## **ARREST REPORT**

| A G E N F                   | Agency   |           |                                 |            | ORI                               |                 |                 |                        |                                  |                         |  | OCA   |                 |                    |                                |                       |            |                              |  |
|-----------------------------|--|-----------|---------------------------------|------------|-----------------------------------|-----------------|-----------------|------------------------|----------------------------------|-------------------------|--|---|-----------------|--------------------|--------------------------------|-----------------------|------------|------------------------------|--|
| ΕN                          | Lenoir Police Department  Taken Fingerprint Card Check Digit # (CKN)   |           |                                 |            |                                   |                 |                 | O14020<br>Arrest Tract |                                  |                         | 07/11/2014   |   |                 |                    |                                | 1403868<br>est Number |            |                              |  |
| ÇŌ                          | Taken Fingerprint Card Check Digit # (CKN) Prints Photos   |           |                                 |            |                                   |                 |                 | 13                     |                                  |                         | Residence Tract  |   |                 |                    | 62731                          |                       |            |                              |  |
|                             |  |           | t, Middle)                      | _          |                                   | D.O.B           |                 | Age                    | Race                             |                         |  |   | Place of B      |                    | Country of<br>Citizenship      |                       |            |                              |  |
| A R R E S T E E             | MEARS (WILLIAMS), LONNIE ALBERT  |           |                                 |            |                                   |                 |                 |                        | 01/03/1979 35 N                  |                         |  |   | М               |                    | LENOIR, NC, NC US              |                       |            |                              |  |
|                             | Current Address 1605 Nw Poplar St, LENOIR, NC 28645  |           |                                 |            |                                   |                 |                 |                        | :-18                             | 17 Coccupation Laborer  |  |   |                 | er                 | Resident Unknown  Non-Resident |                       |            |                              |  |
|                             | Employer's Name HICKORY SPRINGS MANUFACTURING  |           |                                 |            |                                   |                 |                 | Address<br>1115 FAR    |                                  |                         | RINGTON ST SW CON  |   |                 |                    | Phone 828-328-8570             |                       |            |                              |  |
|                             | Also Known As (Alias Names)  |           |                                 |            |                                   |                 |                 | •                      | 6'0                              | - 1                     | Wgt Hair   |   |                 | Eyes S<br>BLU      |                                |                       |            | Drug/Alcohol  No Unk         |  |
|                             | Scars, N   | Marks, Ta | attoos                          |            |                                   |                 | Social Secu     | ity#                   |                                  |                         | OLN and State  |   |                 | Misc               |                                | sc. # and Type        |            |                              |  |
|                             | TATT LEFT ARM / TRIBAL SLEEVE; TATT  Nearest Relative Name    Address   Phone  |           |                                 |            |                                   |                 |                 |                        |                                  |                         |  |   |                 |                    |                                |                       |            |                              |  |
| A R R R F O T               |  |           | Name<br>R, HEATHE               | R RENE     | E                                 |                 | Address<br>160  |                        | LAR S                            | AR ST, LENOIR, NC 28645 |  |   |                 | Phone 828-215-0183 |                                |                       |            |                              |  |
|                             |  |           | f Weapon                        | Crimina    | al Summons                        | Place of Arrest |                 |                        |                                  |                         |  |   |                 |                    |                                |                       |            |                              |  |
|                             | 11017111210112   |           |                                 |            |                                   |                 |                 | tation  Counts         | Warrant DCI Code                 |                         | SOUTHWEST BLVD/BRADFORD MOUNTAIN  Offense Jurisdiction (if not arresting agency)   Statute #    Warr. Date |   |                 |                    |                                |                       |            |                              |  |
|                             | Charge #1 Fail To Appear  Fel  X Misd  |           |                                 |            |                                   |                 | 1               | Couris                 | <b>2640</b>                      |                         | 1  | Offense Jurisdiction (if not arresting agency)  CATAWBA  15A-305  Warr. D  05/21/20 |                 |                    |                                |                       |            |                              |  |
|                             | Charge #2 Fail To Appear   |           |                                 |            |                                   |                 |                 | Counts                 | DCI Code                         |                         | Offense Jurisdiction (if not arresting ager  |   |                 |                    | agency)                        | 45                    | Warr. Date |                              |  |
|                             | Charge #3  |           |                                 |            |                                   |                 | 1               | Counts                 | DCI Code                         |                         | CATAWBA Offense Jurisdiction (if not arresting agency)   |   |                 |                    | agency)                        | 15A-305<br>Statute #  |            | <b>05/21/2001</b> Warr. Date |  |
| > I<br>E F<br>O             | VVD  | I Ma      | de .                            | Model      |                                   | ☐ Misd          |                 | Color                  | Plate #/State                    |                         |  |   | II vin          |                    |                                |                       |            |                              |  |
|                             | VYR Make Mod   |           |                                 | iviodei    | Model Style                       |                 |                 | Color                  | Plate #/S                        | Plate #/State           |  | VIN   |                 |                    |                                |                       |            |                              |  |
|                             | Vehicle  |           | ☐ Left at Scene☐ Released to ot |            | Secured                           |                 | cure<br>e of Ot | thor                   | Date/Tir                         | ne                      |  |   |                 |                    |                                |                       |            |                              |  |
|                             |  |           | Impounded                       | Place of   |                                   | L Name          |                 |                        |                                  |                         |  |   |                 |                    |                                | Inventory             | on File?   |                              |  |
