

ARREST REPORT

A G E N C Y	Agency Name High Point Police Department		ORI 0410300 H0001		Date/Time Arrested 09/01/2014 16:26		OCA 201426275				
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract 2		Residence Tract 5		Arrest Number 2691325			
A R R E S T E E	Name (Last, First, Middle) REID, PHYLLIS ANN			D.O.B.		Age 49	Race B	Sex F	Place of Birth	Country of Citizenship US	
	Current Address 1459 Cedrow Dr, HIGH POINT, NC 27260			Phone 336-588-9572		Occupation Cna		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident			
	Employer's Name TRIAD CARE & REHAB			Address 707 N ELM ST, HIGH POINT, NC 27260			Phone 336-885-0141				
	Also Known As (Alias Names) REED, PHYLLIS ANN			Hgt 5'05	Wgt 130	Hair BLK	Eyes BRO	Skin Tone LBR	Consumed Drug/Alcohol <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Unk		
	Scars, Marks, Tattoos			Social Security #		OLN and State		Misc. # and Type			
	Nearest Relative Name			Address				Phone			
A R R E S T	If Armed, Type of Weapon NOT APPLICABLE/NONE		<input type="checkbox"/> On-View <input checked="" type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest 1009 LEONARD AV, HIGH POINT						
	Charge #1 Profane Or Indecent Language On Highways		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 2690	Offense Jurisdiction (if not arresting agency)		Statute # 14-197	Warr. Date 08/22/2014		
	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		
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				
	Type Bond <input type="checkbox"/> Written Promise <input type="checkbox"/> Unsecured <input type="checkbox"/> Secured <input type="checkbox"/> No Bond <input type="checkbox"/> Other		Bond Amount \$0.00		Trial Date 09/22/2014 08:30		Court Of Guilford County		City HIGH POINT		
	Assisting Officer Name/ID # 0			Released By (Name/Department/ID #) NEEDHAM, D. B.				Date/Time Released 09/01/2014 16:27:24			
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			
						Possess	Buy	Sale	Mfg.	Importing	Operating
C O M P	Name: Complainant <input type="checkbox"/> Victim <input type="checkbox"/>			Address				Phone:			
	I had attempted service of this summons and left a card on an earlier date. Today the subject called me and agreed to meet me at the PD to have summons served. She was served without incident and the return completed in the PIT.										
S T A T U S	Arresting Officer Signature/ID # NEEDHAM, D. B. (386716)			Date/Time Submitted 09/01/2014 16:26			Supervisor Signature FOX, C. S.				
	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					