## ARREST REPORT

| Α.                | Agency Name   |                |                |                |             |             |            | ORI                             |                        | Date/Time Arrested OC                   |  |                      |           |           |                    | OCA                               |                              |                              |  |  |
|-------------------|---|----------------|----------------|----------------|-------------|-------------|------------|---------------------------------|------------------------|---|--|----------------------|-----------|-----------|--------------------|-----------------------------------|------------------------------|------------------------------|--|--|
| G I<br>E N<br>N F | High Point Police Department  |                |                |                |             |             |            | 041030                          |                        |   | 07/08/2014 0                               |                      |           |           |                    |                                   | 01419796                     |                              |  |  |
| CO                | Taken   |                |                |                |             |             |            | Arrest Tract                    |                        |   | Residence Tract                            |                      |           | ll l      | Arrest Number      |                                   |                              |                              |  |  |
| Υ                 | ☐ Photos  |                |                |                |             |             |            | 7                               | 1 000                  | 7                                       |  |                      |           |           |                    | 690032  Place of Birth Country of |                              |                              |  |  |
| A R R E S T E E   | Name (Last, First, Middle)  STEPHENS, JUSTIN JARRELL  |                |                |                |             |             |            |                                 | D.O.B.                 |   | Age<br><b>22</b>                           | Race<br><b>B</b>     | Sex M     |           | F                  | Tace of Bi                        |                              | Country of<br>Citizenship    |  |  |
|                   | Current Address 501 Crestline Dr, HIGH POINT, NC 27260  |                |                |                |             |             |            |                                 | Phone <b>336-454-3</b> |   |  | Occupation           |           |           |                    |                                   |                              | Unknown                      |  |  |
|                   |   | er's Nam       |                |                | Addres      | 212         | 12 Student |                                 |                        |   | Non-Resident Phone                         |                      |           |           |                    |                                   |                              |                              |  |  |
|                   |   | NN F           |                |                | / lauroc    |             |            |                                 |                        |   |  |                      |           | 1         |                    |                                   |                              |                              |  |  |
|                   | Also Known As (Alias Names)   |                |                |                |             |             |            | •                               | Hgt                    | · I · · I                               |  |                      | Hair Eyes |           |                    | in Tone                           | Drug/Alcohol                 |                              |  |  |
|                   | Scars, Marks, Tattoos   |                |                |                |             |             |            | Social Secu                     | 5'06                   | 12                                      | 125 BLK OLN and State                      |                      |           |           |                    |                                   | FAR X Yes No Unk             |                              |  |  |
|                   | ocars, n  | viaiks, i      | attoos         |                | Social Sect | inty #      |            | OLIV and State                  |                        |   |  | miss. # and Type     |           |           |                    |                                   |                              |                              |  |  |
|                   | Nearest   | Relative       | Name           |                | Addres      | 20          |            |                                 |                        |   |  |                      |           |           |                    |                                   |                              |                              |  |  |
|                   | rvearest  | . Itciative    | rianie         |                | Address     |             | There      |                                 |                        |   |  |                      |           |           |                    |                                   |                              |                              |  |  |
| ARREST VEH        | If Armed, Type of Weapon ☐ On-View ☐ Cr   |                |                |                |             |             |            | al Summons                      | Plac                   | Place of Arrest                         |  |                      |           |           |                    |                                   |                              |                              |  |  |
|                   |   |                |                |                |             |             |            |                                 | Warrant                |   | 2860 N MAIN ST, HIGH POINT                 |                      |           |           |                    |                                   |                              |                              |  |  |
|                   | Charge #1 Possess Control Substance Schedule Vi   |                |                |                |             |             |            | Counts                          |                        |   | Offense Jurisdiction (if not arresting age |                      |           |           | agency)            | S                                 | Warr. Date                   |                              |  |  |
|                   | Misd  |                |                |                |             |             |            | Counts                          | 1810<br>DCI Code       |   | Offense Jurisdiction (if not arresting     |                      |           |           | nannau)            | 90-9                              | <b>07/08/2014</b> Warr. Date |                              |  |  |
|                   | Charge #2 Possession Of Drug Paraphernalia  |                |                |                |             |             |            | Couris                          |                        |   | Offense Junsuiction (if not and            |                      |           | iresung   | agency)            |                                   | tatute #                     |                              |  |  |
|                   | Charge #3   |                |                |                |             |             |            | Counts                          | 1834<br>DCI Code       | Of                                      | Offense Jurisdiction (if not arre          |                      |           |           | agency)            |                                   | 113.22<br>tatute #           | <b>07/08/2014</b> Warr. Date |  |  |
|                   | ☐ Fel ☐ Misd  |                |                |                |             |             |            |                                 |                        | (                                       |  |                      |           | 3,,       |                    |                                   |                              |                              |  |  |
|                   | VYR   | Ma             | ake            | Model          | - ;         | Style       |            | Color                           | Plate #/State          | ,                                       |  |                      | VIN       |           |                    |                                   |                              |                              |  |  |
|                   |   |                |                |                |             |             |            |                                 |                        |   |  |                      |           |           |                    |                                   |                              |                              |  |  |
|                   | Vehicle   |                | Left at Scene  |                | Secured     |             |            | ih a z                          | Date/Time_             |   |  |                      |           |           |                    |                                   |                              |                              |  |  |
