| I N | Agenc | y Name | | VSTON-SALE | M F | OLICE | INCIDENT/INVESTIGATION | | | | | | 0 | OCA 2425817 | | | | |
|----------|---|---------|--------------------|----------------------|------|-------------|---|---|-----------------|-----|-----------------------|--|-----------------------|--|---|--------|--------------------------|--|
| C · I | ORI | | | | | | REPORT | | | | | | | Date / Time Reported S M T W T F = Month Day Yr Time | | | | |
| D | | | NC 034 | | | | | | | | ا ما ما | | | 07 | 20 20 | 024 | 14:05 Hrs. | |
| E N | #1 | Crime I | ncident(s | , | | | | Att | At Fou Month | 1 E | Day Yr | TWTF <u>-</u> Time | | | wn Secure Day Yr | T | 1 T W T F – S ime | |
| T . | | Trime I | Brec ncident | iking & Enteri | ıg N | ith Force | e | Com | 07 Locatio | | 20 2024 Incident | <i>14:05</i> F | lrs. | 07 | 20 202 | | 0:04 Hrs. | |
| D A | D #2 | | | | | | | | | | | | | | | | | |
| Т | #3 | Crime I | ncident | | | | | Att | Premise | | 1 0 | · | | | Victim Res | idence | Туре | |
| A | | | | | | | | Com | | | | | | | | | Multi Family | |
| МО | | | d or Con MITTEI | | | | | | | | | Forcib Preib Forcib Preib No | s 🛛 | N/A | /eapon / Too | ols | | |
| V | # of Victims Type X Person Business Injury None Minor | | | | | | | | | | | | | | | - | hol Use: | |
| | | | | | | | | | | | | | | | ere Lacerations \Box Yes \Box Unknown \Box Other Major \Box No \Box N/A | | | |
| V I | | Victim/ | | Name (Last, First | | | | | | | | DOB / Age | | Race Se | | | □N/A esident Status | |
| C T | V1 | | | | | , | | | | | Crime # | U | 17 | | To Offen | ier 🛛 | Resident | |
| Ι | | | DA | FA OMITTED | | | | | | | 1, | | 1 | $W \mid M$ | , | | Non-Residen ך Unknown | |
| M · | Home | Addre | ss | | | D | ATA OMITTED | | | | | | | Home Phone | | | | |
| | Fmple | over Na | me/Add | recc | | | | | | | | | | Business Phone | | | | |
| | _ | Jyer ru | une/7 tuu | 1035 | | D | ATA OMITTED | | | | | | Busiless I none | | | | | |
| | VYR | M | ake | Model | S | tyle | Color | Li | c/Lis | | | Vin | | | | | | |
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| Status | I – I. | ost S | – Stolen | R = Recovered | D - | Damaged | 7 – Seized | B - Bur | ved C- | Col | unterfeit / Foi | and E – E | und | | | | | |
| Codes | (Chec | k "OJ" | | if recovered for oth | | | Z = Scized | D = Dull | | | | geu I – I v | Junu | | | | | |
| | Victim # | | | | | | Property Description | | | | | | | Make/N | Iodel | Serial | l Number | |
| | | | | | | | | | DATA OMITTED | | | | | | | | | |
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| R. O | | | | | | | | | | | | | _ | | | | CURITY JRPOSES | |
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| - | | | | | | | | | | | | | | | | P2C | REPORTS | |
| - | Numb | er of V | ehicles S | tolen () | Nu | mber Vabia | cles Recovered | d 0 | | | | | | | | | | |
| | Office | - | | I | D# | moer venile | Officer Sig | | | | | Supervi | sor Si | gnature | | | | |
| ID | | | | (15484) | | | | | | 17 | D' '' | ĊLA | RK, Ì | D. C. (| 15090) | | | |
| | Comp | iainant | Signatur | e | | | ☐ Further | Case Status Case Disposition: ☐ Further Investigation ☐ Unfounded ☐ Lo | | | | | | cated | | | | |
| Status | | | | | | | □ </td <td>$\square R_0$</td> <td colspan="5">□ Refuse to Cooperate</td> | | | | | $\square R_0$ | □ Refuse to Cooperate | | | | | |
| | | | | | | | Closed | | hausted | | \square Cleared b | | | | cy on Declined | | Page 1 | |