I N	Agenc	y Name		STON-SALE	M P	POLICE								2424632			
C · I	ORI				REPORT							Date / Time Reported SMTWIFS Month Day Yr Time					
D			NC 034									07 11 2024 12:00 Hrs.					
E N	#1	Crime I	ncident(s	,			Att At Found Month Day Yr Time							Last Known Secure Month Day Yr Time			
Τ.				Discharging	Fire	arm		X Con	0/			1 12	:00 Hrs	07	11	2024	11:59 Hrs.
D	Com 600 Vin ash ann Dank Dr. Wind														m NC		Offense Tract 212
A T	шр (Crime I	ncident						emise Type				Victim Residence Type				
А	#3							☐ Att ☐ Con	ו						□ Siı	ngle Fan	nily □ Multi Family
МО			d or Con MITTEI										Forcible □ Yes [□ No		Weapor	n / Tools	
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															Alcohol Use:	
	1		🛛 🖾 So	ciety 🔲 Governn	nent	🗆 F	inancial Institu				Broken Bone	s	□ Severe			Υ	⁷ es □ ^{Unknown}
V I				ligious 🔲 L.E. Of			uty 🗌 Othe	er/Unknov	wn		Internal			Other N	-		
C		victim/	Business	Name (Last, First,	Mid	dle)					Victim of Crime #	DOB	/ Age	Race		ationshij Offende	
T I	V1		DA	TA OMITTED							1,						Non-Residen
M ·	Home	Addre									1,				Home P	hone	Unknown
	Home	Audic	.33			D	ATA OMI	TA OMITTED						Tione Thone			
-	Emplo	oyer Na	ume/Add	ress		D	ATA OMITTED							Business Phone			
-	VYR	M	ake	Model	S	tyle	Color		ic/Lis				Vin				
					_												
T 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 = Bur	ned	$C = C_{i}$	ounterfeit / F	orged	F = Foun	d			
Codes	(Chec Victim	k "OJ"	column	if recovered for oth	er ju	risdiction)											
	# DCI Status Value OJ QTY						Property Description							Make	/Model		Serial Number
-														D	ATA OMITTED FOR		
-																I	NFORMATION
P -																	SECURITY
R O																	PURPOSES
P -																	
E- R																0	NLY THE FIRST
Т																TWE	LVE PROPERTY
Y -																	ITEMS ARE
_																	DISPLAYED ON
-																	P2C REPORTS
-	Numb	er of V	ehicles S	tolen ()	No	mher Vahi	cles Recovere	d 0									
	Office	r		II)#		Officer Sig	. 0					Supervisor	Signatur	e		
ID	RIV	AS FE		DEZ, G. A. (16))					Case Dispos		GEDD	INGS, 1	H. L. (.	14851)	
Status	Comp	aınant	Signatur	e		Further	□ Further Investigation □ X Inactive □					Loca cest and test by And	Refuse to Cooperate				
									xhaust	ed	\square Death of			Prosecu		clined	Page 1