

ARREST REPORT

A G E N C Y	Agency Name High Point Police Department			ORI 0410300 H0001		Date/Time Arrested 09/04/2014 18:47		OCA 201426616								
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos		Fingerprint Card Check Digit # (CKN)		Arrest Tract 2		Residence Tract 7		Arrest Number 2691402							
A R R E S T E E	Name (Last, First, Middle) DONAIRE-ACOSTA, ALEJANDRA STEPHANIE				D.O.B.		Age 21		Race W		Sex F		Place of Birth		Country of Citizenship	
	Current Address 4105 Wellingham Ln, HIGH POINT, NC 272658176				Phone 336-259-3327				Occupation Staff				<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident			
	Employer's Name BURGER KING				Address 5805 SAMET DR HIGH POINT NC 27265				Phone 336-885-0693							
	Also Known As (Alias Names)				Hgt 4'11		Wgt 110		Hair BRO		Eyes BRO		Skin Tone LBR		Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk	
	Scars, Marks, Tattoos PRCD UPLF LIP / PRCD 1X STUD				Social Security #				OLN and State				Misc. # and Type			
	Nearest Relative Name				Address				Phone							
A R R E S T	If Armed, Type of Weapon NOT APPLICABLE/NONE			<input type="checkbox"/> On-View <input checked="" type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input type="checkbox"/> Warrant			Place of Arrest 1009 LEONARD AV, HIGH POINT									
	Charge #1 Unauthorized Use Of Motor Vehicle			<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd		Counts 1		DCI Code 1140		Offense Jurisdiction (if not arresting agency)		Statute # 14-72.2		Warr. Date 09/03/2014		
	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 <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured Date/Time _____ 2. <input type="checkbox"/> Released to other at owners request <input type="checkbox"/> Name of Other _____ 3. <input type="checkbox"/> Impounded <input type="checkbox"/> Place of storage _____ Inventory on File? _____															
C O N F I N E D	Date/Time Confined			Place Confined					Committing Magistrate							
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other			Bond Amount \$0.00		Trial Date 09/26/2014 08:30		Court Of Guilford County		City HIGH POINT						
	Assisting Officer Name/ID # 0			Released By (Name/Department/ID #) BYE, M. C.					Date/Time Released 09/04/2014 18:45:00							
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 type="checkbox"/> Victim <input type="checkbox"/>				Address				Phone:							
	checked NCIC, NCAWARE, PISTOL, P2P															
S T A T U S	Arresting Officer Signature/ID # BYE, M. C. (16900)				Date/Time Submitted 09/04/2014 18:47				Supervisor Signature O'TOOLE, P. B.							
	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							