I N	Agency Name INCIDEN										T/INVESTIGATION					OCA 2422878			
C I D E	ORI				IVI I	OLICE	REPORT							Date / Time Reported S M T W F F S Month Day Yr Time					
			NC 034		│ │ Att │ At Found │ S M T M 프 F S							06 27 2024 14:11 Hrs.							
Ν	#1		licidein(s) All Other I	Frau	d		Att	M	onth 06	Day Yr		[<u>= 5</u> Time 4:11 Hrs			y Yr'	Time		
T. D	#2	Crime I	ncident		rau	u		□ Att			27 2024 of Incident	4 14	4:11 HIS	06	27	2024	14:10 Hrs Offense Tract		
A T A	\Box Com 6777 Capstone Ct, Winston-s																		
	#3	Trime I	ncident					Att Premise Type						Victim Residence Type □ Single Family □Multi Family					
МО			d or Con MITTEI					Forcible Yes No						Weapon / Tools					
	# of V	ictims		X Person		Business				Injury	X None		finor 🔲	Loss of Teeth Drug/Alcohol Use:					
v	1			ciety 🔲 Governr ligious 🔲 L.E. O			inancial Instit	ute er/Unkno	wn	. —	Broken Bones □ Severe Lacerations Internal □ Unconscious □ Other Major ☑ No						_		
I	Victim/Business Name (Last, First, Middle) Victim of DOB / Age														Sex R	elationship	Resident Status		
C T	V1		DA	TA OMITTED							Crime #		24			o Offender	Resident		
I M·		Addre						1,						W		10K	Unknown		
						D	ATA OMI	ATA OMITTED							Home Phone				
	Emplo	oyer Na	ume/Add	ress		D	ATA OMITTED							Business Phone					
	VYR	M	ake	Model	Color		.ic/Li	is			Vin								
H E R S I N V O L V E D	DATA OMITTED																		
Status Codes				R = Recovered			Z = Seized	$\mathbf{B} = \mathbf{B}\mathbf{u}$	rned	$\mathbf{C} = \mathbf{C}$	ounterfeit / F	orged	F = Found	1					
- - - P -	Victim			Value	OJ	Ĺ		Brananta Description							Make/Model Serial Number				
	#	# DCI Status Value OJ QTY Property Description 48 7 1 DOCUMENTS/PERSONAL OR BUSINESS								1		RATION		ATA OMITTED					
																	FOR		
																1	NFORMATION SECURITY		
R O																	PURPOSES		
Р ⁻ Е -																			
R																	NLY THE FIRST		
T Y ·																TWE	LVE PROPERTY ITEMS ARE		
-																I	DISPLAYED ON		
-																	P2C REPORTS		
-							1 5		_										
	Numb		ehicles S	-	Nu D#	mber Vehi	cles Recovere Officer Sig	-				- 1	Supervisor	Signati	ire				
ID	NOL	LETTE		(16289)			BUR							KS, C. M. (15216)					
Status	Compl	lainant	Signatur	e		□ Inact	□ Further Investigation □ Unfounded □ Located						Extradition Declined e to Cooperate gency						
							Closed	/Leads E	xhau	sted	Death o					eclined	Page 1		