ARREST REPORT

Α.	Agency Name							ORI		Date	Date/Time Arrested OCA								
G I E N N F	High Point Police Department							041030		-			11:50		201	201424776			
CO	Taken Fingerprint Card Check Digit # (CKN) □ Prints							Arrest Trac	t		Residence Tract			Ш	rest Num				
Υ	☐ Photos							4	T 202	4			1 0	_ -	2690998				
A RRESTEE	Name (Last, First, Middle) ROBINSON, JAMES RAY								D.O.B.		Age 51	Race W	Sex M		ŀ	Place of Bi		Country of Citizenship	
	Current Address								Phone 336-247-6856				Occupation			I I Re		Unknown	
	235 Dorothy St, B, HIGH POINT, NC 27262 Employer's Name							Addre	6 Unemployed				yed	Non-Resident Phone					
	Lilipioy	CI 3 INGIII	16			Addie	33								Thore				
	Also Known As (Alias Names)							Į.	Hgt 6'00		Wgt 160		1 1				Drug/Alcohol		
	Scars, Marks, Tattoos							Social Sec				l and Sta	itate			/lisc. # and Type			
	Nearest	t Relative	e Name		Addre	Address						Pho	ne						
4 K K H S H S H S H S H S H S H S H S H S	If Armed, Type of Weapon ☐ On-View ☐ Cri							al Summons	Pl	Place of Arrest									
	NOT APPLICABLE/NONE						☐ Ci		Warrant		235 DOROTHY ST - B, HIGH POINT								
	Charge #1 Failure To Appear □ Fel							Counts	DCI Code	"	· · · · · · · · · · · · · · · · · · ·						Warr. Date		
	Misd						1		2640		GREENSBORO					F	TA	05/23/2014	
	Charge #2					☐ Fel ☐ Misd		Counts	DCI Code		Offense Jurisdiction (if not arre				ng agency) Statute #			Warr. Date	
	Charge	#3			☐ Fel ☐ Misd		Counts	DCI Code Offense			se Jurisdiction (if not arresting agency)				Statute #		Warr. Date		
	VYR Make Model				Style			Color	Plate #/State	e	VIN								
	Vehicle		Left at Scene		Secured			thor	Date/Time_										
	2. Released to other at owners request Name of Other Inventory on File? Inventory on File?																		
CONFINED		me Confi		/ IA	Committing Magistrate NEWMAN														
	08/19/2014 12:25:00 GUIL. COUNTY Type Bond Bond Amount							Trial Date		Court Of City									
	☐ Written Promise ☐ Unsecured						.00		2014 08:30	ll l							HIGH POINT		
	Assisting Officer Name/ID #					Released			d By (Name/Department/ID #)				D				Date/Time Released		
Status	tus																		
Codes			<u> </u>		D Baina	.gou 2 00.							i ouila	С	heck up to	3 types	of activity for	each	
D A	DCI Status Quantity Type M				1easure			Suspected Type			Poss			Buy	Sale	Mfg.	Operating		
												_			1				
D R R AR U T S G S										-									
G 'S																			
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ŀ		 										_							
C O M	Name: Complainant☐ Victim ☐								Address					Phone:					
Р	T legated the gubiest at his mesidence as publicat with support																		
N A R	1 10	I located the subject at his residence, no problems with arrest.																	
R	Dock	tet#	14CR70985	8															
A T																			
V E																			
S	Arrestin	g Officer	r Signature/ID #				Dat	Date/Time Submitted				Supervisor Signature							
Ť	BURKHOLDER, A. S. (309628)							08/1	9/2014 11	:50	II .								
т	Case Status: Case Disposition:							Arrestee Signature											
Ü S	☐ Further Inv. ☐ Cleared By Arrest / No Suppleme ☐ Arrest / No Investigation						nt Need	eded											
	DCI co																	D 0/0	

DCI-608F Rev. 3/92