

ARREST REPORT

A G E N C Y	Agency Name Lenoir Police Department		ORI 0140200 C0015		Date/Time Arrested 07/28/2014 22:45		OCA 1404233					
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract 12		Residence Tract 12		Arrest Number 63067				
A R R E S T E E	Name (Last, First, Middle) MCBRIDE, SHERMAN EDMOND			D.O.B. 01/17/1972		Age 42		Race B	Sex M	Place of Birth CALDWELL,	Country of Citizenship	
	Current Address 1003 Civic Ct Nw, 1204, LENOIR, NC 28645			Phone 828-449-4810		Occupation Laborer		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident		<input type="checkbox"/> Unknown		
	Employer's Name UNEMPLOYED			Address			Phone					
	Also Known As (Alias Names)			Hgt 5'08	Wgt 245	Hair BLK	Eyes BRO	Skin Tone DRK	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos			Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name MCBRIDE, BRENDAETTA MARGARET			Address 415-C15 NW STONEWALL ST, LENOIR, NC			Phone 828-757-3995					
A R R E S T	If Armed, Type of Weapon NOT APPLICABLE/NONE		<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 1003 CIVIC CT NW - 1204, LENOIR					
	Charge #1 Involuntary Commitment		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 4040	Offense Jurisdiction (if not arresting agency)		Statute # 122C-261	Warr. Date 07/28/2014			
	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 07/28/2014 22:45:00		Place Confined CMH		Committing Magistrate WALKER MATT							
	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		Court Of _____ City					
	Assisting Officer Name/ID # KEEFER, E. P. 1			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:				
	Subject was served with Involuntary Commitment paperwork while at Caldwell UNC Healthcare receiving treatment. [07/29/2014 10:41, BWOODY, 576, LPD]											
S T A T U S	Arresting Officer Signature/ID # JAMES, C. E. (CJ2012)			Date/Time Submitted 07/28/2014 23:30			Supervisor Signature SNIDER, G. F.					
	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						