I N	Agenc		NSTON-SALE	CIDENT/INVESTIGATION						OCA 2426048									
C	ORI			REPORT						Date / Time Reported SMTWTFS Month Day Yr Time									
D E			NC 034		│ │ □ Att │ At Found │ S担 T W T F S								07   22   2024  14:06 Hrs						
N	#1	rime i	,		1	Dec a 11/4 c	.1.		Att Com	Mont	h			T F S			Day Yr	Time	
T	<b>"0</b> (	Crime I	ncident	Aslt Disch Fa/o	occ L	Jweii/ve	en .		_	07 Locat		22   202 of Incident	4   02	2:03   Hrs	s} <i>07</i>		<u>21   2024</u>	Offense Tract	
D A	#2 Crime incident															2710	1	311	
T A	#3	Crime I	ncident						Att	Premi	se Ty	ype				- 1	Victim Reside	• •	
A	How. /	\ ttoolro	d or Con	amitta d					Com					Forcible		_	Single Fam	ily □Multi Family	
MO			MITTEI										Yes No	X N/A	***	apon / 100is			
	# of Victims   Type   Person   X 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,			uty   Othe	er/Un	iknow	'n	□ I 	nternal  Victim of		nscious E	Other	<u> </u>			
C T	V1	· ictiiii								Crime #		D/Agc	Race	БСЛ	To Offender	Resident			
I	DATA OMITTED									2							1RU	☐ Non-Residen ☐ Unknown	
M	Home Address DATA OMIT									TTFD						Home Phone			
	Employer Name/Address DATA OMI															Business Phone			
	VYR   Make   Model   Style   Color								Lic/Lis					Vin					
T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes																			
	Victim #	DCI	Status	Value	QTY		Property Description							Mak	Make/Model Serial Number				
	"							SPENT SHELL CASINGS							LUGER	?		ATA OMITTED	
P -	1	1 77 4 1 DOUBLE PANE WINDOW												FOR					
																	I	NFORMATION SECURITY	
R O				+	_													PURPOSES	
Ρ.																		TOTA OBES	
E - R																	0	NLY THE FIRST	
T																	TWE	LVE PROPERTY	
Y																		ITEMS ARE	
																		P2C REPORTS	
-				+														P2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Nur	nber Vehi	cles Recovere	d	0										
TD.	Office	r OM C	T /14	ID	)#		Officer Sig	natuı	re					Supervisor			15216)		
ID	SIMON, S. T. (15870)  Complainant Signature Case State									BURKS, C. M. (15216)  Case Disposition:							<i>3210)</i>		
Status	Comp		<u></u>	-			☐ Further ☐ Inact ☐ Closed ☐ Closed	r Inve tive /Clea	ared			☐ Unfour☐ Cleared☐ Cleared	nded d by A d by A	Loc rrest   C	] Refuse other Ag	gency	Cooperate ′ г	Page 1	