I N	Agenc	y Namo		NSTON-SALE	CM F	POLICE								OCA 2424980						
C I	ORI			(0.2.0.0			1	REPORT							Date / Time Reported S M T W T F S Month Day Yr Time					
D E			NC 034				│ Att At Found S M T W T F S							07 13 2024 21:25 Hrs						
Ν	#1	_rime f	ncident(s	·	~ U/;	thaut Fa	****	☐ Att ☐ Com	Mont	h	Day Yr		lime			y Yr.	Time	: :		
Т	Crime Legislant														13	2024	<u>21:2</u> Offense	4 Hrs.		
D A	#2			Vandali	ism			∐ Au [X] Com				Vinsta	on-salem I	NC 27.	101		222			
T A	#3	Crime I	ncident					□ Att	Premi	se Ty	pe			Victim Residence Type □ Single Family □ Multi Family						
	How	\ ttooko	d or Con	mittad				Com					Forcible			Single Fam on / Tools	· _	ulti Family		
MO			MITTEI												X N/A					
	# of V	ictims	~1	X Person ciety ☐ Governi		Business	inancial Instit	uto	-	ury	[X] None Broken Bone		_	Loss of Teeth Drug/Alcohol Use: Lacerations Yes						
v	1			ligious 🔲 L.E. O				ute er/Unknow		_	nternal		Severe	Lacerati Other M						
I		Victim/	Business	Name (Last, First	, Mid	dle)					Victim of		B / Age	Race	Sex R	elationshi	Resid	ent Status		
C T	VI DATA OMITTED															o Offende		esident on-Residen		
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	Emplo	oyer Na	ame/Add	ress		D	ATA OMI	TA OMITTED						Business Phone						
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Status																				
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ID	Office ANT		C. A. (10		D#		Officer Sig	nature					Supervisor JACOB	Signatu S. T. K	re R. (157	814)				
Status	Complainant SignatureCase StatusCase Disposition:□Further Investigation□UnfoundedStatus□Cleared by Arrow											Test D	□ Located □ Extradition Declined □ Refuse to Cooperate							
							Closed		hausted		Cleared		rest by Ano nder □	ther Age Prosect		eclined	Pa	ge 1		