| I N | Agenc | y Nam | NSTON-SALE | IN | NCIDENT/INVESTIGATION | | | | | | OCA 2426400 | | | | | | | | |
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| I C | ORI | NC | NC 02 | 40200 | REPORT | | | | | | | Date / Time Reported SMTWIFS Month Day Yr Time | | | | | | | |
| D E | 10 | | NC 034 | | │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ | | | | | | | IF S | 07 25 2024 09:14 Hrs. | | | | | | |
| N T | #1 | Jimic I | , | , Lost/stolen Lice | Att At Found S M T W T F S Month Day Yr Time X Com 07 25 2024 09:14 1 | | | | | | | | Month Day Yr Time | | | | | | |
| D . | #2 | Crime I | ncident | Bosh stoten Bicc | 7150 1 | | | _ | Att | | _ | f Incident | 4 05 | 7.14 111. | 31 07 | | 23 202 | Offense Tract | |
| A | | | | | | | | _ | Com | | | | 311 | Ra, Wins | ton-sa | | | 213 | |
| T A | #3 | Crime I | ncident | | | | | | Att Com | Premise | Ty _j | pe | | | | - 1 | | dence Type mily Multi Family | |
| МО | | | d or Con MITTEI | | Forcible | | | | | | Forcible Yes | Weapon / Tools | | | | | | | |
| | # of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use: | | | | | | | | | | | | | | | /Alcohol Use: | | | |
| | O Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow | | | | | | | | | | | | | | | _ | | | |
| V I | | Victim | | Name (Last, First, | | | uty 🔲 Othe | er/Ur | iknow | 'n [| | victim of | | scious E | Other | . | | | |
| C T | V1 Crime # | | | | | | | | | | | | | 371180 | 111100 | 50.1 | To Offend | er Resident | |
| I | | | DA | ΓA OMITTED | | | | | | | | | | | ☐ Non-Resider ☐ Unknown | | | | |
| М - | Home Address DATA OMI' | | | | | | | | FTED | | | | | | | Home Phone | | | |
| | Employer Name/Address DATA OMI | | | | | | | | FTED | | | | | | | Business Phone | | | |
| | VYR | M | ake | Model | Sty | yle | Color | | Lie | c/Lis | | | | Vin | | | | | |
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| Status | S L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found | | | | | | | | | | | | | | | | | | |
| Codes | (Chec | k "OJ" | column | if recovered for other | er juri | isdiction) | | | | | | | | | | | | | |
| | # | DCI | Status LOST | Value | OJ | QTY 1 | | Property Description | | | | Mak | ce/Mo | | Serial Number | | | | |
| - | | 38 PCA | TEMPORARY LICENSE PLATE 1008 NC | | | | | | | | TOYT F | Princ | - | DATA OMITTED FOR | | | | | |
| P - R | | PCA OTHE 1 2008 NC | | | | | | | | | | ,,,,, | | INFORMATION | | | | | |
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| | Office | r | | ID | | 7 (111 | Officer Sig | | _ | | | | | Supervisor | Signat | ure | 0.25) | | |
| ID | | | <i>L.</i> (158 Signatur | | | Case Statu | c | | | 10 | ase Dieno | sition | ÑΑVY, | C. M. | (15 | 037) | | | |
| | Comp | iaiiidiil | Digitalul | · | ☐ Further | r Inv | Investigation Unfounded Docat | | | | | | ated | | □ E | xtradition Declined | | | |
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| | | | | | | | ☐ Closed | /Lea | ds Exi | hausted | - 1 | □ Death o | of Offe | nder 🗆 | 7 Prose | cution | Declined | Page 1 | |