

ARREST REPORT

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|---|---|--------|---|---|--|---|---|--|--|---|-------------------------------------|-----------|-----------|
| A G E N C Y | Agency Name BURKE COUNTY SHERIFF'S OFFICE | | | ORI 0120000 | | Date/Time Arrested 07/17/2014 16:15 | | OCA 201402900 | | | | | |
| | <input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos | | Fingerprint Card Check Digit # (CKN) | | Arrest Tract F | | Residence Tract F | | Arrest Number 105692 | | | | |
| A R R E S T E E | Name (Last, First, Middle) WHITE, JEREMIAH CONEAILUS | | | | D.O.B. 05/04/1973 | | Age 41 | Race B | Sex M | Place of Birth BURKE COUNTY, NC | Country of Citizenship US | | |
| | Current Address 1885 Skyland Dr, MORGANTON, NC 28655 | | | | Phone 828-430-1349 | | Occupation Maintenance | | <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident | | | | |
| | Employer's Name LAVIZ GROUP | | | | Address | | | | Phone 828-430-9525 | | | | |
| | Also Known As (Alias Names) WHITE, JEREMIAH CONEAILUS | | | | Hgt 6'00 | Wgt 290 | Hair BLK | Eyes BRO | Skin Tone DARK | Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk | | | |
| | Scars, Marks, Tattoos TATT RGT ARM / SUPERMAN; TATT LEFT | | | | Social Security # | | OLN and State | | Misc. # and Type | | | | |
| | Nearest Relative Name WHITE, ROSA | | | | Address | | | | 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 checked="" type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input type="checkbox"/> Warrant | | | Place of Arrest 201 S GREEN ST, MORGANTON | | | | | | |
| | Charge #1 Fail To Appear/ Failure To Comply | | | <input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd | Counts 1 | DCI Code 2690 | Offense Jurisdiction (if not arresting agency) | | Statute # 15A-305 | Warr. Date 04/07/2014 | | | |
| | Charge #2 Fail To Appear/ Failure To Comply | | | <input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd | Counts 1 | DCI Code 2690 | Offense Jurisdiction (if not arresting agency) | | Statute # 15A-305 | Warr. Date 04/07/2014 | | | |
| | Charge #3 | | | <input type="checkbox"/> Fel <input type="checkbox"/> Misd | Counts | DCI Code | Offense Jurisdiction (if not arresting agency) | | Statute # | Warr. Date | | | |
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| 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 07/17/2014 16:45:00 | | | Place Confined BCDCF | | | Committing Magistrate LYNN WEBB | | | | | | |
| | 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 \$20,000.00 | | Trial Date 09/22/2014 00:00 | | Court Of Superior Court | | City MORGANTON | | | |
| | 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 |
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| C O M P | Name: Complainant <input type="checkbox"/> Victim <input type="checkbox"/> | | | | Address | | | | Phone: | | | | |
| | | | | | | | | | | | | | |
| N A R R A T I V E | ON THIS DATE ARRESTED SUBJECT ON LISTED CHARGES. | | | | | | | | | | | | |
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| S T A T U S | Arresting Officer Signature/ID # HASSON, R. E. (H6780) | | | | Date/Time Submitted 07/17/2014 16:15 | | | Supervisor Signature ROGERS, S. S. | | | | | |
| | 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 | | | | | | | |