



OSNT – Sentenced – Other – Housed for another State

San Diego County Sheriff's Department
 San Diego County Sheriff's Department

Book #: 14100001 Name: Brockreed, Carol Fac: 1 Area: HU: Cell: Bed: 142BNBKG

Arrest #: 1 Type of Arrest: SENTENCED-OTHER
 Arrest Agency: Self Surrender Officer: SCHMITZ ID: 8616
 Document #: TR2011134894 Event #:
 TOX Required? Hold Agency:
 Notes:
 Total Bail: \$0.00

Code Section	Description	CL	DV	Bail	Bail Amt	Type	Bond Co	Bail #	Paid
66201 PC	HOUSED FOR ANOTHER	F		H	.00				

PRE-BOOKING Navigator

- NetRMS
- ID JIM
- Mini Personal Data
- Fingerprint Enroll
- Medical Intake
- ER Transport
- Fit For Jail
- Medical Questions
- Intake Medications
- Psychiatric Questions
- Medical Recom
- Full Personal Data
- Arrest Charges
- Sentenced Charges
- Holds Charges
- Probable Cause Stmt
- Personal Property

Buttons: Previous, Next, Save, Close, Add Charge, Delete Charge

NOTE: Effective December 2012, defendants committed from another county or state requesting to serve their commitment in a San Diego County detention facility are no longer accepted. For additional information, refer to the directive under the Courtesy and En Route Housing section of the DPT Manual.

- Arresting Agency:** Self
- Date & Time of Arrest:** Per Intake Form (J-15)
- Arrest Type:** OSNT – Sentenced - Other
- Location of Arrest:** Per Intake Form (J-15)
- Arresting Officer:** Per Intake Form (J-15)
- Document #:** Per Court Document
- NOTE:** Sentencing information per court document
- Charge Code:** 66201 PC
- Bail Info:** H – Held without bail
- Court Info:** Per Court Document
- Billing Agency:** Per Intake Form (J-15)



**San Diego County
SHERIFF'S DEPARTMENT
BOOKING INTAKE/PERSONAL PROPERTY INVENTORY**

FIRST TWO BOXES TO BE COMPLETED BY JAIL STAFF							
Jail Booking Number Assigned 12520239			Pre-Intake Clerk ID# 3938		Agency Case #		
PERSONAL INFORMATION							
PROPER COMPLETION OF THIS FORM WILL EXPEDITE YOUR BOOKING							
Name: Last, First Middle BROCKREED, CAROL			Suffix	Race W	Sex F	Age 102	
Date of Birth (mm/dd/yyyy) 11/11/1911			Passport #				
Alias Names: Last, First Middle			Suffix				
Height 5-07	Weight 115	Hair BR	Eyes BR	Place of Birth: City / State/ Country INDIANA / U.S.		Citizenship (Country) U.S.	
Primary Language							
Home Address 1880 GLIDDEN GLEN DR ESCONDIDO, CA 92029			Street		City	State Zip	
Employer Name UNEMPLOYED			Street		City	State Zip	
Social Security Number 123-45-6789		DL, State ID or Other ID Number A86512424		License State CA	ARREST REMARKS:		
ARREST INFORMATION							
Arresting Agency SELF	Arrest Date / Time 03/20/12 @ 07:00	Billing Agency		Location of Arrest (Beat # or Street Address and City) LCDF (9000 COTTONWOOD AVE SANTEE, CA)		Court Destination: (Circle) SD ELC SBCV NCV	
Arresting Officer: Name & ID SCHMITZ 8616		Transporting Officer & ID# JENKO 8614		Vehicle Location: <input type="checkbox"/> Left At Scene <input type="checkbox"/> Towed By:		TOTAL BAIL AMOUNT:	
ARREST #1 (Field Charges or Warrant Information)				ARREST #2 (Additional Warrants or Additional Charges)			
Section	Code	Description		Section	Code	Description	
1	66201	PC-Housed for Another State		1			
2				2			
3				3			
4				4			
5				5			
PERSONAL PROPERTY INVENTORY				HOLDS: <input type="checkbox"/> FEDERAL <input type="checkbox"/> STATE PAROLE <input type="checkbox"/> IMMIGRATION			
PREBOOK ARJIS 3933 BOOK ARJIS 9694							
Cash Accounting (USA Currency Only)							
X \$1 = \$ _____		WALLET: Y ___ N ___ ✓		BELT: Y ___ N ___ ✓		KEYS: Y ___ N ___ ✓	
X \$2 = \$ _____		PURSE: Y ___ N ___ ✓		GLASSES: Y ___ N ___ ✓		SHOES: Y ___ N ___ ✓	
X \$5 = \$ _____		CELL PHONE: Y ___ N ___ ✓				MEDICATIONS: Y ___ N ___ ✓	
X \$10 = \$ _____		WATCH: Y ___ N ___ ✓		RING: Y ___ N ___ ✓		NECKLACE: Y ___ N ___ ✓	
X \$20 = \$ _____		___ YM		___ YM		___ YM	
X \$50 = \$ _____		___ WM		___ WM		___ WM	
X \$100 = \$ _____		___ OTHER		___ OTHER		___ OTHER	
ADDITIONAL PROPERTY REMARKS: GLOVES, EYEGLASSES CASE, HAT, PASSPORT							
TOTAL \$ 0			Inmate's Signature <i>Carol Brockreed</i>		Arresting Officer's Signature <i>[Signature]</i>		
Sealed Bag w/inmate Property Delivered to Jail: YES NO <input type="checkbox"/>							

