I N	Agenc	y Name		NSTON-SALE	M P	OLICE	INCIDENT/INVESTIGATION							OCA 2423086 Date / Time Reported SMTWTFS Month Day Yr Time				
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	# of Victims Type X Person Business Injury None X Minor Loss of Teeth Drug/Alcohol Use:															Alcohol Use:		
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C T	V1 Crime # 37															Offende	r 🗖 Resident	
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ID	Officer LY.		(15929		D#		Officer Signature Supervise							or Signature N, A. R. (15714)				
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Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	ive /Cleared		ed	Unfound Cleared Cleared	by Arre by Arre	est by Ano	Refuse	ency	erate	Page 1	
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