

ARREST REPORT

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|--------------------------------------|---|--------------------------------------|---|--|---|--|---|---|---|----------------------------------|------------------------|-----------|-----------|
| A G E N C Y | Agency Name Lenoir Police Department | | ORI 0140200 C0015 | | Date/Time Arrested 09/02/2014 12:45 | | OCA 1404916 | | | | | | |
| | <input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos | Fingerprint Card Check Digit # (CKN) | | Arrest Tract 15 | | Residence Tract 15 | | Arrest Number 63796 | | | | | |
| A R R E S T E E | Name (Last, First, Middle) SIMS, DENISE | | | D.O.B. 02/06/1956 | | Age 58 | | Race B | Sex F | Place of Birth | Country of Citizenship | | |
| | Current Address 515 Nw Scroggs St, LENOIR, NC 28645 | | | Phone 484-469-1133 | | 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 5'05 | Wgt 118 | 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 SCAR FRON STOMACH | | | Social Security # | | OLN and State | | Misc. # and Type | | | | | |
| | Nearest Relative Name SHAWN SIMS | | | Address | | | Phone 323-475-6199 | | | | | | |
| 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 515 NW SCROGGS ST, 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 09/02/2014 | | | | |
| | 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 09/02/2014 13:00:00 | | Place Confined CMH | | | Committing Magistrate KING SCOTT | | | | | | | |
| | 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 # COFFEY, S. M. 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 |
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| C O M P | Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/> | | | Address | | | | Phone: | | | | | |
| | Ms. Sims was taken into custody and transported to Caldwell UNC Health Care for evaluation. [09/05/2014 13:42, BWOODY, 576, LPD] | | | | | | | | | | | | |
| S T A T U S | Arresting Officer Signature/ID # HAMRICK, J. E. (JH2011) | | | Date/Time Submitted 09/02/2014 16:30 | | | Supervisor Signature MOORE, J. E. | | | | | | |
| | 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 | | | | | | | |