

## ARREST REPORT

A G E N C Y	Agency Name <b>Morganton Department Public Safety</b>		ORI <b>0120100 B0003</b>		Date/Time Arrested <b>07/12/2014 17:52</b>		OCA <b>201404510</b>					
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract <b>3100</b>		Residence Tract <b>2100</b>		Arrest Number <b>105550</b>				
A R R E S T E E	Name (Last, First, Middle) <b>CAREY, LAQUISHA LANIESE</b>			D.O.B. <b>11/18/1993</b>	Age <b>20</b>	Race <b>B</b>	Sex <b>F</b>	Place of Birth	Country of Citizenship <b>NC</b>			
	Current Address <b>602 Bouchelle St, MORGANTON, NC 28655</b>			Phone <b>828-433-9284</b>		Occupation		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name <b>UNEMPLOYED</b>			Address			Phone					
	Also Known As (Alias Names)			Hgt <b>'</b>	Wgt <b>0</b>	Hair <b>BLK</b>	Eyes <b>BRO</b>	Skin Tone <b>MED</b>	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk			
	Scars, Marks, Tattoos <b>SCAR RGT WRIST / 1"SCAR ON TOP OF</b>			Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name <b>RAMSEUR, WILHELMENIA</b>			Address <b>602 BOUCHELLE ST., MORGANTON, NC</b>			Phone <b>828-433-9284</b>					
A R R E S T	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</b>		<input type="checkbox"/> On-View <input checked="" type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest <b>201 S GREEN ST, MORGANTON</b>							
	Charge #1 <b>Larceny All Other</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>0690</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>14-72</b>	Warr. Date <b>04/19/2014</b>			
	Charge #2 <b>Poss Stolen Goods</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>1330</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>14-71.1</b>	Warr. Date <b>04/19/2014</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						
	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>08/07/2014 09:00</b>		Court Of <b>District</b>		City <b>LENOIR</b>			
	Assisting Officer Name/ID # <b>0</b>			Released By (Name/Department/ID #) <b>THOMPSON, J. M.</b>			Date/Time Released <b>07/12/2014 18:00:00</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 responded to 201 S. Green St. (Burke County Magistrate's Office) reference to a warrant service. Upon arrival I served Laquisha Laniese Carey with a misdemeanor criminal summons for larceny and possession of stolen goods. I advised Carey of her court date and released her.											
S T A T U S	Arresting Officer Signature/ID # <b>THOMPSON, J. M. (T1373)</b>			Date/Time Submitted <b>07/12/2014 17:52</b>			Supervisor Signature <b>LACKEY, W. D.</b>					
	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						