

ARREST REPORT

A G E N C Y	Agency Name Lenoir Police Department		ORI 0140200 C0015		Date/Time Arrested 07/24/2014 20:00		OCA																	
	Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos		Fingerprint Card Check Digit # (CKN)		Arrest Tract		Residence Tract		Arrest Number 62977															
A R R E S T E E	Name (Last, First, Middle) MARLEY, WANDA GAIL				D.O.B. 01/08/1980		Age 34		Race W		Sex F		Place of Birth LENOIR, NC		Country of Citizenship US									
	Current Address 2087 Union Grove Rd, LENOIR, NC 28645				Phone 828-474-4310				Occupation Laborer				<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident											
	Employer's Name UNEMPLOYED				Address								Phone 828- -											
	Also Known As (Alias Names) BROWN, WANDA GAIL; "GEE"				Hgt 5'04		Wgt 120		Hair RED		Eyes BLU		Skin Tone MED		Consumed Drug/Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk									
	Scars, Marks, Tattoos TATT CHEST; TATT STOMACH; TATT				Social Security #				OLN and State				Misc. # and Type											
	Nearest Relative Name CALLOWAY, WANDA				Address 2087 UNION GROVE RD, LENOIR, NC 28645								Phone 828-850-1083											
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																	
	Charge #1 Fail To Appear		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd		Counts 1		DCI Code 2640		Offense Jurisdiction (if not arresting agency)				Statute # 15A-305		Warr. Date 02/11/2014									
	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				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 type="checkbox"/> Other				Bond Amount \$0.00		Trial Date		Court Of _____ City															
	Assisting Officer Name/ID # 0				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 type="checkbox"/> Victim <input type="checkbox"/>				Address								Phone:											
S T A T U S	Arresting Officer Signature/ID # KEEFER, E. P. (EK2003)				Date/Time Submitted //				Supervisor Signature															
	Case Status: <input type="checkbox"/> Further Inv. <input type="checkbox"/> Inactive <input type="checkbox"/> Closed				Case Disposition: <input type="checkbox"/> Cleared By Arrest / No Supplement Needed <input type="checkbox"/> Arrest / No Investigation				Arrestee Signature															