I N	Agenc	y Name		NSTON-SALEN	CIE	CIDENT/INVESTIGATION						OCA 2422773							
C	ORI	NC	NC 02	10200		1		REPORT						Date / Time Reported SMTHTFS Month Day Yr Time					
D E	NC NC 0340200 Crime Incident(s)									☐ Att At Found SMT₩TFS Month Day Yr Time						06 26 2024 17:32 Hrs. Last Known Secure SMTHTFS Month Day Yr Time			
N T	#1			ing & Entering	Wit	hout For	rce	ı —	Com	Month 06	D			Time 7:32 Hrs				Time 17:31 Hrs.	
D	#2	Crime I	ncident	0 0					\rightarrow	Location	of	Incident						Offense Tract	
A T	Coince Institute																Victim Reside	221	
A	#3	Jillie I	ncident						☐ Att Premise Type ☐ Com						☐ Single Family ☐ Multi Family				
МО			d or Con MITTEI					Forcible Yes						☐ Yes [Weapon / Tools				
	# of V	ictims	Туре	∏ Person	П	Business				Injury	y	☐ None			Loss o	f Tee	th Drug/A	lcohol Use:	
3.7	1															_			
V I		Victim/		Name (Last, First,			шіу 🔲 Опіс	21/ U11	KIIOW	¹¹ _		Victim of		S / Age	Race			N/A Resident Status	
C T	V1 DATA OMITTED																To Offender	□ Resident □ Non-Resident	
I M				IA OMITTED						1,			В	F		Unknown			
141	Home	Addre	ess		ГТЕО							Home Phone							
	Employer Name/Address DATA OMI									TTED					Business Phone				
,	VYR	Color	Color Lic/Lis Vin																
0																			
T H																			
E R																			
S																			
т							DATA	Y C)M	ITTE	ED)							
I N																			
V O																			
L V																			
E																			
D																			
C4-4	T _ T	ost C	_ Ctolon	R = Recovered	D -	Damagad	7 - Saigad	D -	Dum	ad C-0	Con	untaufait / E	'omood	E – Found	1				
Status Codes	(Chec	k "OJ"	column	f recovered for other	er ju	risdiction)	Z = Seized	В=	Вигп	lea C=C	Cou	interieit / F	orgea	F = Found					
	Victim # DCI Status Value OJ QTY						Property Description							Mak	e/Mo		erial Number		
													DA	TA OMITTED FOR					
- P - R																	IN	FORMATION	
																		SECURITY	
ο .																		PURPOSES	
P -																		T I THE FIRE OF	
R T																		VE PROPERTY	
Y ·																		ITEMS ARE	
-																		ISPLAYED ON	
																	P	2C REPORTS	
-	NT .	637	-1:1 °	4-1	N.T		-1 P		0										
	Numb Office:	Number of Vehicles Stolen 0 Number Vehicles Recovered 0 Officer ID# Officer Signature Supervisor Signature																	
ID	CARDWELL, D. C. (16283)																(15079)		
	Comp	lainant	Signatur	e	Case Statu		estiga	tion		ase Dispos		☐ Loca	ited		□ Extı	adition Declined			
Status					ive	re ☐ Cleared by Arrest ☐ Refuse to Cooperate													
							☐ Closed			hausted				nder 🗆				Page 1	