A R R E S T	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>07/14/2014</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				
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>09/07/2014 18:20:00</b>		Place Confined <b>BURKE CATAWBA</b>				Committing Magistrate <b>DAVID WHITESIDES</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>\$1,000.00</b>		Trial Date <b>09/08/2014 09:00</b>		Court Of <b>District</b>		City <b>MORGANTON</b>				
	Assisting Officer Name/ID # <b>MOORE, S. A. 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:				
	On 09-07-2014, I took into custody, Erin Thomas, on an order for arrest at the Burke County Magistrate's Office. The subject was advised of the charge, date, time and location to appear in court. The subject was then confined at the Burke-Catawba Detention Facility on a \$1,000.00 secured bond.												
S T A T U S	Arresting Officer Signature/ID # <b>MCMURTRAY, W. O. (M4481)</b>				Date/Time Submitted <b>09/07/2014 16:34</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 type="checkbox"/> Cleared By Arrest / No Supplement Needed <input checked="" type="checkbox"/> Arrest / No Investigation			Arrestee Signature							