

## ARREST REPORT

AGENCY	Agency Name <b>High Point Police Department</b>		ORI <b>0410300 H0001</b>		Date/Time Arrested <b>06/27/2014 23:50</b>		OCA <b>201418636</b>					
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) <b>QQ7678E</b>	Arrest Tract <b>2</b>		Residence Tract <b>2</b>		Arrest Number <b>2689812</b>					
ARRESTEE	Name (Last, First, Middle) <b>SPANN, LATONYA TANYELL</b>			D.O.B.	Age <b>34</b>	Race <b>B</b>	Sex <b>F</b>	Place of Birth <b>THOMASVILLE, NC</b>	Country of Citizenship <b>US</b>			
	Current Address <b>1304 Worth St, HIGH POINT, NC 272606960</b>			Phone <b>336-558-0135</b>		Occupation		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name <b>UNEMPLOYED</b>			Address			Phone <b>336-475-9718</b>					
	Also Known As (Alias Names) <b>SPAN, TANYELL; SPANN, TATONYA; SPANN,</b>			Hgt <b>5'05</b>	Wgt <b>165</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>PRCD UPPR CLITORIS / SINGLE PIERCING;</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 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>1500 E KEARNS AV - BLK, HIGH POINT</b>							
	Charge #1 <b>Failure To Appear</b>	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>2640</b>	Offense Jurisdiction (if not arresting agency) <b>RANDOLPH</b>		Statute # <b>FTA</b>	Warr. Date <b>06/23/2014</b>				
	Charge #2 <b>Felony Hit/run Personal Injury</b>	<input checked="" type="checkbox"/> Fel <input type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>4010</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>20-166(A)</b>	Warr. Date <b>06/28/2014</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>06/28/2014 01:50:00</b>		Place Confined <b>505 E GREEN DR</b>			Committing Magistrate <b>NEWMAN</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>\$10,000.00</b>	Trial Date <b>08/01/2014 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 #)			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:				
	On this date I arrested Spann without incident. Spann was confined to the High Point Detention Facility under a \$10,000.00 secured bond. Spann also has a Randolph County Court date of 08/29/2014 at 09:30 AM.  See incident report for further information.											
STATUS	Arresting Officer Signature/ID # <b>SPOON, J. M. (392213)</b>			Date/Time Submitted <b>06/28/2014 16:16</b>		Supervisor Signature <b>JOHNSON, C. R.</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							