## **ARREST REPORT**

| A                                     | Agency  |                                       |                   |             |                         |                |                       | Date/Time Arrested OCA      |                      |                       |  |                                |                                   |                       |                                 |            |  |                           |  |
|---------------------------------------|---|---------------------------------------|-------------------|-------------|-------------------------|----------------|-----------------------|-----------------------------|----------------------|-----------------------|--|--------------------------------|-----------------------------------|-----------------------|---------------------------------|------------|--|---------------------------|--|
| COENC)                                | Lenoir Police Department  |                                       |                   |             |                         |                |                       | 0140200                     | C0015                |                       |  |                                | 13:55                             |                       |                                 |            |  |                           |  |
| ÇŌ                                    | Taken   |                                       |                   |             |                         |                |                       | Arrest Tract                |                      | Residence Tract       |  |                                |                                   | Arrest Number 64027   |                                 |            |  |                           |  |
| ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ ■ | Name (Last, First, Middle)  |                                       |                   |             |                         |                |                       |                             | D.O.B.               | А                     | \ge  | Race                           | Sex P                             |                       |                                 | Place of B |  | Country of<br>Citizenship |  |
|                                       | FERGUSON, CHRISTOPHER DOMINIQU Current Address                    |                                       |                   |             |                         |                |                       |                             | 6/27/1986            | 28 B M CALD           |  |                                |                                   |                       | DWEL                            | П          | NC US  |                           |  |
|                                       |   |                                       | ueens St,         |             | 828-493-7600            |                |                       |                             |                      | <br>abore             | r  | Resident Unknown  Non-Resident |                                   |                       |                                 |            |  |                           |  |
|                                       | Employer's Name   |                                       |                   |             |                         |                |                       | Address                     |                      |                       |  |                                |                                   |                       |                                 |            | Phone  |                           |  |
|                                       | UNEMPLOYED Also Known As (Alias Names)                            |                                       |                   |             |                         |                |                       |                             | Hgt Wgt              |                       | Hai  | Hair Eyes                      |                                   | T e                   | 828-396<br>Skin Tone   Consumed |            | 6-1070<br>Drug/Alcohol                                   |                           |  |
|                                       | , , ,   |                                       |                   |             |                         |                |                       |                             | 6'01                 |                       | 230 BLK  |                                | ĸ                                 | BRO I                 |                                 | MED        |  | · ·                       |  |
|                                       | Scars, M  | Marks, Ta                             | attoos            |             |                         | 5              | Social Security       | rity #                      |                      | OLN and State         |  | Mi                             |                                   | isc. # and Type       |                                 |            |  |                           |  |
|                                       |   |                                       |                   | SCROLL      | . WITH                  | H WRITING      | <b>;</b> _            |                             |                      |                       |  |                                |                                   |                       |                                 |            |  |                           |  |
|                                       |   | Relative                              | Name<br>ON, CHRIS | •           |                         |                | Address<br>81         | 313 QUEEN ST, LENOIR, NC 28 |                      |                       |  |                                |                                   | Phone<br>828-729-5298 |                                 |            |  |                           |  |
|                                       |   |                                       | f Weapon          | riminal     | Summons Place of Arrest |                |                       |                             |                      |                       |  |                                | 0 120 02                          |                       |                                 |            |  |                           |  |
| A R R F O T                           | ПОП   | APP                                   | LICABLE/          | NONE        |                         | ] Cita         |                       | arrant                      |                      |                       |  |                                |                                   |                       |                                 |            |  |                           |  |
|                                       | Charge #1 Larceny (misdemeanor)                                   |                                       |                   |             |                         |                |                       | Counts                      | DCI Code             |                       | Offense Jurisdiction (if not arresting agency)  Statute # Warr |                                |                                   |                       |                                 | Warr. Date |  |                           |  |
|                                       | Misd  |                                       |                   |             |                         |                |                       |                             | 0690                 |                       |  |                                | B 0 00                            |                       |                                 |            | 72 (A)   | Warr. Date                |  |
|                                       | Charge #2   |                                       |                   |             |                         |                |                       | Counts                      | DCI Code             | Offense Jurisdi       |  |                                | diction (if not arresting agency) |                       |                                 |            | Statute #  |                           |  |
|                                       | Charge #3   |                                       |                   |             |                         |                | С                     | Counts                      | DCI Code             | Offense Jurisd        |  |                                | diction (if not arresting agency) |                       |                                 |            | Statute #  |                           |  |
| > E F O                               | VYR Make  |                                       |                   | Model Style |                         |                |                       | Color                       | Plate #/State        |                       | VIN  |                                |                                   |                       |                                 |            |  |                           |  |
|                                       | Vehicle   | 1. [                                  | Left at Scene     |             | Secured                 | ∃ Unsec        | cure                  |                             | Date/Time_           |                       |  | U                              |                                   |                       |                                 |            |  |                           |  |
|                                       |   |                                       | Released to ot    |             |                         | ☐ Name         | of Oth                | ner                         |                      |                       |  |                                |                                   |                       |                                 |            |  |                           |  |
| CONFINED                              | Date/Tir  | 3. L                                  | Impounded ned     | ☐ Place of  |                         | Confined       |                       |                             |                      |                       |  |                                | Cor                               | nmitting N            |                                 |            | on File?   |                           |  |
