ARREST REPORT

A C	Agency Name							ORI Date/Time Arre										
G I E N N F	High Point Police Department Taken Fingerprint Card Check Digit # (CKN)							0410300				2014 16:02			201417604 est Number			
ÇÖ	□ □ Prints □ □ Photos							Arrest Tract		Residence Trac		ll l			0498			
A R R E S T E E	Name (Last, First, Middle)								D.O.B.	Age	Ra	ce Sex	BBC		Place of Bi		Country of Citizenship	
	DESIR, STANLEY Current Address								Phone	37	В	M Occupation		OKLY	· ·	NY		
	400 N Centennial St, HIGH POINT, NC 27262								Thore				meles	ss	Re LA No	sident n-Resident	Unknown	
	Employer's Name UNEMPLOYED							Address	i							Phone		
	Also Known As (Alias Names) DESIR, STANLEY								Hgt 5'09	· I · · ·		Eyes BRO		kin Tone	Drug/Alcohol			
	Scars, Marks, Tattoos							Social Secur			OLN and State				Misc. # and Type			
		TATT	LEFT FOR	RE ARM	/ JAP	ANESE												
	Neares	Relative	Name				•	Address							Pho	ne		
ARREST -ZEO	If Armed, Type of Weapon ☑X On-View ☐ Crim							al Summons		Place of	Place of Arrest							
	11017111210112					Cit		Warrant		904 N MAIN ST, HIGH POINT Offense Jurisdiction (if not arresting agency) Statute # Warr. Date								
	Charge #1 Trespass (second Degree) ☐ Fel ☐ Misd						1	Counts	DCI Code 2670			ction (if not a	arresting	agency)	Statute # 14-159.13		Warr. Date 06/18/2014	
						☐ Fel ☐ Misd		Counts	DCI Code	Offense Jurisc		diction (if not arresting agency)			Statute #		Warr. Date	
	Charge #3					☐ Fel		Counts	DCI Code	Offense	e Jurisdi	ction (if not arresting agency)			Statute #		Warr. Date	
	VYR Make Model				S	☐ Misd		Color	Plate #/State			VIN						
	Vehicle 1. ☐ Left at Scene ☐ Secured ☐ Unsecure								Data (Time									
	verlicie		☐ Left at Scene☐ Released to oth			☐ Unse		ther	Date/Time									
	Data/Tii		Impounded	☐ Place of	storage	anfinad						II Com	mitting M		Inventory	on File?		
BOZD BOZD	06/18/2014 16:30:00 505 E GREEN D							Committing Magistrate NEWMAN										
	Type Bond Bond Amount Written Promise Unsecured						00	Trial Date 00 07/22/2014 08:30			Court Of City Guilford County HIGH POINT							
	Assisting Officer Name/ID #					Released			By (Name/Department/ID #)						Date/Time Released			
Status	tus L Lat. O Cultur D Daward D D D Daward D D D Daward D D D Daward D D D D D D D D D D D D D D D D D D D																	
Codes	L - Lost S - Stolen R - Recovered D - Damaged Z - Seize											- Found	Cl	neck up to	o 3 types o	of activity for	each	
	DCI Status Quantity Type M				leasure			Suspected Type				Possess	Buy	Sale	Mfg.	Importing	Operating	
D R U G S																		
S T																		
Ĭ																		
٠																		
СОМ	Name:	Comp	lainant□	Victim □				Addres	s						Pr	none:		
C O M P					all v	wants		Addres	s						Ph	ione:		
COMPNAR			ncic, cle		all v	wants		Addres	s						Ph	ione:		
COMPNARRA					: all v	wants		Addres	s						Pr	none:		
COMP					: all v	wants		Addres	s						Ph	ione:		
COMPNARRATIVE	ched	g Officer	ncic, cle	ared of		wants	Date	e/Time Submi	itted	00	11 '	ervisor Signa			Pr	none:		
COMP NARRATIVE STA	ched	Eked g Officer	ncic, cle	ared of	1552)	wants	Date	e/Time Submi			11 '	ervisor Signa			Pr	none:		
COMP NARRATIVE ST	chec	g Officer	ncic, cle	C. E. (1	1552) sition:	No Supplemen		e/Time Submi 06/18	itted /2014 16:		11 '	-			Ph	none:		

DCI-608F Rev. 3/92