I N	Agenc	y Name		VSTON-SALEN	1 PC	DLICE	] IN	CIDENT/INVESTIGATION					OCA 2424969					
C	ORI	NC	NC 03/	10200	1	REPORT					Date / Time Reported SMTWTFS							
D E	NC NC 0340200  Crime Incident(s)								Att At Found SMTWTFS Month Day Yr Time						Day   Time   19:30 Hrs.			
N T	#1	S	Simple 1	Assault-non Agg	rava	ited Ass	sault	ı —	Com	Month 07			Time 9:30  Hrs				Time 19:29 Hrs.	
D	#2	Crime I	ncident					]	Att Com	Location			inston-sal	lam Ni	C 27	1	Offense Tract 312	
A T	#3	Crime I	ncident						$\overline{}$	Premise 7		jj Ka, w	msion-sai	em iv		Victim Resider		
A		\	1 C					Com Forcible					☐ Single Family ☐ Multi Family  Weapon / Tools					
МО			d or Com										Yes   No	X N/A		apon / 1 oois		
	# of V	ictims	Туре	N Person	_	usiness				Injury		_	· ·	] Loss o			cohol Use:	
V	2 Society Government Financial Institute Broken Bones Severe Lacerations Unknown Internal Unconscious Other Major																	
I C		Victim/		Name (Last, First,	<del></del>		Victim of DC Crime #				B / Age				Resident Status Resident			
T I	DATA OMITTED										<i>1</i> ,	* #	59	W	F	10F,2V	☐ Non-Resident	
M	Home	Addre	SS						1,					ne Phone	Unknown			
	DATA OMI														Durings Dlama			
	Employer Name/Address DATA OMI												Business Phone					
	VYR	M	ake	Model	Sty	le	Color		Lic	c/Lis			Vin					
O 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 = D r juris	amaged diction)	Z = Seized	В=	Burn	ed $C = C$	Counterfe	eit / Forge	d F = Four	ıd				
	Victim # DCI Status Value OJ QTY						Property Description							Mal	ke/Mo		rial Number	
- P - R _					_								-			DA	TA OMITTED FOR	
													+			IN	FORMATION	
																	SECURITY	
O P .																	PURPOSES	
E - R						-										ON	LY THE FIRST	
T																	VE PROPERTY	
Υ :																	ITEMS ARE	
-																	SPLAYED ON	
-													+			P	2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Num	ber Vehic	cles Recovere	d	0									
ID	Officer ID# Off MARTENS, D. G. (16179)								fficer Signature Supervisor Signature REYNOLDS, S. A. (15618)									
עו	Complainant Signature Case Statu									Case Disposition:								
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	ive /Clea	ıred				Locarrest Locarrest by Ander	Refus	gency	looperate	Page 1	