

ARREST / BOOKING REPORT

Agency Name G.C.S.D.		Legal Process Number		Date/Time of Arrest 04/01/97 1015 Hrs		Resisted Case/Inmate Number 951009027	
Arrestee Name (Last, First, Middle) Kimble, Ronnie Lee				Current Address 5822 MONNETT ROAD, JULIA, N.C. 27283			
Booking/Name Number		OLN or ID / State 8124461 N.C.		Residence Phone		Work Phone	
Social Security # 240-47-9667		Hgt. 600	Wgt. 175	D.O.B. 01-17-72	Age 25	Sex M	Race W
Hair BRO		Eyes HAZ		Build/Mustache NONE			
Place of Birth Wanouse Co., N.C.		Country of Citizenship USA		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident		Residence Zone	
Nearest Relative / Relation Kimberly Kimble (wife)				Relative Address 5822 Monnett Rd. Julia, N.C.		Relative Phone	
Employer's Name UNITED STATES OF AMERICA - USMC, CAMP LEJEUNE MCB				Address		Occupation	
Scars, Marks, Tattoos, Amputations Rose on Right buttocks				Alias Known As (Alias Names)		Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk.	
						Taken: <input type="checkbox"/> Prints <input checked="" type="checkbox"/> Photo <input checked="" type="checkbox"/>	
Place of Arrest Camp Lejeune, MCB, Camp Lejeune N.C.				Arrest Zone		<input type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons	
						<input checked="" type="checkbox"/> Order For Arrest <input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant	
Charge #1 FIRST DEGREE MURDER		Counts 1	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	<input checked="" type="checkbox"/> District <input type="checkbox"/> Superior	Statute # 14-17	Controlled Substance	Guilford Co. Jurisdiction? <input type="checkbox"/> Yes <input type="checkbox"/> No
Charge #2		Counts	<input type="checkbox"/> Fel <input type="checkbox"/> Misd	<input type="checkbox"/> District <input type="checkbox"/> Superior	Statute #	Controlled Substance	Guilford Co. Jurisdiction? <input type="checkbox"/> Yes <input type="checkbox"/> No
Charge #3		Counts	<input type="checkbox"/> Fel <input type="checkbox"/> Misd	<input type="checkbox"/> District <input type="checkbox"/> Superior	Statute #	Controlled Substance	Guilford Co. Jurisdiction? <input type="checkbox"/> Yes <input type="checkbox"/> No
Charge #4		Counts	<input type="checkbox"/> Fel <input type="checkbox"/> Misd	<input type="checkbox"/> District <input type="checkbox"/> Superior	Statute #	Controlled Substance	Guilford Co. Jurisdiction? <input type="checkbox"/> Yes <input type="checkbox"/> No
Charge #5		Counts	<input type="checkbox"/> Fel <input type="checkbox"/> Misd	<input type="checkbox"/> District <input type="checkbox"/> Superior	Statute #	Controlled Substance	Guilford Co. Jurisdiction? <input type="checkbox"/> Yes <input type="checkbox"/> No
VYR	Make	Model	Style	Color	Lic./ State	VIN	
Injured <input type="checkbox"/> Left at Scene <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured <input type="checkbox"/>		Date / Time		Hrs.			
Vehicle: <input type="checkbox"/> Released to other at owner's request		Name of other				Inventory on File? <input type="checkbox"/> Y <input type="checkbox"/> N	
<input type="checkbox"/> Impounded		Place of Storage					
Date / Time Confined		Hours		Placed Confined		Convicting Magistrate	
Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Other <input type="checkbox"/>		Armt. Bond		Trial Date		Court of	
<input type="checkbox"/> Unmeasured <input type="checkbox"/> Seasured <input type="checkbox"/> No Bond						City	
Booking Officer Name / Code				Released By: Name / Div. / Code		Date / Time Released	
Property Held by Arresting Agency Y N		Weapon Involved Y N	Weapon Type	Armed When Arrested Y N	Property Recovered/Seized Y N Unk	Resisted Arrest Y N	Arrested Made Y N
Made Threat to Another Y N		Name of Person Threatened		ARRESTEE VICTIM RELATIONSHIP	Family Neighbor Assurance / Friend	Other Co-Worker	Likely to Flee if Released Y N Unk.
				N/A			Victim Injured Y N
ARREST NARRATIVE							
Arresting Officer Name / Code J.D. CHURCH 0075				Assisting Officer Name / Code S.J. MCBRIDE 0013A			
CASE STATUS		Further Investigation		Date / Time Subjected		Supervisor Name / Code	
Inactive		Close		Mo Day Yr		Hrs.	

RECORDS

(325)