I N	Agenc	y Name		VSTON-SALEN	LICE	INCIDENT/INVESTIGATION							OCA 2424938					
C	ORI	NC					REPORT							Date / Time Reported SMTWTFS Month Day Yr Time				
D E			NC 034			☐ Att At Found							07 13 2024 15:44 Hrs.					
N T	#1 Missing Person									☐ Att At Found S M T W T F S Last Known Secure S M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M T M								
D	#2	Crime I	ncident					ı —	Att Location of Incident Offense								Offense Tract	
A T	T. Crime Incident													i NC 2		ictim Resider	323 nce Type	
A	#3							Com					☐ Single Family ☐ Multi Family					
МО			d or Com										Forcible Yes No	X N/A	Wea	apon / Tools		
V	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																	
	1			ciety Government Gious L.E. Off			nancial Institute ty Other		know	. –	Broken Bone Internal 🔲		Severe	Lacerat Other	ions Majo		S □ Unknown □ N/A	
I C		Victim/	Business	Name (Last, First,	Middle	e)		Victim of DOB Crime #				3 / Age	Race	Sex	Relationship To Offender	Resident Status Resident		
T I	V1		DA	ΓA OMITTED		1,				33	W	$_{F}$	To Offender	☐ Non-Resident				
M	Home Address													"		ne Phone	Unknown	
	Employer Name/Address DATA ON Employer Name/Address								ITTED					D : N				
	•		ime/Addi	ress	D	ATA OMI	TA OMITTED						Business Phone					
·	VYR	M	ake	Model	Styl	e	Color		Lic	/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	D = Da r juris	amaged diction)	Z = Seized	B =	Burn	ed C = C	ounterfeit / F	orged	F = Found	d 				
	Victim # DCI Status Value OJ QTY						Property Description							Mak	e/Mo		rial Number	
- P - R _																DA	TA OMITTED FOR	
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																	SECURITY	
O P .																	PURPOSES	
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•	Numb	er of V	ehicles S	tolen 0	Numb	er Vehic	eles Recovere	d	0				<u> </u>					
ID	Office:		A. B. (1.	ID 5776)		Officer Sig	Officer Signature Supervisor Signature											
ID		Signatur		Case Status	Case Status Case Disposition:						P.K.S., C. M. (15216)							
Status			-				☐ Inact	☐ Further Investigation ☐ Unfounded ☐ Located						Refuse ther Ag	Refuse to Cooperate ner Agency			