I N	Agenc	y Name		NSTON-SALE	М Р	OLICE	IN	CID	CIDENT/INVESTIGATION					OCA 2424791				
C I	ORI	NC					1	REPORT					Date / Time Reported SMTWTES Month Day Yr Time					
D E	10		NC 034					☐ Att At Found						Day 17 Time 17 17 18 19 19 19 19 19 19 19				
N T	#1	Jimic I	nerdeni(s	, Drug Viola	tion	S		_	Com	Month 07			lime 1:48 Hrs			Day Yr 🖵	Time $14:47$ Hrs.	
D	#2	Crime I	ncident			~			Att		of Incident	7 15	7.40	7 07			Offense Tract	
A	Paraphernalia- Possessing/concealing Equipment															//:-ti D:-1	111	
T A	#3	Jillie I	ncident					☐ Att Premise Type ☐ Com						Victim Residence Type ☐ Single Family ☐ Multi Family				
МО			d or Con MITTEI					Forcible ☐ Yes ☐ No					Weapon / Tools					
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															cohol Use:		
**	1 Society Government Financial Institute Broken Bones Severe Lacerations Wes Unknown Internal Unconscious Other Major Months No No															_		
V I		Victim/		Name (Last, First,			ину 🔲 Онн	21/ U11	KIIOW	п 🗆	Internal U		S / Age	Race			□N/A Resident Status	
C T	V1			ГА ОМІТТЕО	,				Crime #					To Offender	☐ Resident			
I M			DA	IA OMITIED							1,2						☐ Non-Resident ☐ Unknown	
IVI ·	Home Address DATA OMIT									ГТЕО					Home Phone			
,	Employer Name/Address DATA OMI													Business Phone				
	VYR	Model	Color Lic/Lis Vin						Vin									
				<u> </u>	<u> </u>													
О																		
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H E																		
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J							DATA		11 /	TTTE	'ר							
I	DATA OMITTED																	
V	N V																	
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V																		
E D																		
Status	S L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found																	
Codes	(Chec		column	if recovered for oth	er jur	risdiction)												
	# DCI Status Value OJ QTY						Property Description PLASTIC BAGGIE							Mak	e/Mo		rial Number TA OMITTED	
- - P - R		11 0 1 PLASTIC BAGGIE											DA	FOR				
																IN	FORMATION	
																	SECURITY	
O P .																	PURPOSES	
E -																ON	LY THE FIRST	
R T																	VE PROPERTY	
Υ .																	ITEMS ARE	
																	SPLAYED ON	
-																P	2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Nui	mber Vehi	cles Recovere	d	0									
	Office	r		II			Officer Sig		-				Supervisor	Signat	ire	(15500)		
ID			Signatur	0. (15802) e		Case Statu	s		ı	Case Dispo	sition.	MATH	EWS,	C. K	<i>T.</i> (15509)			
a. :	Comp		~1511dtul	-			☐ Furthe	r Inve	Investigation Unfounded Located Extradition Decline								adition Declined	
Status	☐ Closed									Cleared							Dani 1	
							☐ Closed	/Lead	ıs Exl	nausted 1	□ Death	ot Offe	nder $-$	1 Prosec	cution	Declined L	Page 1	