

## ARREST REPORT

AGENCY	Agency Name <b>High Point Police Department</b>		ORI <b>0410300 H0001</b>		Date/Time Arrested <b>07/23/2014 05:51</b>		OCA <b>201412564</b>					
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) <b>QQ7892C</b>	Arrest Tract		Residence Tract <b>99</b>		Arrest Number <b>2690375</b>					
ARRESTEE	Name (Last, First, Middle) <b>GOINS, BRENDA RENEE</b>			D.O.B.	Age <b>20</b>	Race <b>B</b>	Sex <b>F</b>	Place of Birth <b>GREENSBORO, NC</b>	Country of Citizenship <b>US</b>			
	Current Address <b>1509 Bellevue St, GREENSBORO, NC 27406</b>			Phone <b>336-493-2564</b>		Occupation <b>Unemployed</b>		<input type="checkbox"/> Resident <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> Non-Resident				
	Employer's Name			Address			Phone <b>336- -</b>					
	Also Known As (Alias Names)			Hgt <b>5'07</b>	Wgt <b>135</b>	Hair <b>BRO</b>	Eyes <b>BRO</b>	Skin Tone <b>MED</b>	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos <b>TATT RIGHT NECK / VIRGO SYMBOL; TATT</b>			Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name			Address			Phone					
ARREST	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>1813 S MAIN ST, HIGH POINT</b>							
	Charge #1 <b>Robbery With Firearms Or Other Dangerous Weapons</b>		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>0300</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>14-87</b>	Warr. Date <b>05/04/2014</b>			
	Charge #2 <b>Assault With Deadly Weapon Inflicting Serious Inj.</b>		<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>0410</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>14-32(B)</b>	Warr. Date <b>05/04/2014</b>			
	Charge #3		<input type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts	DCI Code	Offense Jurisdiction (if not arresting agency)		Statute #	Warr. Date			
VEHICLE	VYR <b>2003</b>	Make <b>NISS</b>	Model <b>MAXIMA</b>	Style <b>4S</b>	Color <b>GRY</b>	Plate #/State <b>CAD2031 NC</b>	VIN <b>JN1DA31A43T424374</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>07/23/2014 00:00</b> <b>ALOT</b> Inventory on File? _____											
CONFINED	Date/Time Confined <b>07/23/2014 05:30:53</b>		Place Confined <b>HIGH POINT</b>			Committing Magistrate <b>LANDEN</b>						
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input checked="" type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other		Bond Amount <b>\$35,000.00</b>	Trial Date <b>09/12/2014 08:30</b>		Court Of <b>Guilford County</b>		City <b>HIGH POINT</b>				
	Assisting Officer Name/ID # <b>REAMS, T. C. 1</b>			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:				
	Checked by the PIT no other warrants located.											
STATUS	Arresting Officer Signature/ID # <b>TORRES, A. N. (392832)</b>			Date/Time Submitted <b>07/23/2014 06:01</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							