## ARREST REPORT

Α.	Agency	Name			ORI			Date/Time Arrested OCA											
G I E N N F	High Point Police Department							041030		-						201428447			
CO	Taken Fingerprint Card Check Digit # (CKN)							Arrest Trac	t	Residence Tract				Arrest Number					
Y	Photos							1	505	2			26917						
4 R R E S T E E	Name (Last, First, Middle)  WORKMAN, MATTHEW RYAN								D.O.B. Age			Race <b>W</b>	Sex M		r	Place of B		Country of Citizenship	
	Current Address								Phone	<del>-  </del>	Occupation	1		<b>I I</b> R∈	sident	Unknown			
	520 E Fairfield Rd, HIGH POINT, NC 27260								336-991-4	4310			Unemployed			☐ Non-Resident			
	Employer's Name SPOOKY WOODS							Addres		E KIVETT D			DR., HIGH POINT NC			Phone <b>336</b>			
	Also Known As (Alias Names)								5'10		Wgt 145	BL	· · ·			kin Tone   Consumed Drug/Alcohol  LGT   Yes 🔼 No 🗌 Unk			
	Scars, Marks, Tattoos							Social Sec	urity #		OLN and State				Misc. # and Type				
	Nearest Relative Name							Addres	SS						II	Pho	ne		
	If Armed, Type of Weapon							al Summons		Place of Arrest									
4 K K H W H W H W H W H W H W H W H W H W							<b>⊠</b> Ci		Warrant	∥ 2	2413 BRENTWOOD ST,								
	Charge #1 Trespass (second Degree)  □						1	Counts	DCI Code <b>2670</b>				risdiction (if not arresting agency)				Statute # 14-159.13		
	Charge #2					☐ Fel ☐ Misd		Counts	DCI Code	Offense Jurisdi			ction (if not arresting agency)			Statute #		Warr. Date	
	Charge	#3			☐ Fel		Counts	DCI Code		Offense Jurisdiction (if not arre				g agency) Statute #			Warr. Date		
	VYR Make Model				;	☐ Misd Style		Color	Plate #/State	)			VIN						
	Vehicle	1.	☐ Left at Scene	ecure	Date/Time														
			Released to ot	_	•	☐ Nam	ne of O	ther											
С	Date/Tir	3. I me Confi	☐ Impounded ined	☐ Place of	storage_ Place C	onfined							II Com	mittina N	Magistrate	Inventory	on File?		
O B O N D E	2413 BRENTWO																		
	Type Bond Bond Amount  Unsecured							Trial Date 10/24/2014 08:30				Court Of City  Guilford County HIGH POINT							
	Secured No Bond S Other Assisting Officer Name/ID #					<b>———</b>	•			By (Name/Department/ID #)							Date/Time Released		
D							JONES, S. M.								09/2	2/2014 0	<u>5:05:15</u>		
Status Codes	tus des L - Lost S - Stolen R - Recovered D - Damaged Z - Seized B - Burned C - Counterfeit / Forged F - Found  Check up to 3 types of activity for each																		
D A	DCI Status Quantity Type Mea							Suspecte	Suspected Type			4	Possess	Buy	Sale	Mfg.	of activity for of	Operating	
											. 000000	24,	Caio	g.	porg	operag			
D R AR U G S											_								
G S																			
<b>'</b>																			
												_							
												-+			-				
C O M	Name: Complainant☐ Victim ☐								Address							Pł	ione:	!	
P N	Cite and release for trespassing. See field sheet for further.																		
A R	CILE	anc	llelease	IOI CIE	spass	ing. se	:e 1	.ieid s	neet for	Lui	ciiei	•							
R A																			
Ţ																			
V E																			
s	Arrestin	g Officer	Signature/ID#		Dat	Date/Time Submitted				Supervisor Signature									
T A	JONES, S. M. (387766)							09/22/2014 05:02					HARRIS, V.						
T U	Case Status: Case Disposition:  ☐ Further Inv. ☐ Case Disposition: ☐ Further Inv. ☐ Case Disposition: ☐ Case Status: Case Disposition:						Arrestee Signature												
š	☐ Ina	ctive	☑ Closed	Arrest /	-		• • • • • • • • • • • • • • • • • • • •												

DCI-608F Rev. 3/92