I N	Agenc	y Name		STON-SALEN	CIDENT/INVESTIGATION						OCA 2423391								
C ·	ORI	NC					REPORT						Date / Time Reported SMTWTFS Month Day Yr Time						
D E	NC NC 0340200 Crime Incident(s)									☐ Att						07 01 2024 16:52 Hrs. Last Known Secure SMTWTFS Month Day Yr Time			
N T	#1			ing & Entering	_	Com	Month 07	Γ			Fime 5:52 Hrs				Time 16:51 Hrs.				
D.	#2	Crime I	ncident	0 0					\rightarrow	Location	n of	Incident					1	Offense Tract	
A T	Com 2602 Claremont Av, Win														lem N		7105 Victim Resid	223	
A	#3	Jillie i	neideni						Com	Fielilise	туļ	pe						ence Type nily ∏Multi Family	
МО			d or Com					!						Forcible Yes	W N/A	We	apon / Tools		
1110																	1		
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use: Broken Bones Severe Lacerations Yes Unknown															Alcohol Use: Yes ☐ Unknown			
V	T ☐ Religious ☐ L.E. Officer Line of Duty ☐ Other/Unknown ☐ Internal ☐ Unconscious ☐ Other Major ☐ NO ☐ N/A															_			
I C		Victim/	Business	Name (Last, First,						Victim of Crime #	DOI	3 / Age 24	Race	Sex	Relationshi To Offende				
T I	V1 DATA OMITTED											1,		24	$\mid_{B}\mid$	$_{F}$	1XR	☐ Non-Residen	
M ·	Home	Addre	ss						1,					ne Phone	Unknown				
	DATA OMI									TTED						D ' D			
	DATA OMI									TTED						Business Phone			
	VYR	M	ake	Model	St	yle	Color		Lic	c/Lis				Vin					
T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column i	R = Recovered for other	D = er jur	Damaged risdiction)	Z = Seized	B =	Burn	ed C=	Cou	unterfeit / F	orged	F = Found	i				
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo		Serial Number	
- - P - R													D	ATA OMITTED FOR					
]	NFORMATION	
					\dashv													SECURITY	
O P -																		PURPOSES	
Ē -					_													NLY THE FIRST	
R T					\dashv													LVE PROPERTY	
Y ·					_													ITEMS ARE	
-																	J	DISPLAYED ON	
-																		P2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Nim	mber Vebi	cles Recovere	d	0										
	Office	r		ID		IIOCI VEIII	Officer Sig		-					Supervisor					
ID	LANCASTER, A. W. (16169)										1.0	Yana Di	.i.i -	COLLI			(14763)		
Status	Comp	iainant	signatur	ž			Case Status Further Inact Closed	r Inve tive /Clea	ıred				ded by Ai by Ai	Loca	Refuse ther Ag	gency	ooperate	tradition Declined Page 1	