|                                       |   |                                       |                   |             |                         |                |                       |                             |                      |                       |  |                                |                                   |                       |                                 |            |  |                           |  |
|                                       | Type Bond Bond Amount □ Written Promise □ Unsecured □ Bond Amount |                                       |                   |             |                         |                |                       | Trial Date Court            |                      |                       |  |                                | rt Of City                        |                       |                                 |            |  |                           |  |
|                                       | ☐ Secured ☐ No Bond ☐ Other  Assisting Officer Name/ID #          |                                       |                   |             |                         | \$0.           | \$0.00 Released By (N |                             |                      | ame/Department/ID #)  |  |                                |                                   | Date/Time Released    |                                 |            |  |                           |  |
|                                       |   |                                       |                   |             |                         | 0              |                       |                             |                      |                       |  |                                |                                   |                       |                                 |            |  |                           |  |
| Status<br>Codes                       | L - Lost  | t S-                                  | Stolen R - R      | ecovered    | D - Dama                | aged Z - Seize | ed                    | B - Burned                  | C - Counte           | rfeit / Fo            | rged   | F-F                            | ound                              |                       |                                 |            |  |                           |  |
| D A                                   | DCI Status Quantity Type Measure                                  |                                       |                   |             |                         |                |                       | Suspected Type              |                      |                       |  |                                | Check up to Possess Buy Sale      |                       |                                 |            | o 3 types of activity for each  Mfg. Importing Operating |                           |  |
|                                       |   |                                       |                   |             |                         |                |                       |                             |                      |                       | 1 033033   | Duy                            | Jaic                              | iviig.                | importing                       | Operating  |  |                           |  |
|                                       |   |                                       |                   |             |                         |                |                       |                             |                      |                       |  |                                |                                   |                       |                                 |            |  |                           |  |
| R AR                                  |   |                                       |                   |             |                         |                |                       |                             |                      |                       | -  | -                              | -                                 |                       |                                 |            |  |                           |  |
| D A R AR U T S T                      |   |                                       |                   |             |                         |                |                       |                             |                      |                       | +  |                                | -                                 |                       |                                 |            |  |                           |  |
| - '                                   |   |                                       |                   |             |                         |                |                       |                             |                      |                       |  |                                |                                   |                       |                                 |            |  |                           |  |
|                                       |   |                                       |                   |             |                         |                |                       |                             |                      |                       | <u> </u>   |                                |                                   |                       |                                 |            |  |                           |  |
| -                                     |   |                                       |                   |             |                         |                |                       |                             |                      |                       |  |                                |                                   |                       |                                 |            |  |                           |  |
| C<br>O<br>M                           | Name: Complainant   |                                       |                   |             |                         |                |                       |                             | Iress                |                       |  |                                |                                   |                       |                                 | Phone:     |  |                           |  |
| <u> </u>                              |   |                                       |                   |             |                         |                |                       |                             |                      |                       |  |                                |                                   |                       |                                 |            |  |                           |  |
| N<br>R<br>R<br>A<br>T                 |   | · · · · · · · · · · · · · · · · · · · |                   |             |                         |                |                       |                             |                      |                       |  |                                |                                   |                       |                                 |            |  |                           |  |
|                                       |   |                                       |                   |             |                         |                |                       |                             |                      |                       |  |                                |                                   |                       |                                 |            |  |                           |  |
| V<br>E                                |   |                                       |                   |             |                         |                |                       |                             |                      |                       |  |                                |                                   |                       |                                 |            |  |                           |  |
| S<br>T                                | Arresting Officer Signature/ID#                                   |                                       |                   |             |                         |                |                       | /Time Submitte              |                      | II '                  |  |                                |                                   | upervisor Signature   |                                 |            |  |                           |  |
| Á<br>T                                | BROWN, D. (DB2012)  Case Status: Case Disposition:                |                                       |                   |             |                         |                |                       |                             |                      | // Arrestee Signature |  |                                |                                   |                       |                                 |            |  |                           |  |
| U                                     | ☐ Further Inv. ☐ Cleared By Arrest / No Supplement                |                                       |                   |             |                         |                | Neede                 | ed                          | , in estee Signature |                       |  |                                |                                   |                       |                                 |            |  |                           |  |
| S                                     | Inactive Closed Arrest / No Investigation                         |                                       |                   |             |                         |                |                       |                             |                      |                       |  |                                |                                   |                       |                                 |            |  |                           |  |

DCI-608F Rev. 3/92