

## ARREST REPORT

A G E N C Y	Agency Name <b>High Point Police Department</b>		ORI <b>0410300 H0001</b>		Date/Time Arrested <b>07/11/2014 09:31</b>		OCA <b>201420153</b>					
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract <b>2</b>		Residence Tract <b>2</b>		Arrest Number <b>2690126</b>				
A R R E S T E E	Name (Last, First, Middle) <b>PORTER, GARY LEE</b>			D.O.B.		Age <b>48</b>	Race <b>W</b>	Sex <b>M</b>	Place of Birth <b>MEBANE, NC</b>	Country of Citizenship <b>US</b>		
	Current Address <b>409 Friddle Dr, HIGH POINT, NC 27260</b>			Phone <b>336-471-9539</b>		Occupation		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name <b>UNEMPLOYED</b>			Address			Phone <b>336-905-7220</b>					
	Also Known As (Alias Names)			Hgt <b>6'01</b>	Wgt <b>230</b>	Hair <b>BLN</b>	Eyes <b>BLU</b>	Skin Tone <b>FAR</b>	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos <b>SCAR LOWR ABDOMEN / TWO (2) SCARS;</b>			Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name			Address			Phone					
A R R E S T	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</b>		<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 <b>409 FRIDDLE DR, HIGH POINT</b>							
	Charge #1 <b>Interfering With Electric Gas Or Water Meters</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>0690</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>14-151.1</b>	Warr. Date <b>07/11/2014</b>			
	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			
V E H I C L E	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? _____											
C O N F I N E D	Date/Time Confined		Place Confined			Committing Magistrate						
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other		Bond Amount <b>\$0.00</b>		Trial Date <b>08/15/2014 08:30</b>		Court Of <b>Guilford County</b>		City <b>HIGH POINT</b>			
	Assisting Officer Name/ID # <b>0</b>			Released By (Name/Department/ID #) <b>MANZO, J. A.</b>			Date/Time Released <b>07/11/2014 10:30:56</b>					
Status Codes	L - Lost   S - Stolen   R - Recovered   D - Damaged   Z - Seized   B - Burned   C - Counterfeit / Forged   F - Found											
D R U G S	DCI	Status	Quantity	Type Measure	Suspected Type		Check up to 3 types of activity for each					
							Possess	Buy	Sale	Mfg.	Importing	Operating
C O M P	Name: Complainant <input type="checkbox"/> Victim <input type="checkbox"/>			Address				Phone:				
	Subject was cited for tampering with electric meter at this residence. City services advised that they have had numerous incidents with Porter and records showing they have cut off power and he has tampered with the machine to get same back on.											
S T A T U S	Arresting Officer Signature/ID # <b>MANZO, J. A. (391191)</b>			Date/Time Submitted <b>07/11/2014 10:39</b>			Supervisor Signature <b>KUN, M. A.</b>					
	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							