I N	Agenc	y Name		NSTON-SALEN	IN	INCIDENT/INVESTIGATION							OCA 2429308						
C .	ORI	NC					1	REPORT							Date / Time Reported SMTWTFS Month Day Yr Time				
D E	NC NC 0340200 Crime Incident(s)									Att At Found SMTWTFS Month Day Yr Time						$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
N T	#1			Trespassi	ng			_	Com	Month 08				ime :18 Hrs			Day Yr	Time 11:18 Hrs.	
D	#2	Crime I	ncident				Location		ncident					a al an	Offense Tract 221				
A T															r, wu		Victim Reside		
A									Com							_		ily ∏Multi Family	
МО			d or Com MITTEI								Forcible Yes No	Weapon / Tools							
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																		
V	2			ciety Governm ligious L.E. Off		_	inancial Instit ity Othe		know			ken Bone rnal 🔲		☐ Severe	Lacera Other		. –	es □Unknown O□N/A	
I C	1	/ictim/	Business	Name (Last, First,		Victim of DC					3 / Age	Race	Sex		Resident Status				
T I	V1		DA	ΓA OMITTED					rime#					10 Offender	□ Non-Resident				
M ·	Home	Addre	cc									1,				Home Phone			
	Home Address DATA OMI								TTED										
	Employer Name/Address DATA ON								ITTED					Business Phone					
•	VYR	M	ake	Model	St	yle	Color		Lic	c/Lis				Vin	·				
T H E R S I N O L V E D	DATA OMITTED																		
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column	R = Recovered if recovered for other	D = l er juri	Damaged isdiction)	Z = Seized	B =	Burn	ed $C = C$	Count	terfeit / F	orged	F = Foun	d				
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo	odel S	erial Number	
- - P - R															D.	ATA OMITTED			
					_												T	FOR NFORMATION	
														+				SECURITY	
0																		PURPOSES	
Р ⁻ Е -					_												0.	H W THE FID CT	
R T																		NLY THE FIRST LVE PROPERTY	
Y -					\dashv												1 112	ITEMS ARE	
-																	Ε	ISPLAYED ON	
-]	P2C REPORTS	
-	NI1	om of 17	abial C	tolon 0	N	nh on 37-1 '	alaa Da	a	0										
	Numb Office:		ehicles S	tolen 0		nber Vehic	cles Recovere Officer Sig		e e				T	Supervisor	Signat	ıre			
ID	LAM	<i>B</i> , <i>L</i> .	N. (16	119)			-					(0)	~-5.1141						
Status	Comp	ainant	Signatur	e		Inact	☐ Further Investigation ☐ Unfounded ☐ L						Loc rest rest by And	Refuse to Cooperate					
							Closed			nausted		Death o	f Offe	nder 🗆	1 Prosec	rution	Declined	Page 1	