I N	Agenc	y Nam		NSTON-SALEN	, IN	CIE	CIDENT/INVESTIGATION						OCA 2423809							
C	ORI	N.C.					REPORT						Date / Time Reported SMTWTFS Month Day Yr Time							
D E	1		NC 034		The Aut   At Power   Class The Table						$07 \mid 05 \mid 2024 \mid 01:31$ Hrs.									
N	#1	Jillie I		) mon Law Robbe	—								st Known Secure SMTWTFS nth Day Yr Time 17   05   2024   01:30   Hrs.							
T	#2	Crime I	ncident	mon Law Roove	1 y-2	sirongui	THI .	<del></del>	X Com   07   05   2024   01:31   Hrs   07   05   2024   01:30   Hrs											
D A	□ Com 699 E Northwest Bv/edman Ct - N, V																			
T A	#3	Crime I	ncident					Att Com	Premise	Тур	pe				- 1	Victim Resider	nce Type ly∏Multi Family			
	How A	Attacke	d or Con	nmitted				Ш	Forcib					Forcible	Weapon / Tools					
МО	D	ATA C	MITTEI	)										☐ Yes [ ☐ No	<b>X</b> N/A	A				
	# of Victims   Type   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:																			
V	1 Society Government Financial Institute Broken Bones Severe Lacerations Unknown Internal Unconscious Other Major															_				
I	<u> </u>	Victim/		Name (Last, First,			aty 🔲 Otak	71, 01	intii o v	<u> </u>		Victim of		3 / Age	Race		Relationship	Resident Status		
C T	V1 DATA OMITTED Crime # 63																To Offender	Resident     Non-Resident		
I M												1,			В	M		Unknown		
	Home	e Addre	ess		TTED							Home Phone								
	Employer Name/Address DATA OMI									TTED					Business Phone					
	VYR Make Model Style Color								Lic/Lis Vin											
О																				
T																				
H E																				
R S	R																			
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I	DATA OMITTED																			
V	N V																			
O L																				
V E																				
E D																				
Status Codes																				
Codes	Victin	1			Ť	Í		D ( D ) (						Make/Model Serial Number						
	# DCI Status Value OJ QTY  1 20 7 1 MONE							Property Description  WEY/CASH							VIS/Ban			TA OMITTED		
P -																		FOR		
																		FORMATION		
R O																		SECURITY PURPOSES		
Ρ.																		T ORI OSES		
E · R																	ON	LY THE FIRST		
T																		VE PROPERTY		
Υ .																		ITEMS ARE		
-																		SPLAYED ON 2C REPORTS		
-																				
	Number of Vehicles Stolen 0 Number Vehicles Recovered 0																			
ID	Officer ID# Offi ANTAL, K. A. (16125)								Officer Signature Supervis								or Signature MP, J. K. (14922)			
	Comp	lainant	Signatur	e	Case Status		ection	tion		Case Dispos		□ Loca				adition Declined				
Status					Inact	ive		uon		Cleared	by A	rrest	Refus	e to C	ooperate	action Decimed				
							☐ Closed			hausted				rrest by Ano				Page 1		