

ARREST REPORT

AGENCY	Agency Name High Point Police Department		ORI 0410300 H0001		Date/Time Arrested 06/20/2014 15:07		OCA 201417879					
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)	Arrest Tract		Residence Tract 6		Arrest Number 2689644					
ARRESTEE	Name (Last, First, Middle) KINARD, ANTONIO LAMAR			D.O.B.	Age 41	Race B	Sex M	Place of Birth	Country of Citizenship US			
	Current Address 1505 Ambridge Ct, HIGH POINT, NC 27260			Phone 980-307-5225		Occupation Owner		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name MIGHTY MAN TREE SERVICE			Address HIGH POINT			Phone 336- -					
	Also Known As (Alias Names)			Hgt 5'11	Wgt 287	Hair BLK	Eyes BRO	Skin Tone MBR	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Unk			
	Scars, Marks, Tattoos		Social Security #		OLN and State		Misc. # and Type					
	Nearest Relative Name			Address				Phone				
ARREST	If Armed, Type of Weapon NOT APPLICABLE/NONE		<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 1505 AMBRIDGE CT, HIGH POINT							
	Charge #1 Failure To Appear		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 2640	Offense Jurisdiction (if not arresting agency)		Statute # FTA	Warr. Date 06/10/2014			
	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			
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		Place Confined			Committing Magistrate KIMEL						
	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 \$1,000.00		Trial Date 07/14/2014 08:30		Court Of Guilford County City HIGH POINT					
	Assisting Officer Name/ID # 0			Released By (Name/Department/ID #) HICKS, T. G.			Date/Time Released 06/20/2014 14:18:00					
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
COMP	Name: Complainant <input type="checkbox"/> Victim <input type="checkbox"/>			Address				Phone:				
	NO PROBLEMS WITH ARREST.											
STATUS	Arresting Officer Signature/ID # HICKS, T. G. (11646)			Date/Time Submitted 06/20/2014 15:07			Supervisor Signature ENGLISH, W. A.					
	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							