## ARREST REPORT

| Α.                | Agency Name  |          |                                 |              |                              |               |          |                    |                         | Date                             | Date/Time Arrested OCA                |                  |  |                      |                                |             |                      |                              |  |
|-------------------|--|----------|---------------------------------|--------------|------------------------------|---------------|----------|--------------------|-------------------------|----------------------------------|---------------------------------------|------------------|--|----------------------|--------------------------------|-------------|----------------------|------------------------------|--|
| G I<br>E N<br>N F | High Point Police Department   |          |                                 |              |                              |               |          | 041030             |                         |                                  |                                       |                  |  |                      |                                | 201418593   |                      |                              |  |
| CO                | Taken Fingerprint Card Check Digit # (CKN)   |          |                                 |              |                              |               |          | Arrest Tract       | t                       |                                  | idence 7                              | Tract            |  | ll l                 | rest Num                       |             |                      |                              |  |
| Υ                 | ☐ Photos   |          |                                 |              |                              |               |          | 2                  |                         | 99                               |                                       |                  |  |                      | 2689785                        |             |                      | <u> </u>                     |  |
| A RR ESTEE        | Name (Last, First, Middle)  DONNELL, THERON MILORD   |          |                                 |              |                              |               |          |                    | D.O.B.                  |                                  | Age<br><b>24</b>                      | Race<br><b>B</b> | Sex M  |                      | F                              | Place of Bi |                      | Country of<br>Citizenship    |  |
|                   | Current Address 706 Brookwood Cir, ARCHDALE, NC 27263  |          |                                 |              |                              |               |          |                    | Phone <b>336-215-2</b>  | 790                              | 790 Cccupation                        |                  |  |                      |                                | ☐ Re        | sident<br>n-Resident | ☑ Unknown                    |  |
|                   | Employer's Name CONTRACT PACKAGING RESOURCES   |          |                                 |              |                              |               |          | Addres             | RIAI                    | IAL VILLAGE RD GREE              |                                       |                  |  | ENSBORO 336-665-1300 |                                |             |                      |                              |  |
|                   | Also Known As (Alias Names)  |          |                                 |              |                              |               |          |                    | Hgt                     | 1                                | Wgt Hair                              |                  |  | Eyes                 | 1 11                           |             |                      | Drug/Alcohol                 |  |
|                   | Scars, Marks, Tattoos  |          |                                 |              |                              |               |          | Social Secu        | rity #                  |                                  | OLN and State                         |                  |  |                      | Misc. # and Type               |             |                      |                              |  |
|                   | Nearest Relative Name  |          |                                 |              |                              |               |          | Addres             | ss                      |                                  |                                       |                  |  |                      | Ш                              | Pho         | ne                   |                              |  |
| ARREST - ZEO      | If Armed, Type of Weapon ☐ On-View ☐ Cri   |          |                                 |              |                              |               |          | al Summons         | Pla                     | Place of Arrest                  |                                       |                  |  |                      |                                |             |                      |                              |  |
|                   | NOT APPLICABLE/NONE  |          |                                 |              |                              |               | ☐ Cit    |                    | Warrant                 | 5                                | 505 E GREEN DR, HIGH POINT            |                  |  |                      |                                |             |                      |                              |  |
|                   | Charge #1 Failure To Appear  |          |                                 |              |                              |               | 1        | Counts             | DCI Code<br><b>2640</b> |                                  |                                       |                  | risdiction (if not arresting agency)                                       |                      |                                |             | tatute #             | Warr. Date <b>05/28/2014</b> |  |
|                   | Charge   |          |                                 | ☐ Fel ☐ Misd |                              | Counts        | DCI Code |                    |                         |                                  | urisdiction (if not arresting agency) |                  |  |                      | tatute #                       | Warr. Date  |                      |                              |  |
|                   | Charge #3  |          |                                 |              |                              | ☐ Fel ☐ Misd  |          | Counts             | DCI Code                | C                                | Offense C                             | Jurisdicti       | on (if not a   | rresting             | agency)                        | Statute #   |                      | Warr. Date                   |  |
|                   | VYR Make Model   |          |                                 | Model        |                              | Style         |          | Color              | Plate #/State           | VIN                              |                                       |                  |  |                      |                                |             |                      |                              |  |
|                   | Vehicle  |          | ☐ Left at Scene☐ Released to ot | _            | Secured request              |               |          | ther_              | Date/Time_              |                                  |                                       |                  | l  |                      |                                |             |                      |                              |  |
