

## ARREST REPORT

AGENCY	Agency Name <b>High Point Police Department</b>		ORI <b>0410300 H0001</b>		Date/Time Arrested <b>07/24/2014 23:35</b>		OCA <b>201421751</b>					
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)	Arrest Tract		Residence Tract <b>4</b>		Arrest Number <b>2690427</b>					
ARRESTEE	Name (Last, First, Middle) <b>AHMED, LISA MICHELLE</b>			D.O.B.	Age <b>34</b>	Race <b>W</b>	Sex <b>F</b>	Place of Birth <b>ASHEBORO, NC</b>	Country of Citizenship <b>US</b>			
	Current Address <b>409 Carey Av, HIGH POINT, NC 27262</b>			Phone <b>336-309-8603</b>		Occupation		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name <b>DISABLED</b>			Address			Phone <b>336- -</b>					
	Also Known As (Alias Names) <b>SMITH, LISA MICHELLE</b>			Hgt <b>5'08</b>	Wgt <b>260</b>	Hair <b>BRO</b>	Eyes <b>BRO</b>	Skin Tone <b>LGT</b>	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos <b>TATT LEFT FORE ARM / 2 HEARTS W/STAR;</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>409 CAREY AV, HIGH POINT</b>							
	Charge #1 <b>Resist Delay Obstruct Public Officer</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>2490</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>14-223</b>	Warr. Date <b>07/25/2014</b>			
	Charge #2 <b>False Report To Police Radio Broadcasting Station</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>2690</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>14-225</b>	Warr. Date <b>07/25/2014</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	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? _____											
CONFINED	Date/Time Confined <b>07/25/2014 00:31:33</b>		Place Confined <b>HP JAIL</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>\$1,000.00</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>BURKHOLDER, A. S. 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
COMPLAINANT	Name: Complainant <input type="checkbox"/> Victim <input type="checkbox"/>			Address				Phone:				
	Def was very uncooperative and hostile during her arrest. She verbally refused to go with male officers, to be searched by male officers and claimed she was sexually assaulted during her arrest, would sue and file complaint. Def claimed injury before being handcuffed and later placed her hands behind her back without any problems and jerked away from officer 3 times while being escorted to car. Lt. Lanier was contacted and responded to county building to observe def.											
STATUS	Arresting Officer Signature/ID # <b>HOWEY, G. P. (9175)</b>			Date/Time Submitted <b>07/24/2014 23:35</b>		Supervisor Signature <b>LANIER, C. L.</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							