

ARREST REPORT

| | | | | | | | | | | | | | |
|--------------------------------------|--|--------|--|--------------------|--|---|---|--|---|---|----------------------------------|-------------------------------------|-----------|
| A G E N C Y | Agency Name Lenoir Police Department | | | | ORI 0140200 C0015 | | Date/Time Arrested 09/20/2014 12:20 | | OCA 1405316 | | | | |
| | <input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos | | Fingerprint Card Check Digit # (CKN) | | Arrest Tract 13 | | Residence Tract 99 | | Arrest Number 64091 | | | | |
| A R R E S T E E | Name (Last, First, Middle) COURTNER, ISAAC GENE JR | | | | D.O.B. 05/23/1982 | | Age 32 | Race W | Sex M | Place of Birth JOHNSON CITY, TN | | Country of Citizenship US | |
| | Current Address General Delivery, LENOIR, NC 28645 | | | | Phone 828-754-2311 | | Occupation Laborer | | <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident | | <input type="checkbox"/> Unknown | | |
| | Employer's Name UNEMPLOYED | | | | Address | | | | Phone 828- - | | | | |
| | Also Known As (Alias Names) | | | | Hgt 5'10 | Wgt 160 | Hair BRO | Eyes BRO | Skin Tone LT | Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk | | | |
| | Scars, Marks, Tattoos TATT RIGH ARM / CLOWN; TATT LEFT | | | | Social Security # | | OLN and State | | Misc. # and Type | | | | |
| | Nearest Relative Name COURTNER SR, ISAAC GENE | | | | Address | | | | Phone 646-734-1754 | | | | |
| A R R E S T | If Armed, Type of Weapon NOT APPLICABLE/NONE | | <input checked="" type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input type="checkbox"/> Warrant | | | Place of Arrest 1310 SW WINFIELD PL, LENOIR | | | | | | | |
| | Charge #1 Probation Violation | | <input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd | Counts 1 | DCI Code 2660 | Offense Jurisdiction (if not arresting agency) | | Statute # 15A-305(B)(4) | | Warr. Date 11/14/2013 | | | |
| | 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 2. <input type="checkbox"/> Released to other at owners request 3. <input type="checkbox"/> Impounded <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured <input type="checkbox"/> Name of Other <input type="checkbox"/> Place of storage Date/Time Inventory on File? | | | | | | | | | | | | |
| C O N F I N E D | Date/Time Confined 09/20/2014 14:00:00 | | Place Confined CCDC | | | | Committing Magistrate CORNETT GREG | | | | | | |
| | 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 \$700.00 | | Trial Date 09/29/2014 00:00 | | Court Of District Court | | City LENOIR | | | | |
| | Assisting Officer Name/ID # COFFEY, S. M. 3 | | | | 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: | | | | |
| | The defendant had injected methamphetamine in his arm earlier on this day. The defendant was handcuffed and secured in the rear of my patrol car for transport. [09/22/2014 15:52, BWOODY, 576, LPD] | | | | | | | | | | | | |
| S T A T U S | Arresting Officer Signature/ID # BROWN, D. (DB2012) | | | | Date/Time Submitted 09/21/2014 06:25 | | | | 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 | | | | | | | | |