ARREST REPORT

Α.	Agency Name							ORI	Date/Time Arrested OCA										
G I E N N F	High Point Police Department							041030	0 H0001	09	/14/2	014	23:00 20			201427673			
N F C O	Taken Fingerprint Card Check Digit # (CKN)							Arrest Tract		Resi	Residence Tract			Aı	Arrest Number				
Ŷ	☐ Photos							3	3						2691624				
A RR EST EE	Name (Last, First, Middle)								D.O.B.					Place of B		Country of Citizenship			
	ROGERS, SAMANTHA GAIL										24	W F HIGH POINT, NO US							
	Current Address								Phone		' Т	Occupatio	n		□ X Re	esident I	Unknown		
	301 W Green St, HIGH POINT, NC 27260								336-472-4712					Unemployed					
	' '	er's Nam		Addres	Address								Phone						
			(Alias Names)			Hgt		Wgt Ha		air Eyes		S	Skin Tone Consumed		Drug/Alcohol				
			T, VICTOR	NTF	IA GAI	-	1	120 BL		1 ' 1					□ No 🍱 Unk				
		Marks, Ta				Social Secu		!	OLN and Sta		tate	ate		Misc. # and Type					
	TATT LEFT WRIST / ROSE; PRCD LEFT LIP /																		
		Relative		,			- '	Addres	S		<u> </u>				Pho	ne			
A I N F O T								I Summons	II	Place of Arrest									
	NOT APPLICABLE/NONE						Cit	tation L	Warrant DCI Code		1099 CASSELL ST/FLINT AV, HIGH POINT							Warr. Date	
	Failure To Appear					☐ Fel	_	Counts											
	Misd						1 Counts		2640 DCI Code		Offense Jurisdiction (if not arro				agonovi	FTA Statute #		09/10/2014 Warr. Date	
	Charge #2					☐ Fel ☐ Misd	'	Counts	DOI Code		Offerise Jurisdiction (I			(ii flot arresting agency)			natute #	Wall. Date	
	Charge	#3						Counts	DCI Code	0	Offense Jurisdiction (if not			arresting	agency)	Statute #		Warr. Date	
	3					☐ Fel ☐ Misd					Cherica danicalem (ii net air			3	3,,				
V E F O	VYR Make Model				Style			Color	Plate #/State	,	VIN								
	Vehicle 1. Left at Scene Secured Unsecure Date/Time																		
	2. ☐ Released to other at owners request ☐ Name of Other Inventory on File? Inventory on File?																		
CONFINE	Date/Ti	ne Confi		riace of	Place Co	onfined							Con	nmitting N	Magistrate		0111110:		
	09/14/2014 23:50:00 505 E GREEN												NEWMAN						
	Type Bond Bond Amount □ Written Promise □ Unsecured □ Bond Amount						00	Trial Date				Court Of City Guilford County HIGH POINT							
	24 Secured No Borid Other						10/20/2014 08:30												
D	Assisting Officer Name/ID #							Released By (Name/Department				ent/ID #)				Date/Time Released			
Status Codes	iatus L - Lost S - Stolen R - Recovered D - Damaged Z - Seized B - Burned C - Counterfeit / Forged F - Found																		
	D.01	0							С	heck up to	o 3 types	of activity for	each						
	DCI Status Quantity Type M				leasure		Suspecte	spected Type				Possess	Buy	Sale	Mfg.	Importing	Operating		
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U AR												+							
R AR F O G S																			
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ŀ	 																		
co	Name:	Comp	lainant□	Victim			Address								Ph	none:			
M																			
P N	On this date I served Rodgers with an OFA/FTA. She was taken before the magistrate and given a															n a			
A R			secured b		_									_		ace a	iid give	:II	
R A																			
Ť																			
V E																			
s	Arrestin	g Officer	Signature/ID#	Date	Date/Time Submitted				Supervisor Signature										
Ť A	SPOON, J. M. (392213)							09/15/2014 01:11				GREEN, T. L.							
Т	Case Status: Case Disposition:								Arrestee Signature										
U	Further Inv. Inactive						nt Need	ded	а										
S	☐ Ina	ctive	Liosed	L Allest	140 IIIVOOLIC														

DCI-608F Rev. 3/92