I N	Agenc	y Name	e WIN] IN	INCIDENT/INVESTIGATION							OCA 2428294							
I C	ORI	NC	NC 034	10200			1	REPORT								Date / Time Reported SMTWTFS Month Day Yr Time			
D E			ncident(s						Δtt I	At Found	d	SM	ITW	IF S	08			Time 24 23:45 Hrs. SMTWTFS	
N T	#1		iioidoiii(s	, Discharging F	_	Month Day Yr Time Month Day Yr Tir									Time				
D.	#2	Crime I	ncident						\rightarrow	Location	_		f 23	.43	7 00		00 202	Offense Tract	
A		· · ·						_	Com				- BL	K, Winste	on-sale			114	
T A	#3	Erime I	ncident					☐ Att Premise Type ☐ Com							Victim Residence Type ☐ Single Family ☐ Multi Family				
МО			d or Con MITTEI								Forcible Yes No	X N/A	We	apon / Tool	S				
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															Alcohol Use:			
* 7	1 Society Government Financial Institute Broken Bones Severe Lacerations Wes Unknown Internal Unconscious Other Major No NA															_			
V I		Victim/		Name (Last, First,			пу 🔲 Оппе	21/ () 11	KIIOW	¹¹ _		Victim of		B / Age	Race				
C T	Crime #													. 8			To Offende	Resident	
I			DA	IA OMITTED								1,						☐ Non-Resident	
М -	Home Address DATA OMI'									ГТЕО						Home Phone			
	Employer Name/Address DATA OM														Business Phone				
•	VYR	M	Color Lic/Lis Vin							Vin									
O T H E R S							DATA	х С	DΜ	ITTE	ED)							
V O L V E D	L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found																		
Status Codes	(Chec	k "OJ"	= Stolen column	f recovered for othe	D = L r juri:	Samaged sdiction)	Z = Seized	В=	Burn	ed C=C	Cou	nterfeit / F	orged	F = Foun	d				
	Victim # DCI Status Value OJ QT						Property Description								Mak	e/Mo	del	Serial Number	
- - P - R														I	DATA OMITTED				
					_													FOR INFORMATION	
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0																		PURPOSES	
Р ⁻ Е -																			
R																		ONLY THE FIRST	
Т Ү -																	TWI	ELVE PROPERTY	
1																		ITEMS ARE DISPLAYED ON	
-																		P2C REPORTS	
-																			
			ehicles S			nber Vehic	cles Recovere		0										
ID	Office: KLE		. L. (16	043)	Officer Sig	Officer Signature Supervisor Signature WILLIAMS, K. A. (15631)													
ii)		lainant		Case Status		Case Disposition:							/ 1						
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	ive /Clea	red		j 1		by Ai	Test by Ander	Refuse other Ag	gency	ooperate	Page 1	