

ARREST REPORT

AGENCY	Agency Name High Point Police Department		ORI 0410300 H0001		Date/Time Arrested 09/16/2014 05:13		OCA 201427820					
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) QQ8374T	Arrest Tract		Residence Tract 6		Arrest Number 2691652					
ARRESTEE	Name (Last, First, Middle) HAYES, JOVAN TREMAYNE			D.O.B.	Age 27	Race B	Sex M	Place of Birth HIGH POINT, NC	Country of Citizenship US			
	Current Address 1138 Montlieu Av, HIGH POINT, NC 27262			Phone 336-989-0834		Occupation Unemployed		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name UNEMPLOYED			Address			Phone 336- -					
	Also Known As (Alias Names) HAYES, JOVAN TREMAYNE; HOVA; HOV			Hgt 6'01	Wgt 150	Hair BLK	Eyes BRO	Skin Tone MED	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos TATT RIGHT NECK / JOVAN; TATT LEFT			Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name			Address				Phone				
ARREST	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 type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant		Place of Arrest 505 E GREEN DR, HIGH POINT							
	Charge #1 Assault On A Female By Male Over 18 Years Of Age		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 0810	Offense Jurisdiction (if not arresting agency)		Statute # 14-33(C)(2)	Warr. Date 09/13/2014			
	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	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 09/16/2014 05:15:27		Place Confined 507 E GREEN DR			Committing Magistrate NEWMAN						
	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 10/20/2014 08:30		Court Of Guilford County		City HIGH POINT				
	Assisting Officer Name/ID # 0			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	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:				
	Same turned himself in and was processed.											
STATUS	Arresting Officer Signature/ID # JONES, S. M. (387766)			Date/Time Submitted 09/16/2014 05:13		Supervisor Signature GOODMAN, J. T.						
	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							