

ARREST REPORT

AGENCY	Agency Name High Point Police Department		ORI 0410300 H0001		Date/Time Arrested 09/06/2014 14:28		OCA 201426814	
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)	Arrest Tract 2		Residence Tract 99		Arrest Number 2691444	
ARRESTEE	Name (Last, First, Middle) BROWN, MICHAEL WAYNE				D.O.B.	Age 29	Race W	Sex M
	Current Address 1263 Hill Rd Lot 11, LEXINGTON, NC 272926724				Phone		Occupation	<input type="checkbox"/> Resident <input checked="" type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown
	Employer's Name				Address			Phone
	Also Known As (Alias Names)				Hgt 5'9.	Wgt 0	Hair BRO	Eyes BLU
					Skin Tone	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk		
	Scars, Marks, Tattoos				Social Security #		OLN and State	
ARREST	Nearest Relative Name				Address			Phone
	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 398 S COLLEGE DR/LEONARD AV, HIGH POINT	
	Charge #1 Possess Schedule Vi		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 1810	Offense Jurisdiction (if not arresting agency)		Statute # 90-95(D)4
	Charge #2		<input type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts	DCI Code	Offense Jurisdiction (if not arresting agency)		Statute #
	Charge #3		<input type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts	DCI Code	Offense Jurisdiction (if not arresting agency)		Statute #
VEHICLE	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		Place Confined				Committing Magistrate	
	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 \$0.00		Trial Date 10/10/2014 08:30		Court Of Guilford County City HIGH POINT	
	Assisting Officer Name/ID # ANKNEY, P. L. 1		Released By (Name/Department/ID #) EHRHARDT, A. N.				Date/Time Released 09/06/2014 14:30:03	
Status Codes	L - Lost S - Stolen R - Recovered D - Damaged Z - Seized B - Burned C - Counterfeit / Forged F - Found							
DRUGS	DCI	Status	Quantity	Type Measure	Suspected Type		Check up to 3 types of activity for each	
	E	Z	0.98	GM	MARIJUANA		Possess Y	Buy
							Sale	Mfg.
							Importing	Operating
COMP	Name: Complainant <input type="checkbox"/> Victim <input type="checkbox"/>				Address			Phone:
	Found schedule VI in left cargo inside pocket.							
STATUS	Arresting Officer Signature/ID # EHRHARDT, A. N. (388474)				Date/Time Submitted 09/06/2014 14:28		Supervisor Signature HARRIS, V.	
	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		