

## ARREST REPORT

<b>A G E N C Y</b>	Agency Name <b>High Point Police Department</b>			ORI <b>0410300 H0001</b>		Date/Time Arrested <b>08/07/2014 14:46</b>		OCA <b>201423508</b>	
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos		Fingerprint Card Check Digit # (CKN)		Arrest Tract <b>7</b>		Residence Tract <b>7</b>		Arrest Number <b>2690739</b>

  

<b>A R R E S T E E</b>	Name (Last, First, Middle) <b>FOLEY, MICHAEL TODD</b>				D.O.B.		Age <b>51</b>		Race <b>W</b>		Sex <b>M</b>		Place of Birth <b>HIGH POINT, NC, NC</b>		Country of Citizenship <b>US</b>			
	Current Address <b>2860 N Main St, 142, HIGH POINT, NC 27265</b>						Phone <b>336-727-4183</b>		Occupation <b>Unemployed</b>		<input type="checkbox"/> Resident <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> Non-Resident							
	Employer's Name <b>T. FOLEY AND ASSOCIATES, INC.</b>						Address <b>GREENSBORO</b>						Phone <b>336-307-6258</b>					
	Also Known As (Alias Names) <b>FOLEY, TODD</b>						Hgt <b>5'10</b>		Wgt <b>170</b>		Hair <b>BLN</b>		Eyes <b>GRN</b>		Skin Tone <b>MED</b>		Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk	
	Scars, Marks, Tattoos <b>SCAR UNDE LIP / SMALL</b>						Social Security #		OLN and State		Misc. # and Type							
	Nearest Relative Name						Address						Phone					

  

<b>A R R E S T</b>	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>2860 N MAIN ST - 142, HIGH POINT</b>								
	Charge #1 <b>Larceny</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>14-72(A)</b>		Warr. Date <b>08/07/2014</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	

  

<b>V E H I C L E</b>	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? _____													

  

<b>C O N F I N E D</b>	Date/Time Confined			Place Confined			Committing Magistrate <b>KOKAJKO</b>				
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input type="checkbox"/> No Bond <input checked="" type="checkbox"/> Other			Bond Amount <b>\$1,000.00</b>		Trial Date <b>09/05/2014 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>FINN, S. M.</b>			Date/Time Released <b>08/07/2014 15:15:00</b>				

  

Status Codes   L - Lost   S - Stolen   R - Recovered   D - Damaged   Z - Seized   B - Burned   C - Counterfeit / Forged   F - Found											
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<b>D R U G S</b>	DCI   Status   Quantity   Type Measure   Suspected Type					Check up to 3 types of activity for each					
						Possess	Buy	Sale	Mfg.	Importing	Operating

  

<b>C O M P</b>	Name:   Complainant <input type="checkbox"/> Victim <input type="checkbox"/>				Address				Phone:			
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<b>N A R R A T I V E</b>	This subject was located at his residence on a warrant for arrest for misdemeanor larceny. This subject was transported to the County Building and brought before Magistrate Kokajko. This subject was then released from custody on a \$1000 unsecured bond. There were no incidents with arrest.											
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<b>S T A T U S</b>	Arresting Officer Signature/ID # <b>FINN, S. M. (387468)</b>				Date/Time Submitted <b>08/07/2014 19:20</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			