I N	Agenc	y Name		STON-SALEN	CIDENT/INVESTIGATION						OCA 2425906									
C .	ORI	NG					REPORT						Date / Time Reported S M T W T F S Month Day Yr Time							
D E	10		NC 034				I	A + E	1	I cl M	n Tri w	ু নি চা হা	07		21 202	71 me 4 02:15 Hrs. S M T W T F S				
N	#1) Assault-non Agg	rav	atod Ass	sault	_	Att Com	At Four Month	D			TFS			Day Yr	Time		
Τ.	#2		ncident	Assaun-non Agg	grave	иеи Азз	ault								rs 07 21 2024 02:14 Hrs. Offense Tract					
D A	□ Com 1314 S Hawthorne Rd, Winston-sad																	312		
T A	#3	Crime I	ncident						Att	Premise	Typ	pe					Victim Reside	ence Type ily ∏Multi Family		
	How A	Attacke	d or Com	mitted		Ш						Forcible	e Weapon / Tools							
МО	D.	ATA O	MITTEL)										☐ Yes [☐ No	X N/A					
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															Alcohol Use:				
3.7	I Society ☐ Government ☐ Financial Institute ☐ Broken Bones ☐ Severe Lacerations ☐ Yes ☐ Unknown ☐ Internal ☐ Unconscious ☐ Other Major ☐ No ☐ N/A															_				
V I	т,	Victim/		Name (Last, First,			ity 🔲 Out	JI/ OI	IKIIOW	''' L		Victim of		B / Age	Race			Resident Status		
C T	V1		DA	ΓΑ OMITTED					Crime #		48			To Offender						
I M ·		DA.	IA OMITTED					1,			W	M		Unknown						
141	Home Address DATA OMIT									ГТЕО						Home Phone				
	Employer Name/Address DATA OMI'														Business Phone					
														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 = I r juri	Damaged sdiction)	Z = Seized	B =	Burn	ied C=	Cou	ınterfeit / F	orged	F = Foun	d 					
	Victim # DCI Status Value OJ QTY						Property Description								Mal	ce/Mo		erial Number		
- - P - R													D.	ATA OMITTED						
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Y ·					\dashv												1 WEI	ITEMS ARE		
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_]	P2C REPORTS		
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	Numb		ehicles S			nber Vehic	cles Recovere		0 re				ı	Supervisor	Signat	ure				
ID	TUTTLE, M. A. (14990)								TRO							sor Signature Y, M. A. (15677)				
	Complainant Signature Case State									tion		Case Dispos		Loca	ated		□ Ext	radition Declined		
Status							☐ Closed	ive /Clea	ared			Cleared	by A	rrest Decr	Refuse ther Ag	gency	ooperate r	Page 1		