

## 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>09/13/2014 22:30</b>		OCA <b>201427560</b>		
	Taken <input checked="" type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) <b>QQ8359P</b>	Arrest Tract		Residence Tract <b>99</b>		Arrest Number <b>2691605</b>		
A R R E S T E E	Name (Last, First, Middle) <b>WHEELER, KRISTEEN MARIE</b>			D.O.B.	Age <b>18</b>	Race <b>W</b>	Sex <b>F</b>	Place of Birth <b>RIVERSIDE, CA</b>	Country of Citizenship <b>US</b>
	Current Address <b>108 Byrewood Dr, JAMESTOWN, NC 272829549</b>			Phone <b>951-323-7449</b>		Occupation <b>Server</b>		<input type="checkbox"/> Resident <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> Non-Resident	
	Employer's Name <b>MOOSE CAFE</b>			Address <b>SANDY RIDGE RD</b>			Phone <b>336-668-1125</b>		
	Also Known As (Alias Names)			Hgt <b>5'05</b>	Wgt <b>190</b>	Hair <b>BRO</b>	Eyes <b>BRO</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			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 type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant		Place of Arrest <b>5430 SAMET DR, HIGH POINT</b>				
	Charge #1 <b>Poss Cont Subst W/intent Manuf Sched Iv</b>	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>1810</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>90-95(A)IM4</b>	Warr. Date <b>08/29/2014</b>	
	Charge #2 <b>Possession Of Controlled Substance</b>	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>1810</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>90-95(D)2</b>	Warr. Date <b>08/29/2014</b>	
	Charge #3 <b>Possession Of Drug Paraphernalia</b>	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>1834</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>90-113.22</b>	Warr. Date <b>08/29/2014</b>	
V E H I C L E	VYR <b>2010</b>	Make <b>CHEV</b>	Model <b>COBALT</b>	Style <b>4S</b>	Color <b>BLK</b>	Plate #/State <b>ZRF6677 NC 2013</b>	VIN <b>1G1AB5F53A7170966</b>		
	Vehicle 1. <input type="checkbox"/> Left at Scene <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured 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 _____ Date/Time <b>09/13/2014 00:00</b> <b>ALOT</b> Inventory on File? _____								
C O N F I N E D	Date/Time Confined		Place Confined			Committing Magistrate <b>BRANNON</b>			
	Type Bond <input checked="" 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>10/17/2014 08:30</b>		Court Of <b>Guilford County</b>		City <b>WINSTON SALEM</b>	
	Assisting Officer Name/ID # <b>0</b>			Released By (Name/Department/ID #) <b>WADE, C. E.</b>			Date/Time Released <b>09/13/2014 23:30:00</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:	
S T A T U S	Arresting Officer Signature/ID # <b>WADE, C. E. (319243)</b>			Date/Time Submitted <b>09/14/2014 01:51</b>		Supervisor Signature <b>ENGLISH, W. 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				