							_					_					
I N	Agenc	y Name		VSTON-SALE	M F	POLICE	IN IN	INCIDENT/INVESTIGATION					OCA 2424452				
C ·	ORI		,, 11	IST OIL SILL		OLICE	-	REPORT						Date / Time Reported S M T H T F S Month Day Yr Time			
I D	NC NC 0340200												07	10	۲۳– 2024	4 09:09 Hrs.	
E N		Crime I	ncident(s	a)	· · ·				Att At Found SMTHT Month Day Yr Tim				Last Ki Month	nown Sec	ure Yr	SMT₩TFS Time	
T .	#1			Vandali	ism			X Com	07	10 202	4 09:09		1	10			
D	$\square Att Location of Incident$															Offense Tract	
A T	Crime Insident															311	
A	#3	June 1	neruent					Com					Victim Residence Type ☐ Single Family ☐ Multi Family				
	How A	Attacke	d or Con	nmitted							For	cible		Weapon /	Tools	<u>, </u>	
MO	DATA OMITTED																
	# of V	ictims	Туре	□ Person	ГХ	Business			Injur	y ⊓ None			Loss of 7	Teeth	Drug/A	lcohol Use:	
	1		🗆 So	ciety 🔲 Governi	nent		inancial Institu] Broken Bone	^{es} П	Severe	Laceratio	ons	\Box Ye	es 🗖 Unknown	
V I				ligious 🔲 L.E. O			uty 🗌 Othe	er/Unknov	^{/n}	Internal	•		Other M Race S		X No		
Ċ	Victim/Business Name (Last, First, Middle) Victim of DOB / Age Crime #														ionship ffender	Resident Status	
T I	V1		DA	TA OMITTED)					1,						Non-Residen	
M ·	Home	Addre								1,			F	Home Pho	ne	Unknown	
	пошк	/ fuure				D	ATA OMI	ΓTED					Home Phone				
	Employer Name/Address DATA OMITTED												E	Business I	Phone		
	VYR	M	ake	Model	S	tyle	Color	Color Lic/Lis Vin									
						·											
H E R S I N V O L V E D	DATA OMITTED																
Status	L = L	ost S	= Stolen	R = Recovered	D =	Damaged	Z = Seized	B = Burr	ned C =	Counterfeit / I	Forged F	= Found	1				
Codes	(Chec Victim		column	if recovered for ot	her ju	risdiction)											
	#	DCI	Status	Value	OJ	QTY	WWDOW	Property	Descripti	on			Make/	Model		erial Number	
-	1	1 29 4 1 WINDOW											DA	TA OMITTED FOR			
-															IN	FORMATION	
P- R																SECURITY	
0																PURPOSES	
Р.																	
E- R															ON	LY THE FIRST	
T -															TWEL	VE PROPERTY	
Y																ITEMS ARE	
-															D	ISPLAYED ON	
-															P	2C REPORTS	
-																	
			ehicles S			mber Vehi	cles Recovere						~				
ID	Office DAV		I. M. M	I. (16233)	D#		Officer Sig	nature			Sup 1	ervisor EACH	Signature	e (15710)		
10	Complainant Signature Case Status Case Dis												,				
Status	r		0				☐ Further ☐ Inact ☐ Closed	· Investiga ive	tion				Refuse t	o Coopera	□ Extr ate	adition Declined	
									hausted		of Offender			tion Decli	ned	Page 1	