J-15 10/05



Maricopa County Justice Courts, Arizona

Estrella Mountain Justice Court, 21749 W. Yuma Rd. #B101-105, Buckeye, AZ 85326 623-386-4822

STATE OF ARIZONA

CASE NUMBER: TR2011134894

vs.

CAROL L. BROCKREED

ORDER OF CONFINEMENT

Defendant

Defendant's date of birth: 12/16/59 Booking No.

Convicted of: ARS Title & Section 28-1381A1 DUI

IT IS ORDERED that defendant is remanded to the custody of the Sheriff and be confined for the duration of the jail time indicated on this Order of Confinement.

IT IS ORDERED that the defendant serve 24 Hour(s) in jail.

Sentence of 15 days or more requires a Healthcare Provider's Certification Form

- The defendant shall report to the jail on 03/20/12 at 7:00 AM
The defendant shall be confined immediately.

IT IS ORDERED that said jail time be served as follows:

STRAIGHT TIME:

The defendant shall serve 1 days straight time. No two for one credit shall be given.

WORK RELEASE:

The defendant shall serve days on work release as follows:

Report to the jail on at
And be released for work on at for hours.

And be confined in like manner and be released in like manner every:

Mon Tue Wed Thr Fri Sat Sun thereafter until completion of the sentence.

WEEKENDS:

The defendant shall serve weekends in jail as follows:

From: Fri Sat at
To: Sun Mon at

And every weekend thereafter until completion of the sentence.

DAYS FOR DOLLARS:

The defendant shall serve days in jail. The defendant may post bond in the amount of \$ for immediate release. The defendant shall be given credit of \$ per day. The defendant may obtain a reduction in the jail sentence at any time by posting bond of \$

OTHER:

IT IS ORDERED that defendant report to the following jail:

Lower Buckeye Jail Intake
3250 W. Lower Buckeye Rd., Phoenix, AZ
(602) 876-6900

Other LOS COLINAS WOMENS JAIL
9000 COTTONWOOD AVE
SANTEE, CA 90271

WARNINGS: You must bring this order and identification with you when reporting. You must report promptly at the time(s) indicated. You must not have consumed any alcoholic beverage or drugs when reporting. If you fail to appear as ordered, or if you appear after consuming alcohol, or if you fail to obey jail rules you may be committed for the balance of the sentence, without benefit of release, at the discretion of the Sheriff.

Date: 02/07/12

Justice of the Peace

CR 8150-616 R: 10/27/10