

ARREST REPORT

A G E N C Y	Agency Name High Point Police Department		ORI 0410300 H0001		Date/Time Arrested 09/13/2014 21:09		OCA 201427553					
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract 5		Residence Tract 99		Arrest Number 2691609				
A R R E S T E E	Name (Last, First, Middle) MANNING, STEPHEN M.			D.O.B.		Age 19	Race W	Sex M	Place of Birth	Country of Citizenship US		
	Current Address 28 Priest Rd, BERLIN, MA 01503			Phone		Occupation Student			<input type="checkbox"/> Resident <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> Non-Resident			
	Employer's Name HIGH POINT UNIVERSITY			Address 833 MONTLIEU			Phone 336-841-9111					
	Also Known As (Alias Names)			Hgt '	Wgt 0	Hair	Eyes	Skin Tone	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk			
	Scars, Marks, Tattoos			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 type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input checked="" type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest 800 MONTLIEU AV, HIGH POINT							
	Charge #1 Trespass (second Degree)		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 2670	Offense Jurisdiction (if not arresting agency)		Statute # 14-159.13	Warr. Date			
	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 checked="" type="checkbox"/> Other		Bond Amount \$0.00		Trial Date 11/24/2014 08:30		Court Of High Point		City HIGH POINT			
	Assisting Officer Name/ID # 0			Released By (Name/Department/ID #) SHEARER, K. E.			Date/Time Released 09/13/2014 21:00:00					
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:				
	subject refused to leave facility, then refused to relinquish Identification.											
S T A T U S	Arresting Officer Signature/ID # SHEARER, K. E. (186696)			Date/Time Submitted 09/13/2014 21:09			Supervisor Signature FELDE, D. J.					
	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						