

## 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>07/14/2014 12:50</b>		OCA <b>201402840</b>								
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos		Fingerprint Card Check Digit # (CKN)		Arrest Tract <b>F</b>		Residence Tract <b>N</b>		Arrest Number <b>105580</b>							
A R R E S T E E	Name (Last, First, Middle) <b>HUFFMAN, BETHANY DIANE</b>				D.O.B. <b>01/05/1990</b>		Age <b>24</b>	Race <b>W</b>	Sex <b>F</b>	Place of Birth		Country of Citizenship <b>US</b>				
	Current Address <b>4559 Mount Hebron Av, CONNELLY SPRINGS, NC</b>				Phone <b>828-640-0365</b>		Occupation		<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)				Hgt <b>5'10</b>		Wgt <b>125</b>		Hair <b>BRO</b>		Eyes <b>BRO</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>PIER BOTH EAR</b>				Social Security #		OLN and State		Misc. # and Type							
	Nearest Relative Name <b>HUFFMAN, KEVIN</b>				Address <b>4559 MT HEBRON AVE, CONNELLY</b>				Phone <b>828-397-5638</b>							
A R R E S T	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</b>		<input type="checkbox"/> On-View <input type="checkbox"/> Order for Arrest		<input type="checkbox"/> Criminal Summons <input checked="" type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest <b>201 S GREEN ST, MORGANTON</b>									
	Charge #1 <b>Threatening Phone Calls</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd		Counts <b>1</b>		DCI Code <b>0820</b>		Offense Jurisdiction (if not arresting agency)		Statute # <b>14-196(A)(2)</b>		Warr. Date <b>07/12/2014</b>			
	Charge #2 <b>Cyber Stalking</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>14-196.3</b>		Warr. Date <b>07/12/2014</b>			
	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		Place Confined				Committing Magistrate <b>LYNN WEBB</b>									
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input type="checkbox"/> No Bond <input checked="" type="checkbox"/> Other		Bond Amount <b>\$0.00</b>		Trial Date <b>08/06/2014 09:00</b>		Court Of <b>District</b>		City <b>MORGANTON</b>							
	Assisting Officer Name/ID # <b>0</b>				Released By (Name/Department/ID #) <b>SIGMON, B. H.</b>				Date/Time Released <b>07/14/2014 13:00:00</b>							
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:							
	I SERVED THE ABOVE BETHANY DIANE HUFFMAN WITH A WARRANT FOR ARREST. HUFFMAN WA ADVISED OF HER COURT DATE, TIME AND PLACE. HUFFMAN WAS ALSO GIVEN A COPY OF THE WARRANT FOR ARREST AND THE RELEASE ORDERS. HUFFMAN WAS RELEASED FROM THE MAGISTRATES OFFICE ON A WRITTEN PROMISE.															
S T A T U S	Arresting Officer Signature/ID # <b>SIGMON, B. H. (S5289)</b>				Date/Time Submitted <b>07/14/2014 12:50</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											