

## ARREST REPORT

|               |   |                                      |   |                                    |  |  |                                    |  |   |                                     |      |           |           |
|---------------|---|--------------------------------------|---|------------------------------------|--|--|------------------------------------|--|---|-------------------------------------|------|-----------|-----------|
| AGENCY INFO   | Agency Name<br><b>High Point Police Department</b>  |                                      | ORI<br><b>0410300 H0001</b>   |                                    | Date/Time Arrested<br><b>07/06/2014 04:30</b>      |  | OCA<br><b>201419594</b>            |  |   |                                     |      |           |           |
|               | <input checked="" type="checkbox"/> Taken<br><input checked="" type="checkbox"/> Prints<br><input checked="" type="checkbox"/> Photos   | Fingerprint Card Check Digit # (CKN) |   | Arrest Tract<br><b>7</b>           |  | Residence Tract<br><b>7</b>                    |                                    | Arrest Number<br><b>2689983</b>  |   |                                     |      |           |           |
| ARRESTEE INFO | Name (Last, First, Middle)<br><b>LOVING, TONI LYNN</b>  |                                      |   | D.O.B.                             |  | Age<br><b>27</b>                               | Race<br><b>W</b>                   | Sex<br><b>F</b>  | Place of Birth<br><b>HIGH POINT, NC</b>   | Country of Citizenship<br><b>US</b> |      |           |           |
|               | Current Address<br><b>309 Earle Pl, HIGH POINT, NC 27265</b>  |                                      |   | Phone                              |  | Occupation                                     |                                    | <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown<br><input type="checkbox"/> Non-Resident |   |                                     |      |           |           |
|               | Employer's Name<br><b>UNEMPLOYED</b>  |                                      |   | Address                            |  |  |                                    | Phone  |   |                                     |      |           |           |
|               | Also Known As (Alias Names)   |                                      |   | Hgt<br><b>5'02</b>                 | Wgt<br><b>130</b>                                  | Hair<br><b>BRO</b>                             | Eyes<br><b>BLU</b>                 | Skin Tone<br><b>FAR</b>  | Consumed Drug/Alcohol<br><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk |                                     |      |           |           |
|               | Scars, Marks, Tattoos<br><b>TATT RGHT SHOULDER / DRAMA MASKS;</b>   |                                      |   | Social Security #                  |  | OLN and State                                  |                                    | Misc. # and Type   |   |                                     |      |           |           |
|               | Nearest Relative Name   |                                      |   | Address                            |  |  |                                    | Phone  |   |                                     |      |           |           |
| ARREST        | If Armed, Type of Weapon<br><b>NOT APPLICABLE/NONE</b>  |                                      | <input type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons<br><input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input checked="" type="checkbox"/> Warrant |                                    | Place of Arrest<br><b>309 EARLE PL, HIGH POINT</b> |  |                                    |  |   |                                     |      |           |           |
|               | Charge #1<br><b>Affray Or Simple Assault</b>  |                                      | <input type="checkbox"/> Fel<br><input checked="" type="checkbox"/> Misd  | Counts<br><b>1</b>                 | DCI Code<br><b>0890</b>                            | Offense Jurisdiction (if not arresting agency) |                                    | Statute #<br><b>14-33</b>  | Warr. Date<br><b>07/06/2014</b>   |                                     |      |           |           |
|               | Charge #2   |                                      | <input type="checkbox"/> Fel<br><input type="checkbox"/> Misd   | Counts                             | DCI Code   | Offense Jurisdiction (if not arresting agency) |                                    | Statute #  | Warr. Date  |                                     |      |           |           |
|               | Charge #3   |                                      | <input type="checkbox"/> Fel<br><input type="checkbox"/> Misd   | Counts                             | DCI Code   | Offense Jurisdiction (if not arresting agency) |                                    | Statute #  | Warr. Date  |                                     |      |           |           |
| VEHICLE INFO  | 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 _____<br>2. <input type="checkbox"/> Released to other at owners request <input type="checkbox"/> Name of Other _____<br>3. <input type="checkbox"/> Impounded <input type="checkbox"/> Place of storage _____ Inventory on File? _____ |                                      |   |                                    |  |  |                                    |  |   |                                     |      |           |           |
| CONFINED      | Date/Time Confined<br><b>07/06/2014 05:06:04</b>  |                                      | Place Confined<br><b>HIGH POINT JAIL</b>  |                                    |  | Committing Magistrate<br><b>BILLIPS</b>        |                                    |  |   |                                     |      |           |           |
|               | Type Bond<br><input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured<br><input type="checkbox"/> Secured <input checked="" type="checkbox"/> No Bond <input type="checkbox"/> Other   |                                      | Bond Amount<br><b>\$0.00</b>  |                                    | Trial Date<br><b>08/08/2014 08:30</b>              |  | Court Of<br><b>Guilford County</b> |  | City<br><b>HIGH POINT</b>   |                                     |      |           |           |
|               | Assisting Officer Name/ID #<br><b>0</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 ARREST  | 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:  |                                     |      |           |           |
|               | 1 WFA through NCAWARE   |                                      |   |                                    |  |  |                                    |  |   |                                     |      |           |           |
| STATUS        | Arresting Officer Signature/ID #<br><b>JACOBS, J. L. (388943)</b>   |                                      |   |                                    | Date/Time Submitted<br><b>07/06/2014 05:07</b>     |  |                                    | Supervisor Signature<br><b>WEISNER, C. E.</b>  |   |                                     |      |           |           |
|               | Case Status:<br><input type="checkbox"/> Further Inv.<br><input type="checkbox"/> Inactive <input checked="" type="checkbox"/> Closed   |                                      | Case Disposition:<br><input checked="" type="checkbox"/> Cleared By Arrest / No Supplement Needed<br><input type="checkbox"/> Arrest / No Investigation   |                                    |  | Arrestee Signature                             |                                    |  |   |                                     |      |           |           |