| Ŭ                 | 2. Released to other at owners request Name of Other 3. Impounded Place of storage Inventory on File?  |          |                                 |              |                              |               |          |                    |                         |                                  |                                       |                  |  |                      |                                |             |                      |                              |  |
| CONF-NE           | Date/Tir   | me Confi | ined                            |              | Committing Magistrate  KIMEL |               |          |                    |                         |                                  |                                       |                  |  |                      |                                |             |                      |                              |  |
|                   | Type Bond Bond Amount  |          |                                 |              |                              |               |          | Trial Date Co      |                         |                                  |                                       | ırt Of           |  |                      | (                              | City        |                      |                              |  |
|                   | La Secureu Li No Boriu Li Otriei   |          |                                 |              |                              |               | .00      |                    | 2014 08:30 G            |                                  | Guilford County                       |                  |  |                      | HIGH POINT  Date/Time Released |             |                      |                              |  |
| D                 | Assisting Officer Name/ID #  |          |                                 |              |                              |               |          | MANZO, J. A.       |                         |                                  |                                       |                  | 06/27/2014 11:00:06  |                      |                                |             |                      |                              |  |
| Status<br>Codes   | L - Los  | t S      | - Stolen R - R                  | ecovered     | D - Dama                     | iged Z - Seiz | zed      | B - Burne          | d C - Counte            | rfeit / F                        | Forged                                | F - I            | Found  |                      |                                |             |                      |                              |  |
| ARREST<br>DRUGS   | DCI Status Quantity Type Measure   |          |                                 |              |                              |               | ed Type  | Possess            |                         |                                  |                                       | C<br>Buy         | Check up to 3 types of activity for each  uy Sale Mfg. Importing Operating |                      |                                | П           |                      |                              |  |
|                   |  |          |                                 |              |                              |               |          |                    |                         |                                  | 1 000000                              | Day              | Cuic   | IVIII 9.             | Importing                      | Орогиинд    |                      |                              |  |
|                   |  |          |                                 |              |                              |               |          |                    | -                       |                                  |                                       |                  |  |                      |                                |             |                      |                              |  |
| ÜAR               |  |          |                                 |              |                              |               |          |                    |                         |                                  |                                       |                  |  |                      |                                |             |                      |                              |  |
| ST                |  |          |                                 |              |                              |               |          |                    |                         |                                  |                                       |                  |  |                      |                                |             |                      |                              |  |
|                   |  |          |                                 |              |                              |               |          |                    |                         |                                  |                                       |                  |  |                      |                                |             |                      |                              |  |
|                   |  |          |                                 |              |                              |               |          |                    |                         |                                  |                                       |                  |  |                      |                                |             |                      |                              |  |
|                   |  |          |                                 |              |                              |               |          | 1                  |                         |                                  |                                       |                  |  |                      |                                |             |                      |                              |  |
| C<br>M<br>P       | Name:  | Comp     | olainant□                       | Victim       | Address                      |               |          |                    |                         |                                  | Phone:                                |                  |  |                      |                                |             |                      |                              |  |
| NARRATIVE         |  |          | of wants.                       | Cooper       | ative                        | in cust       |          |                    |                         |                                  |                                       |                  |  |                      |                                | <u>-</u>    |                      |                              |  |
| S                 | Arresting Officer Signature/ID #  MANZO, J. A. (391191)  |          |                                 |              |                              |               |          | e/Time Subr        | .06                     | Supervisor Signature  KUN, M. A. |                                       |                  |  |                      |                                |             |                      |                              |  |
| A<br>T<br>U       | Case Status:  Case Disposition:  Further Inv.  Case Disposition:  Case Disposition:  Case Disposition: |          |                                 |              |                              |               |          | Arrestee Signature |                         |                                  |                                       |                  |  |                      |                                |             |                      |                              |  |
| S                 |  |          |                                 |              |                              |               |          |                    |                         |                                  |                                       |                  | D 0/0  |                      |                                |             |                      |                              |  |

DCI-608F Rev. 3/92