| <br>                        | Date/Tir   | me Confi  | ned                             |            | Committing Magistrate WALKER MATT |                 |                 |                        |                                  |                         |  |   |                 |                    |                                |                       |            |                              |  |
|                             | Type Bond  ☐ Bond Amount  ☐ Written Promise ☐ Unsecured  |           |                                 |            |                                   |                 | 00              | Trial Date             |                                  |                         |  | Court Of City  District Court NEWTON - CATAWB                                       |                 |                    |                                |                       |            |                              |  |
|                             | □ Secured □ No Bond □ Other  Assisting Officer Name/ID #   |           |                                 |            |                                   |                 | .00             | Released By (Name/Dep  |                                  |                         |  |   |                 |                    |                                | Date/Time Released    |            |                              |  |
| Status                      |  | FEY, I    |                                 |            | D. D                              |                 |                 | -                      | KER, M. N.   07/11/2014 12:19:00 |                         |  |   |                 |                    |                                |                       |            | 2:19:00                      |  |
| Codes                       | bdes L - Lost S - Stolen R - Recovered D - Damaged Z - Seized B - Burned C - Counternett / Polged P - Pound  Check up to 3 types of activity for each  |           |                                 |            |                                   |                 |                 |                        |                                  |                         |  |   |                 | each               |                                |                       |            |                              |  |
| ARREST<br>AR<br>AT<br>DRUGS | DCI Status Quantity Type Mea   |           |                                 |            |                                   |                 | Suspected       | d Type                 |                                  |                         | 4  | Possess   | Buy             |                    |                                | Importing             | П          |                              |  |
|                             |  |           |                                 |            |                                   |                 |                 |                        |                                  |                         |  |   |                 |                    |                                |                       |            |                              |  |
|                             |  |           |                                 |            |                                   |                 |                 |                        |                                  |                         |  |   |                 |                    |                                |                       |            |                              |  |
| ÜAR                         |  |           |                                 |            |                                   |                 |                 |                        |                                  |                         |  |   |                 |                    |                                |                       |            |                              |  |
| S T                         |  |           |                                 | _          |                                   |                 |                 |                        |                                  |                         |  |   |                 |                    |                                |                       |            |                              |  |
|                             |  |           |                                 |            |                                   |                 |                 |                        |                                  |                         |  |   |                 |                    |                                |                       |            |                              |  |
|                             |  |           |                                 |            |                                   |                 |                 |                        |                                  |                         |  |   |                 |                    |                                |                       |            |                              |  |
|                             | Name:  | Comp      | lainant <b>I</b>                | Victim     |                                   |                 | Address         |                        |                                  |                         |  |   |                 |                    | PI                             | none:                 |            |                              |  |
| M<br>P                      |  |           |                                 |            |                                   |                 |                 |                        |                                  |                         |  |   |                 |                    |                                |                       |            |                              |  |
| N<br>A                      | Mears was handcuffed behind his back and seatbelted in the back seat of my patrol unit. Mear's vehicle was left secured on Southwest Blvd. The registration plate displayed on the vehicle was |           |                                 |            |                                   |                 |                 |                        |                                  |                         |  |   |                 |                    |                                |                       |            |                              |  |
| N<br>R<br>R<br>A<br>T       |  |           | was lert<br>ue to it            |            |                                   |                 | ВТ              | va. The                | e regis                          | tra                     | tion ;   | prate   | aisp            | таує               | ea on                          | tne                   | venicie    | e was                        |  |
|                             |  |           |                                 |            |                                   |                 |                 |                        |                                  |                         |  |   |                 |                    |                                |                       |            |                              |  |
| V<br>E                      | [07/   | 14/2      | 014 15:27                       | , BWOOD    | o <b>r,</b> 57                    | 6, LPD]         |                 |                        |                                  |                         |  |   |                 | _                  |                                |                       |            |                              |  |
| S<br>T                      | Arresting Officer Signature/ID #   |           |                                 |            |                                   |                 |                 | te/Time Subm           |                                  | Supervisor Signature    |  |   |                 |                    |                                |                       |            |                              |  |
| Ä                           | COFFEY, S. M. (SC2012)  Case Status:   Case Disposition:   |           |                                 |            |                                   |                 |                 | 07/11                  |                                  | 2014 13:57              |  |   | ROBINSON, C. A. |                    |                                |                       |            |                              |  |
| U<br>S                      | ☐ Further Inv. ☐ Cleared By Arrest / No Supplement N   |           |                                 |            |                                   |                 | t Need          | ded                    | Allest                           | oigi                    | a.uIU  |   |                 |                    |                                |                       |            |                              |  |
|                             | ☐ Ina  | ctive     | ☑ Closed                        | ☐ Arrest / |                                   |                 |                 |                        |                                  |                         |  |   |                 |                    |                                |                       |            |                              |  |

DCI-608F Rev. 3/92