

## 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>07/24/2014 16:38</b>		OCA <b>201403001</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>H</b>		Arrest Number <b>105895</b>				
A R R E S T E E	Name (Last, First, Middle) <b>PIERCE, JOHN DOUGLAS</b>				D.O.B. <b>02/09/1982</b>		Age <b>32</b>	Race <b>W</b>	Sex <b>M</b>	Place of Birth <b>MORGANTON, NC</b>		Country of Citizenship <b>US</b>	
	Current Address <b>4052 Cook Rd Ext, VALDESE, NC 28690</b>				Phone <b>828-522-1012</b>		Occupation <b>Unemployed</b>		<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) <b>PIERCE, JOHN DOUGLAS; PIERCE, ROCKY; PIERCE,</b>				Hgt <b>5'10</b>	Wgt <b>175</b>	Hair <b>BRO</b>	Eyes <b>GRE</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>TATT UPP BACK / ALITA DRAGON; TATT</b>			Social Security #		OLN and State			Misc. # and Type				
	Nearest Relative Name <b>PHILLIPS,GAIL</b>				Address				Phone				
A R R E S T	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</b>			<input type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant			Place of Arrest <b>201 S GREEN ST, MORGANTON</b>						
	Charge #1 <b>Poss Drug Paraphernalia</b>			<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>1834</b>	Offense Jurisdiction (if not arresting agency)			Statute # <b>90-113.22</b>	Warr. Date <b>05/12/2014</b>		
	Charge #2 <b>Driving During Revocation</b>			<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>4010</b>	Offense Jurisdiction (if not arresting agency)			Statute # <b>20-28(A)</b>	Warr. Date <b>07/24/2014</b>		
	Charge #3 <b>Reckless Driving To Endanger</b>			<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>4010</b>	Offense Jurisdiction (if not arresting agency)			Statute # <b>20-140(B)</b>	Warr. Date <b>07/24/2014</b>		
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 <b>07/24/2014 17:15:00</b>			Place Confined <b>BCDCF</b>			Committing Magistrate <b>DEBBIE CARSWELL</b>						
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other			Bond Amount <b>\$1,500.00</b>		Trial Date <b>10/21/2014 00:00</b>		Court Of <b>District</b>		City <b>MORGANTON</b>			
	Assisting Officer Name/ID # <b>0</b>				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 checked="" type="checkbox"/> Victim <input type="checkbox"/>				Address				Phone:				
	<b>ON THIS DATE ARRESTED SUBJECT ON LISTED CHARGES. ADDITIONAL BOND \$500 SECURED ON DOCKET NUMBER 14CR051210 COURT DATE 09-08-2014 BURKE COUNTY</b>												
S T A T U S	Arresting Officer Signature/ID # <b>HASSON, R. E. (H6780)</b>				Date/Time Submitted <b>07/24/2014 16:38</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 checked="" type="checkbox"/> Cleared By Arrest / No Supplement Needed <input type="checkbox"/> Arrest / No Investigation			Arrestee Signature							