

ARREST REPORT

A G E N C Y	Agency Name High Point Police Department		ORI 0410300 H0001		Date/Time Arrested 07/09/2014 10:40		OCA 201419936					
	Taken <input checked="" type="checkbox"/> Prints <input checked="" type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN) QQ7780N	Arrest Tract 7		Residence Tract 99		Arrest Number 2690067					
A R R E S T E E	Name (Last, First, Middle) WALKER, DIEDRA ANN			D.O.B.	Age 51	Race B	Sex F	Place of Birth	Country of Citizenship US			
	Current Address 702 Davidson St, THOMASVILLE, NC 27360			Phone 336-989-6461		Occupation		<input type="checkbox"/> Resident <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> Non-Resident				
	Employer's Name UNEMPLOYED			Address			Phone 336- -					
	Also Known As (Alias Names)			Hgt 5'03	Wgt 200	Hair BLK	Eyes BRO	Skin Tone MBR	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 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 2710 N MAIN ST, HIGH POINT							
	Charge #1 Larceny	<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts 1	DCI Code 0690	Offense Jurisdiction (if not arresting agency)		Statute # 14-72(A)	Warr. Date				
	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 07/09/2014 12:30:00		Place Confined GUILFORD COUNTY JAIL			Committing Magistrate NEWMAN						
	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 \$2,000.00	Trial Date 08/04/2014 08:30		Court Of Guilford County		City HIGH POINT				
	Assisting Officer Name/ID # DYLES, A. D. 2			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											
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:				
	checked NCIC/NCAWARE											
S T A T U S	Arresting Officer Signature/ID # TENNANT, B. E. (3139)			Date/Time Submitted 07/09/2014 10:40		Supervisor Signature MARTIN, K. V.						
	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							