I N	Agenc	y Name		NSTON-SALEN	IN	INCIDENT/INVESTIGATION							OCA 2426010						
C ·	ORI	NG					REPORT								Date / Time Reported S M T W T F S Month Day Yr Time				
D E	10		NC 034				│ ☐ Att │ At Found │ S 掛 T W T F S │ Month Day Yr Time								Day II Time O7 22 2024 O7:12 Hrs. Last Known Secure SM T W T F S Month Day Yr Time				
N T	#1			, Trespassi	ng			LX (- 1	Month 07	D			ime 7:12 Hrs				Time ! 07:11 Hrs	
D.	#2	Crime I	ncident		0					Location	n of	Incident	•	•			•	Offense Tract	
A T		rime I	ncident						Com	780 N Premise			ther I	King Jr D	r, Wir		<i>t-salem</i> Victim Resid	221 lence Type	
A	#3	orime r	nerdent						Com	Tremise	- 71					- 1		nily	
МО			d or Com MITTEI					Forcible Yes No							Weapon / Tools				
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															Alcohol Use:			
**	2 Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow															_			
V I		Victim/		Name (Last, First,			пу 🔲 Оппе	er/Om	KHOW	11 _		Victim of		S / Age	Race	<u> </u>		p Resident Status	
C T	V1 DATA OMITTED																To Offende		
I M ·												1,					1RU	Unknown	
	Home Address DATA OM:									TTED						Home Phone			
•	Emplo	me/Add	ATA OMI	'A OMITTED							Business Phone								
•	VYR	M	Color		Lic	:/Lis				Vin									
T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes																			
	Victim		Status		Property Description								Mak	e/Mo	odel :	Serial Number			
- - P -	#	# DCI Status Value OJ QTY							Property Description						17141	10,1110		OATA OMITTED	
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	Numb Office:		ehicles S	tolen 0		nber Vehi	cles Recovere Officer Sig		e e				I	Supervisor	Signati	ıre			
ID	MIN	TZ, J.									KISER	R, C. N. (14944)							
Cta4	Comp	lainant	Signatur	e			☐ Further	Case Status						ated	e to C	Exponerate	tradition Declined		
Status						Closed					Cleared by Arrest by Another Agency						Page 1		