

## ARREST REPORT

<b>A G E N C Y</b>	Agency Name <b>BURKE COUNTY SHERIFF'S OFFICE</b>			ORI <b>0120000</b>		Date/Time Arrested <b>06/07/2014 04:00</b>		OCA <b>201402264</b>	
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos		Fingerprint Card Check Digit # (CKN)		Arrest Tract <b>F</b>		Residence Tract <b>E</b>		Arrest Number <b>104701</b>

  

<b>A R R E S T E E</b>	Name (Last, First, Middle) <b>BRITTAIN, DANNY RAY</b>				D.O.B. <b>01/22/1967</b>		Age <b>47</b>	Race <b>W</b>	Sex <b>M</b>	Place of Birth <b>BURKE COUNTY, NC</b>		Country of Citizenship <b>US</b>		
	Current Address <b>4529 Rainhill Dr, MORGANTON, NC 28655</b>				Phone <b>828-205-6001</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 <b>N/A</b>				Phone <b>828- -</b>					
	Also Known As (Alias Names)				Hgt <b>5'04</b>	Wgt <b>140</b>	Hair <b>BRO</b>	Eyes <b>BRO</b>	Skin Tone <b>FAIR</b>	Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk				
	Scars, Marks, Tattoos <b>TATT UPPR ARM / WIZARD; TATT LEFT</b>				Social Security #		OLN and State		Misc. # and Type					
	Nearest Relative Name <b>POOLE, CAROLINA</b>				Address				Phone <b>828-874-3414</b>					

  

<b>A R R E S T</b>	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</b>		<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 <b>1007 JAMESTOWN RD, MORGANTON</b>				
	Charge #1 <b>Probation Violation</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>2660</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>15A-305(B)(4)</b>	Warr. Date <b>06/03/2014</b>
	Charge #2 <b>Fail To Appear/ Failure To Comply</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>15A-305</b>	Warr. Date <b>06/03/2014</b>
	Charge #3		<input type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts	DCI Code	Offense Jurisdiction (if not arresting agency)		Statute #	Warr. Date

  

<b>V E H I C L E</b>	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? _____						

  

<b>C O N F I N E D</b>	Date/Time Confined <b>06/07/2014 04:35:00</b>		Place Confined <b>BURKE/CATAWBA JAIL</b>		Committing Magistrate <b>DAVID WHITESIDES</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>\$20,000.00</b>	Trial Date <b>07/02/2014 09:00</b>	Court Of <b>District</b> City <b>MORGANTON</b>	
	Assisting Officer Name/ID # <b>GRASSE, J. S. 1</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											
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<b>D R U G S</b>	DCI	Status	Quantity	Type Measure	Suspected Type	Check up to 3 types of activity for each					
						Possess	Buy	Sale	Mfg.	Importing	Operating

  

<b>C O M P</b>	Name: Complainant <input checked="" type="checkbox"/> Victim <input type="checkbox"/>				Address				Phone:			
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<b>N A R R A T I V E</b>	I served two Orders for Arrest to Danny Brittain at the Burke County Magistrate's Office. I advised Mr. Brittain of his court date and bond, and confined him into the Burke/Catawba Jail.											
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<b>S T A T U S</b>	Arresting Officer Signature/ID # <b>ANDERSON, D. T. (A2564)</b>				Date/Time Submitted <b>06/07/2014 04:00</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							