

## ARREST REPORT

A G E N C Y	Agency Name <b>High Point Police Department</b>		ORI <b>0410300 H0001</b>		Date/Time Arrested <b>09/01/2014 11:01</b>		OCA <b>201426251</b>		
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) <b>QQ8238E</b>	Arrest Tract <b>6</b>		Residence Tract <b>6</b>		Arrest Number <b>2691323</b>		
A R R E S T E E	Name (Last, First, Middle) <b>COVINGTON, WILLIS LESHEA</b>			D.O.B.	Age <b>58</b>	Race <b>B</b>	Sex <b>M</b>	Place of Birth <b>HIGH POINT, NC</b>	Country of Citizenship <b>US</b>
	Current Address <b>690 Dogwood Ci, HIGH POINT, NC 27260</b>			Phone <b>336-307-4306</b>		Occupation <b>Disabled</b>		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident	
	Employer's Name <b>RETIRED</b>			Address			Phone		
	Also Known As (Alias Names) <b>COVINGTON, SHAY; COVINGTON, SHEA; WILLIE;</b>			Hgt <b>5'09</b>	Wgt <b>200</b>	Hair <b>BLK</b>	Eyes <b>BRO</b>	Skin Tone <b>MBR</b>	Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk
	Scars, Marks, Tattoos <b>TATT RIGHT ARM; TATT LEFT LEG; TATT</b>			Social Security #		OLN and State		Misc. # and Type	
	Nearest Relative Name			Address			Phone		
A R R E S T	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</b>		<input checked="" type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest <b>690 DOGWOOD CI, HIGH POINT</b>				
	Charge #1 <b>Manufacture Control Substance Schedule Vi</b>	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>1810</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>90-95(A)M6</b>	Warr. Date <b>09/01/2014</b>	
	Charge #2 <b>Possess Control Substance Schedule Vi</b>	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>1810</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>90-95(A3)6</b>	Warr. Date <b>09/01/2014</b>	
	Charge #3	<input type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts	DCI Code	Offense Jurisdiction (if not arresting agency)		Statute #	Warr. Date	
V E H I C L E	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? _____								
C O N F I N E D	Date/Time Confined		Place Confined			Committing Magistrate <b>KOKAJKO</b>			
	Type Bond <input checked="" type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other		Bond Amount <b>\$0.00</b>	Trial Date <b>09/29/2014 08:30</b>		Court Of <b>Guilford County</b>		City <b>HIGH POINT</b>	
	Assisting Officer Name/ID # <b>0</b>			Released By (Name/Department/ID #) <b>POWELL, D. J.</b>			Date/Time Released <b>09/01/2014 12:20:52</b>		
Status Codes	L - Lost   S - Stolen   R - Recovered   D - Damaged   Z - Seized   B - Burned   C - Counterfeit / Forged   F - Found								
D R U G S	DCI	Status	Quantity	Type Measure	Suspected Type		Check up to 3 types of activity for each		
	<b>E</b>	<b>Z</b>	<b>106.00</b>	<b>OZ</b>	<b>MARIJUANA</b>		Possess <b>Y</b>	Buy <b></b>	
							Sale <b></b>	Mfg. <b>Y</b>	
							Importing <b></b>	Operating <b></b>	
C O M P	Name: Complainant <input type="checkbox"/> Victim <input type="checkbox"/>			Address			Phone:		
	NARRATIVE								
S T A T U S	Arresting Officer Signature/ID # <b>POWELL, D. J. (349277)</b>			Date/Time Submitted <b>09/01/2014 12:31</b>		Supervisor Signature <b>MARTIN, K. V.</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				