## ARREST REPORT

Α.	Agency Name							ORI			Date/Time Arrested					OCA			
G I E N N F	Sanford Police Department							053010	00 S0005	06/	06/18/2014		11:07		14004566				
N F C O	Taken Fingerprint Card Check Digit # (CKN) Prints							Arrest Trac	t	Resid	Residence Tract		Arrest		rest Num	est Number			
Ϋ́	Photos							900		77	777A			;	30212	<u> </u>			
	Name (Last, First, Middle)								D.O.B.	$\top$	Age Ra		Sex		F	Place of B		Country of Citizenship	
4 R R E S T E E	SERRA, SAMUEL JR								06/19/198	7   2	26	w	М				us	O.1.20110111p	
	Current Address								Phone				L Occupation	1		<b>I I</b> Re	esident	Unknown	
	2355 Nichloson Rd, CAMERON, NC												Clerk				☐ Non-Resident		
	Employer's Name							Addre	3288 HWY 87 S. SANFORD								Phone		
	MURPHY EXPRESS Also Known As (Alias Names)									Hgt Wgt			Hair Eyes			Skin Tone   Consumed Drug/Alcohol			
	, ,								5'04	1	0 BRO E			BRO	O MED Ges D			☑ No ☐ Unk	
	Scars, Marks, Tattoos							Social Sec	urity #	OLN a		and Sta	State		Mi	Misc. # and Type			
	Nearest	Relative	Name		Addre	ss		· · ·				U	Pho	ne					
A R R F O T								al Summons				Place of Arrest					HETDIAL DD		
	Charge #1							tation   Counts	Warrant DCI Code		2499 ROSSER RD/J R INDUSTRIAL DR, Offense Jurisdiction (if not arresting agency) Statute #   Warr. Date								
	Possession Of Drug Paraphernalia								183/	1834		, 5				an_1	06/18/2014		
	Charge #2							Counts	DCI Code	Offense Jurisdi			on (if not a	rresting	agency)	90-113.22 Statute #		Warr. Date	
	Fel																		
	Charge #3							Counts	DCI Code	Of	Offense Jurisdiction (if not arre				agency)	S	statute #	Warr. Date	
	Fe Mix																		
V E H O	VYR	Ma	ake	Model	(	Style	•	Color	Plate #/State	-			VIN						
	Vehicle		Left at Scene	_	Secured			thor	Date/Time_										
	2. Released to other at owners request Name of Other																		
CONFINE	Date/Ti	me Confi	ined		Place C		Committing Magistrate												
	Type Bond Bond Amount							Trial Date Court (								City			
	☐ Written Promise ☐ Unsecured										District Court					SANFORD			
	Secured No Bond Other  Assisting Officer Name/ID #							L.	rtment/	rtment/ID #)				Date/Time Released					
D		<b>J</b>			Released By (Name/Department/ID #)  Date/Time Released														
Status Codes	L - Los	t S	- Stolen R - R	ecovered	D - Dama	ged Z - Sei	ized	B - Burne	ed C - Counte	rfeit / F	orged	F-1	ound						
ARREST AREST DRUGS	DCI Status Quantity Type Measure							Suspected Type						CI	neck up to	3 types	of activity for	each	
	1 ypo moddie											_	Possess	Buy	Sale	Mfg.	Importing	Operating	
												_							
											_								
UTE																			
s T																			
-		<del>                                     </del>													-				
				+	<del>-  </del>							$\dashv$							
C O M	Name:	Comp	olainant□	Victim				Address					Phone:						
M P																			
Ŋ	CITATION 533F928																		
A R R																			
Ä																			
i																			
E																			
S T	Arresting Officer Signature/ID #							e/Time Sub			Supervisor Signature								
A	LERMA, A. D. (248)  Case Status: Case Disposition:							06/1	06/18/2014 11:07   CAMERON, M. L.										
T	☐ Further Inv. ☐ Cleared By Arrest / No Supplement						nt Need												
S	☐ Ina		☑ Closed	☐ Arrest /	No Investiç	gation													

DCI-608F Rev. 3/92