|                   | Released to other at owners request  Name of Other Inventory on File? |                |                |                |             |             |            |                                 |                        |   |  |                      |           |           |                    |                                   |                              |                              |  |  |
| CONFINE           | Date/Tir  | me Confi       | ned            |                | Place C     | confined    |            |                                 |                        |   |  |                      | Com       | mitting N | lagistrate         |                                   |                              |                              |  |  |
|                   | Type Bond Bond Amount   |                |                |                |             |             |            | Trial Date Court Of             |                        |   |  |                      |           | City      |                    |                                   |                              |                              |  |  |
|                   | ☐ Written Promise ☐ Unsecured   |                |                |                |             |             | .00        | 08/15/2                         |                        |   |  |                      |           |           |                    | POINT                             |                              |                              |  |  |
|                   | Secured No Bond St Other  Assisting Officer Name/ID #   |                |                |                |             |             |            | Release                         | rtment/                | ment/ID #)                              |  |                      |           | D         | Date/Time Released |                                   |                              |                              |  |  |
| D                 |   |                |                |                |             |             |            |                                 |                        |   |  |                      |           |           |                    |                                   |                              |                              |  |  |
| Status<br>Codes   | L - Lost  | t S-           | - Stolen R - R | ecovered       | D - Dama    | ged Z - Sei | zed        | B - Burne                       | d C - Counte           | rfeit / F                               | orged                                      | F - I                | ound      |           |                    |                                   |                              |                              |  |  |
| A RRA T ST        | DCI Status Quantity Type Measure  |                |                |                |             |             |            | Suspecte                        |                        | Check up to 3 type Possess Buy Sale Mfg |  |                      |           |           |                    |                                   |                              |                              |  |  |
|                   | E Z 0.64 GM   |                |                | <del>и  </del> | MARIJUAN    |             |            |                                 | -                      | Y                                       | Buy  | Sale                 | Mfg.      | Importing | Operating          |                                   |                              |                              |  |  |
|                   |   | Sig. Sim MARIO |                |                |             |             | 302        |                                 |                        |   |  |                      | •         |           |                    |                                   |                              |                              |  |  |
|                   |   |                |                |                |             |             |            |                                 |                        |   |  |                      |           |           |                    |                                   |                              |                              |  |  |
| G T E             |   |                |                |                | -           |             |            |                                 |                        |   |  | _                    |           |           |                    |                                   |                              |                              |  |  |
| ٠ ١               |   |                |                |                |             |             |            |                                 |                        |   |  |                      |           |           |                    |                                   |                              |                              |  |  |
|                   |   |                |                |                |             |             |            |                                 |                        |   |  |                      |           |           |                    |                                   |                              |                              |  |  |
|                   |   |                |                |                |             |             |            |                                 |                        |   |  |                      |           |           |                    |                                   |                              |                              |  |  |
| С                 | Name:   | Comp           | lainant□       |                | Address     |             |            |                                 |                        |   |  |                      | Ph        | none:     |                    |                                   |                              |                              |  |  |
| С<br>О<br>М       |   |                | _              |                |             |             |            |                                 |                        |   |  |                      |           |           |                    |                                   |                              |                              |  |  |
| P<br>N            | No warrants.  |                |                |                |             |             |            |                                 |                        |   |  |                      |           |           |                    |                                   |                              |                              |  |  |
| A<br>R            | 1,0 .   | · u = - u      |                |                |             |             |            |                                 |                        |   |  |                      |           |           |                    |                                   |                              |                              |  |  |
| R<br>A            |   |                |                |                |             |             |            |                                 |                        |   |  |                      |           |           |                    |                                   |                              |                              |  |  |
| Ţ                 |   |                |                |                |             |             |            |                                 |                        |   |  |                      |           |           |                    |                                   |                              |                              |  |  |
| V<br>E            |   |                |                |                |             |             |            |                                 |                        |   |  |                      |           |           |                    |                                   |                              |                              |  |  |
| S<br>T            | Arresting Officer Signature/ID #  |                |                |                |             |             |            | Date/Time Submitted             |                        |   |  | Supervisor Signature |           |           |                    |                                   |                              |                              |  |  |
| Α                 | MYERS, B. J. (385027)   |                |                |                |             |             |            | 07/08/2014 04:58 O`TOOLE, P. B. |                        |   |  |                      |           |           |                    |                                   |                              |                              |  |  |
| T<br>U            | Case Status: Case Disposition:  ☐ Further Inv. ☐ Case Disposition: ☐ Case Disposition: ☐ Case Disposition:  |                |                |                |             |             |            | ded                             | Arrestee S             | ignature                                | е  |                      |           |           |                    |                                   |                              |                              |  |  |
| S                 |   |                |                |                |             |             |            |                                 |                        |   |  |                      |           |           |                    |                                   |                              |                              |  |  |

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