I N	Agenc	y Name		NSTON-SALE	M F	POLICE	INCIDENT/INVESTIGATION REPORT							OCA 2425357			
C · I	ORI													Date / Time Reported S M I W T F S Month Day Yr Time			
D			NC 034											07	16	202	24 19:13 Hrs.
E N	#1	Crime I	ncident(s	·					At F Mont	ound ch					nown Se	ecure Yr	SM <u>T</u> WTFS Time
T.		Trime I	Break ncident	ting & Entering	g Wi	thout For	rce	X Com	07		<u>16 2024</u> of Incident	4 19:	13 Hrs	· 07	16	2024	Offense Tract
D) #2														01		311
A T	#3	Crime I	ncident					Att	Prem	-	•					m Resid	ence Type
A								Com								0	nily <mark>□</mark> Multi Family
МО			d or Con MITTEI										Forcible □ Yes [□ No	X N/A	Weapor	1 / Tools	
	# of Victims Type Person X Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															Alcohol Use:	
	1		□ So	ciety 🔲 Governr	nent	🗆 F	inancial Institu			_	Broken Bones		_ ∃ Severe	Lacerati	ons		les □Unknown
V I		Victim/		ligious 🔲 L.E. O			ity 🗌 Othe	er/Unknov	vn		nternal			Other N		ationshi	
C	V1															Offende	r 🗖 Resident
T I	• •		DA	TA OMITTED							1,						□ Non-Residen
M ·	Home	Addre	ss								,				Home Pl	hone	
	F 1		/4.11				ATA OMI										
	Emplo	oyer Na	ume/Add	ress		D	ATA OMI	ГTED							Business	s Phone	
	VYR	M	ake	Model	S	tyle	Color	Li	c/Lis				Vin				
0																	
T H																	
E R																	
S																	
	DATA OMITTED																
I N																	
V	V																
L L	O L																
V E																	
D																	
Status	L = L	ost S	= Stolen	R = Recovered	D =	Damaged	Z = Seized	B = Bur	ned C	$= \mathbf{C}\mathbf{c}$	ounterfeit / Fe	orged	F = Foun	d			
Codes	(Chec Victim	k "OJ"	column	if recovered for oth	ier ju	risdiction)											
	#						Property Description							Make	/Model		Serial Number
-													D	ATA OMITTED FOR			
																I	NFORMATION
P- R																	SECURITY
0 P -																	PURPOSES
Р Е-																	NI V THE EDOT
R. T.																	NLY THE FIRST
Y																	ITEMS ARE
-																I	DISPLAYED ON
-																	P2C REPORTS
-	Numb	er of V	ehicles S	Stolen ()	Nu	mber Vabi	cles Recovere	d 0									
	Office	r		I	D#	muer veill	Officer Sig	. 0				S	upervisor	Signatur	e		
ID	TAY	LOR,	B. T. (16255)							Casa D:		ŴILKŀ	ES, K. N	I. (158	27)	
	Complainant Signature Case Status Case Disposition: □ Further Investigation □ Unfounded												□ Loc				tradition Declined
Status							□ Inact	tive			Cleared		est 🗌	Refuse	to Coope		
									hauste	d b	\square Death of			Prosecu		clined	Page 1