## **ARREST REPORT**

A G I	Agency Name										Date/Time Arrested					OCA			
G I E N N F	BURKE COUNTY SHERIFF'S OFFICE  Taken Fingerprint Card Check Digit # (CKN)							0120	000		06/24/2014 11 Residence Tract				rest Nur	01402517			
ÇÖ	☐ Prints ☐							F		OUT						05277			
	Name (Last, First, Middle)  LAIL, MICHAEL DEAN							0	D.O.B. 4/09/1970		.ge	Race W	Sex M	CATA	Place of Birth Country of Citizenship US				
A	Current Address 164 Teague Mhp, TAYLORSVILLE, NC 28681							Phone <b>828-495-2</b> (			Occupation 42				☐ Resident ☐ Unknown ☐ Non-Resident				
R R I E N	Employ	er's Nam	e		Address						Phone								
S F T O	OSELF EMPLOYED Also Known As (Alias Names)								Hgt	Wgt		Ha		1 1		Skin Tone Consumed Drug/Alcohol		•	
E	Scars, Marks, Tattoos							Social Security	5'11   #	170 OLN a		BR and Sta				MED ☐ Yes ☑ No ☐ Misc. # and Type			
		Relative	Name NNIE		Address 3918 EAST BURKE BLVD L-2, ICARD, NC 828-397							<sub>ne</sub> 3-397-359	99						
A I N E F O T	If Armed, Type of Weapon ☐ On-View ☐ Co							Summons	Place	e of Ar	of Arrest								
	Charge #1						Citat	tion 🔯 Wa	Warrant DCI Code		201 S GREEN ST, MORGANTON  Offense Jurisdiction (if not arresting agency) Statute # Warr. Da							Warr. Date	
	Assault On A Female						1		0810	BURKI		,				14-3	3(C)(2)	06/16/2014	
	Charge #2					☐ Fel ☐ Misd		Counts DCI Code		Offe	Offense Jurisdiction (if not arre				agency)	S	Statute #	Warr. Date	
	Charge #3					☐ Fel ☐ Misd	C	ounts	DCI Code	Offe	Offense Jurisdiction (if not arres				agency)	cy) Statute #		Warr. Date	
V N E F	VYR Make Model			S	Style		Color	Plate #/State		VIN									
	Vehicle 1. Left at Scene Secured Unsecure Date/Time  2. Released to other at owners request Name of Other																		
		3. [	Impounded	Place of	storage		e oi Otik	اد								Inventory	on File?		
ОПZ-1200 О208	Date/Time Confined Place Confined BURKE CNTY (						COUF	OURT					Committing Magistrate LYNN WEBB						
	Type Bond Bond Amount  Written Promise Unsecured \$500						Trial Date 00 07/09/2014 00:00			Court Of City  District BURKE									
	Assisting Officer Name/ID #					Relea			ed By (Name/Department/ID #)  ER, B. R.			) [				Date/Time Released 06/24/2014 10:25:10			
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C C O M P	Name: ON CLAIT	Comp  Comp  CLAI	Quantity Quantity	Type M  Victim  ED MICH  M #2 TC  THE MA	leasure	AIL WITH	A W	Address ARRANT THE JUD	FOR ARRI	EST MEED M	ON IR L	ASSI	Possess  AULT  B BON	ON FE	Sale	Ph	Importing  none:  HEN TOC  RED. I	Operating  OK MR  THEN	
Status Codes D A R R E S T C O M P N A R R R	Name: ON CLAIT	Comp  Comp  CLAI	Quantity  Quantity  Represented the second of the second o	Type M  Victim  ED MICH  M #2 TC  THE MA	leasure	AIL WITH	A W	Address ARRANT THE JUD	FOR ARRI	EST MEED M	ON IR L	ASSI	Possess  AULT  B BON	ON FE	Sale	Ph	Importing  none:  HEN TOC  RED. I	Operating  OK MR  THEN	
Status Codes D AR RUT S T C O M P N A R R A T I V	Name:  ON CLAIT TOOR	Comp UNE TO C LAI THE I	Quantity  Quantity  Quantity  I SERV  QUANT TO  L BACK TO  NFO I HAD  Signature/ID #	Victim D  ED MICH M #2 TO THE MA	leasure  IAEL Li  GISTRA	AIL WITH	A W ET, CE T	Address ARRANT THE JUD O BOND	FOR ARRI GE PLACI OUT. I (	EST M	ON IR L	ASSA ATLS: LAI	Possess  AULT  B BON  IL AL  visor Sign	ON FED AT	Sale	Ph	Importing  none:  HEN TOC  RED. I	Operating  OK MR  THEN	
Status Codes D ARRES T COMP NARRATIVE	Name:  ON CLAIT TOOR ALLT	Comp  UNE L TO C LAI THE I	Quantity	Victim U  ED MICH M #2 TO THE MA	leasure  LAEL LA GET A GISTRA	AIL WITH	A W	Address ARRANT THE JUD O BOND Time Submitte	FOR ARRI GE PLACI	EST ED M GGAVE	ON MR L	ASSA ATLS: LAI	Possess  AULT  B BON  IL AL  visor Sign	ON FED AT	Sale	Ph	Importing  none:  HEN TOC  RED. I	Operating  OK MR  THEN	

DCI-608F Rev. 3/92