I N	Agenc	y Name		VSTON-SALEN	1 P	OLICE] IN	INCIDENT/INVESTIGATION						OCA 2424212				
C	ORI	NC	NC 03/	10200			1	REPORT						Date / Time Reported SMTWTFS Month Day Yr Time				
D E	NC NC 0340200 Crime Incident(s)								Att At Found SMTWTFS Month Day Yr Time						07 08 2024 11:34 Hrs. Last Known Secure S M T W T F S Month Day Yr Time			
N T	#1 C	'ommı	ınicatir	ng Threats -intin	nida	tion, No	n Physical		Com	Month 07			l:34 Hrs				Time 11:33 Hrs.	
D	#2	Crime I	ncident]	Att Com		of Incident	. Win	ıston-salei	m NC	271		Offense Tract 221	
A T	#3	Crime I	ncident						$\overline{}$	Premise 7		v, vv ir	ision-saiei	n NC		Victim Reside		
A								Com					☐ Single Family ☐ Multi Family					
МО			d or Com						Forcible					Weapon / Tools				
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																	
V	1			ciety Governme igious L.E. Off			inancial Institution Instituti		know	. –	Broken Bon Internal		Severe	Lacera Other			es □Unknown □N/A	
I C	Victim/Business Name (Last, First, Middle) Victim of DOB / As													Race	Sex	Relationship To Offender	Resident Status Resident	
T I	V1 DATA OMITTED Crime #												65	$\mid_{B}\mid$	M	10K	☐ Non-Resident	
M	Home Address													D		ne Phone	Unknown	
					D.	ATA OMI	TTED											
	Emplo	oyer Na	ıme/Addı	ress		D.	ATA OMI	MITTED					Business Phone					
ı	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	(Chec	k "OJ"	= Stolen column i	R = Recovered frecovered for other	r jur	isdiction)	Z = Seized	В=	Burn	ed C=C	Counterfeit /	Forged	F = Found	1				
	Victim # DCI Status Value OJ QTY					QTY	Property Description							Mak	e/Mo		erial Number	
- - P - R													DA	TA OMITTED FOR				
																IN	FORMATION	
																	SECURITY	
O .																	PURPOSES	
E ·																ON	ILY THE FIRST	
R T																	VE PROPERTY	
Y					\dashv												ITEMS ARE	
																D	ISPLAYED ON	
																P	2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Nur	nher Vabi	rles Recovers	d	0									
	Officer ID# Officer Signature Supervisor Signature																	
ID			<i>N. A.</i> Signatur	(16160)		Case Status			1	Case Dispo	voition:	RING,	M. B.	(158	363)			
Status	Comp	iaiiläNt	signatur(☐ Further ☐ Closed ☐ Closed	· Inve ive /Clea	ıred		☐ Unfou ☐ Cleare ☐ Cleare	nded d by A d by A	Loca	Refuse ther Ag	gency	ooperate	Page 1	