ARREST REPORT

Α.	Agency Name							ORI	Date/Time			rrested			OCA					
G I E N N F	High Point Police Department							041030	0 H0001	07	/24/2	014				201421032				
N F C O	Taken Fingerprint Card Check Digit # (CKN)							Arrest Tract	t	Res	sidence 7	Γract	Arrest Num			mber				
Ϋ́	☐ Photos							2		99						2690408				
	Name (Last, First, Middle)								D.O.B.	D.B. Age		Race	Race Sex		Place		ce of Birth Country of Citizenship			
A R R E S T E E	MORGAN, MAURICE DEXTER										35	В	M				us			
	Current Address								Phone				Occupation	1		□ R	esident	Unknown		
	1610 Northwest Blvd, D, WINSTON SALEM, NC													Cab Driver				Non-Resident		
	Employe	Addres					N-SALEM,NC				Phone 336-725-2227									
	WILLARDS CAB COMPANY Also Known As (Alias Names)										Wgt Hair					kin Tone	d Drug/Alcohol			
									6'04	0		BL	BLK BRO			☐ Yes 🔼 No 🗆 U				
	Scars, Marks, Tattoos							Social Secu	urity #		OLN and State				Mi	isc. # and Type				
	Nearest	Relative	Name		Addres	SS						Phone								
	If Armer	1 Type o	of Weapon				Place of Arrest													
							Crimina IX Ci	al Summons tation \[\Pi \]	ll l							GH POINT				
A I R F S T	Charge #1							Counts	DCI Code		1009 LEONARD AV, HIGH POINT Offense Jurisdiction (if not arresting agency) Statute # Warr. Dat							Warr. Date		
	Failure To Report Accident						1		4010						20-166.1			07/17/2014		
	Charge #2							Counts	DCI Code		Offense Jurisdiction (if not arres				agency)		Statute #	Warr. Date		
	☐ Misd																			
	Charge #3 ☐ Fel							Counts	DCI Code		Offense Jurisdiction (if not arre			arresting	agency)	;	Statute #	Warr. Date		
> E H O	☐ Misd																			
	VYR	Ma	ake	Model	5	Style		Color	Plate #/State	,			VIN							
	Vehicle	Щ,																		
	venicie	1. [2. [☐ Left at Scene☐ Released to ot		Secured request	☐ Uns		ther	Date/Time_											
		3. [☐ Place of			.0 0. 0									Inventor	y on File?			
	Date/Tir	ne Confi	ned		Place Co		Committing Magistrate													
	Type Bond Bond Amount							Trial Date				Court Of City								
	☐ Written Promise ☐ Unsecured						.00				II				HIGH POINT					
N D E D	Assisting Officer Name/ID #							Released By (Name/Department/ID				D#) C				Date/Time Released				
						SIMERSON, A. K. 07/24/2014 10:10:00										0:10:00				
Status Codes	L - Lost	S -	Stolen R - R	ecovered	D - Damaç	ged Z - Sei	ized	B - Burne	d C - Counte	rfeit /	Forged	F - I	ound							
D A R R AR	DCI Status Quantity Type Measure						Suspected Type					4				e Mfg. Importing Operating				
											Pussess			Виу	Sale	Mfg.	Importing	Operating		
ĞT틺														-						
S T												_								
ł									$\neg \vdash$											
	Name: Complainant☐ Victim ☐							Address									<u> </u>			
C O M	Name:	Comp	oiainant 🔲	Victim			Address								P	hone:				
Р																				
N A	Mr. Morgan was arrested by citation for Failure to Report Accident stemming from a hit and run that occurred on 07/17/2014. There were no problems at the time of arrest. Mr. Morgan was																			
A R R A T			for warra										or arr	est.	. PIL	. MOI	gan was	•		
I V E																				
	Arraetin	n Officer	Signature/ID #				Det	e/Time Subr	nitted		П	Super	isor Sign	ature						
S T	SIMERSON, A. K. (368401)								/2014 09:58			Supervisor Signature BOWMAN, L. D.								
A T	Case Status: Case Disposition:								Arrestee S		ıre			-,						
U S	☐ Further Inv. ☐ Section Further Inv. ☐ Inactive ☐ Closed ☐ Arrest / No Investigation						nt Need	ded												
	DCLCO		010360	Allest/	mvcody	Janon														

DCI-608F Rev. 3/92