I N	Agenc	y Namo	e WIN	IN	INCIDENT/INVESTIGATION							OCA 2424190							
C	ORI	NC	NC 034	40200			1	REPORT							Date / Time Reported SMTWTFS Month Day Yr Time				
D E		NC Crime I			☐ Att At Found							07							
N T	#1	Jimic I	nerdeni(s	, Discharging F	irea	arm		ı —	Com	Month	. I			Time 7:12 Hr:			Day Yr 🖰	Time $07:11$ Hrs.	
D	#2	Crime I	ncident					_	Att		_	f Incident	4 0,	,12	- 07			Offense Tract	
Α		7 T	! 4 4					_	Com				Rd/w	oodland	Hills 1			323	
T A	#3	Jillie I	ncident						Att Com	Premise	: 1 y	pe					Victim Reside	ly □Multi Family	
МО			d or Con MITTEI					-	 !					Forcible Yes	X N/A	We	apon / Tools		
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															lcohol Use:			
																_			
V I		Victim/		-			uty Othe	er/Un	ıknow	n [_ In 	nternal Victim of			Other Race	<u> </u>			
C T	V1														Rucc	SCA	To Offender	☐ Resident	
I	ij		DA	ΓA OMITTED						1,						☐ Non-Resident			
M	Home Address DATA OMI'									TTED						Home Phone			
,	Employer Name/Address DATA OMI															Business Phone			
,	VYR	Color Lic/Lis Vin							Vin										
0																			
T H																			
E R																			
S																			
I	DATA OMITTED																		
N	N V																		
V O																			
L V																			
E																			
D																			
C4-4	T _ T	ost C	— Ctolon	R = Recovered	D -	Damagad	7 - Spinod	D -	Dum	ad C-	Co	vantoufoit / 1	Toward	E – Four	.d				
Status Codes	(Chec	k "OJ"	column	if recovered for other	er jur	isdiction)	Z = Seizeu	Б=	- Dulli	ied C=	: Co	unterrent / 1	rorged	r = roui	ıu				
	Victim #	DCI	Status	Value		Property Description							Mal	e/Mo	odel Se	erial Number			
		13 EVID 4 SHEL							ELL CASINGS							US	DA	TA OMITTED FOR	
- P - R														+			II	FORMATION	
																		SECURITY	
O .																		PURPOSES	
Р Е -																	01	H W THE EID OT	
R T														-				VE PROPERTY	
Y ·																	TWEE	ITEMS ARE	
-																	D	ISPLAYED ON	
					\Box												I	2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Nııı	mber Vehi	cles Recovere	d	0										
	Office	r		ID		7 0111	Officer Sig		-					Supervisor			A M. (140)	2.4)	
ID			4. (149) Signatur		V)						10	Case Dispo	MCKA	UGH	4 <i>N</i> , <i>I</i>	A. M. (1488	54)		
State	p		G			☐ Furthe	☐ Further Investigation ☐ Unfounded ☐ Located							Ext	radition Declined				
Status							Closed	active						. г	Page 1				