

## ARREST REPORT

A G E N C Y	Agency Name <b>High Point Police Department</b>		ORI <b>0410300 H0001</b>		Date/Time Arrested <b>08/03/2014 23:31</b>		OCA <b>201422942</b>					
	<input type="checkbox"/> Taken <input type="checkbox"/> Prints <input type="checkbox"/> Photos	Fingerprint Card Check Digit # (CKN)		Arrest Tract <b>1</b>		Residence Tract <b>8</b>		Arrest Number <b>2690638</b>				
A R R E S T E E	Name (Last, First, Middle) <b>MORRISON, ADRIAN</b>			D.O.B.		Age <b>29</b>	Race <b>B</b>	Sex <b>M</b>	Place of Birth <b>LAURINBURG, NC</b>	Country of Citizenship <b>US</b>		
	Current Address <b>3751 Bracknell Dr, 1E, HIGH POINT, NC 27265</b>			Phone <b>336-882-0615</b>		Occupation		<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Unknown <input type="checkbox"/> Non-Resident				
	Employer's Name <b>UNEMPLOYED</b>			Address			Phone					
	Also Known As (Alias Names) <b>LITTLE A</b>			Hgt <b>6'03</b>	Wgt <b>155</b>	Hair <b>BLK</b>	Eyes <b>BRO</b>	Skin Tone <b>DBR</b>	Consumed Drug/Alcohol <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unk			
	Scars, Marks, Tattoos <b>SCAR LEFT SHOULDER / 2 INCH; MARK</b>			Social Security #		OLN and State		Misc. # and Type				
	Nearest Relative Name			Address			Phone					
A R R E S T	If Armed, Type of Weapon <b>NOT APPLICABLE/NONE</b>		<input type="checkbox"/> On-View <input type="checkbox"/> Criminal Summons <input type="checkbox"/> Order for Arrest <input checked="" type="checkbox"/> Citation <input type="checkbox"/> Warrant		Place of Arrest <b>1022 TRUE LN, HIGH POINT</b>							
	Charge #1 <b>Possess Schedule Vi</b>		<input type="checkbox"/> Fel <input checked="" type="checkbox"/> Misd	Counts <b>1</b>	DCI Code <b>1810</b>	Offense Jurisdiction (if not arresting agency)		Statute # <b>90-95(D)4</b>	Warr. Date <b>08/03/2014</b>			
	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 <b>2004</b>	Make <b>PONT</b>	Model <b>GRAND AM</b>	Style <b>4S</b>	Color <b>WHI</b>	Plate #/State <b>CFT2978 NC 2015</b>	VIN <b>1G2NF52E14M564379</b>					
	Vehicle 1. <input type="checkbox"/> Left at Scene <input type="checkbox"/> Secured <input type="checkbox"/> Unsecured Date/Time <b>08/03/2014 00:00</b> 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? <b>ALOT</b>											
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 <b>\$0.00</b>		Trial Date <b>09/08/2014 08:30</b>		Court Of <b>Guilford County</b>		City <b>HIGH POINT</b>			
	Assisting Officer Name/ID # <b>MCNEAL, R. D. 4</b>			Released By (Name/Department/ID #) <b>LAUGHLIN, B. M.</b>			Date/Time Released <b>08/03/2014 23:59:24</b>					
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					
	<b>E</b>	<b>Z</b>	<b>2.07</b>	<b>GM</b>	<b>MARIJUANA</b>		Possess <b>Y</b>	Buy	Sale	Mfg.	Importing	Operating
C O M P	Name: Complainant <input type="checkbox"/> Victim <input type="checkbox"/>			Address				Phone:				
N A R R A T I V E	Mr. Morrison was the front passenger in a vehicle that was stopped at 1022 True Ln. The vehicle was stopped reference the odor of marijuana. The occupants of the vehicle were removed and searched. Mr. Morrison had 2.07 gms of marijuana tucked inside the front of his pants in a small bag. Mr. Morrison was cited and released without incident.											
S T A T U S	Arresting Officer Signature/ID # <b>LAUGHLIN, B. M. (388380)</b>			Date/Time Submitted <b>08/04/2014 02:02</b>			Supervisor Signature <b>JARRELL, K. J.</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						