

## ARREST REPORT

AGENCY INFO	Agency Name <b>High Point Police Department</b>		ORI <b>0410300 H0001</b>		Date/Time Arrested <b>08/05/2014 20:03</b>		OCA <b>201423195</b>		
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)	Arrest Tract <b>1</b>		Residence Tract		Arrest Number <b>2690694</b>		
ARRESTEE INFO	Name (Last, First, Middle) <b>PRINCE, JOSEPH MILTON</b>			D.O.B.	Age <b>63</b>	Race <b>W</b>	Sex <b>M</b>	Place of Birth <b>WELCH, WEST VA., WV</b>	Country of Citizenship <b>US</b>
	Current Address <b>1004 Hickory Chapel Rd, HIGH POINT, NC 27260</b>			Phone <b>336-858-2620</b>		Occupation		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident	
	Employer's Name <b>RETIRED</b>			Address			Phone		
	Also Known As (Alias Names) <b>WALES, JOSEY; PRINCE, JOSEPH MILTON</b>			Hgt <b>6'01</b>	Wgt <b>150</b>	Hair <b>BRO</b>	Eyes <b>HAZ</b>	Skin Tone <b>FAR</b>	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk
	Scars, Marks, Tattoos <b>TATT LEFT WRIST / NAME IN HEBREW;</b>			Social Security #		OLN and State		Misc. # and Type	
	Nearest Relative Name			Address			Phone		
ARREST	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</b>		<input type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant		Place of Arrest <b>1004 HICKORY CHAPEL RD, HIGH POINT</b>				
	Charge #1 <b>Assault On A Female By Male Over 18 Years Of Age</b>	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>0810</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>14-33(C)(2)</b>	Warr. Date <b>08/05/2014</b>	
	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	
VEHICLE INFO	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? _____								
CONFINED	Date/Time Confined <b>08/05/2014 20:16:41</b>		Place Confined <b>507 E GREEN DR</b>		Committing Magistrate <b>KOKAJKO</b>				
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input checked="" type="checkbox"/> No Bond <input type="checkbox"/> Other		Bond Amount <b>\$0.00</b>	Trial Date <b>09/05/2014 08:30</b>		Court Of <b>Guilford County</b>		City <b>HIGH POINT</b>	
	Assisting Officer Name/ID # <b>0</b>			Released By (Name/Department/ID #)			Date/Time Released		
Status Codes	L - Lost   S - Stolen   R - Recovered   D - Damaged   Z - Seized   B - Burned   C - Counterfeit / Forged   F - Found								
DRUGS ARREST	DCI	Status	Quantity	Type Measure	Suspected Type		Check up to 3 types of activity for each		
							Possess	Buy	
							Sale	Mfg.	
							Importing	Operating	
COMP	Name: Complainant <input type="checkbox"/> Victim <input type="checkbox"/>			Address			Phone:		
	NARRATIVE								
STATUS	Arresting Officer Signature/ID # <b>JONES, S. M. (387766)</b>			Date/Time Submitted <b>08/05/2014 20:16</b>		Supervisor Signature <b>GOODMAN, J. T.</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				