I N	Agenc	y Name		ISTON-SALEN	INCIDENT/INVESTIGATION								OCA 2429668						
C	ORI	NC	NC 034	10200	1	REPORT								Date / Time Reported S M T W T F S Month Day Yr Time					
D E			ncident(s			Att At Found SMIWIFS Month Day Yr Time								Day Time O8 20 2024 10:26 Hrs.					
N T	#1			Disorderly Co	ondu	ıct		ı —	Com	Month 08	D			lime 0:26 Hrs			Day Yr 🖰	Time $10:25$ Hrs.	
D	#2	Crime I	ncident	•						Location	of I	Incident						Offense Tract	
A T		Trima I	ncident	Trespassi				Com	310 W			Apt.	200, Win.	ston-se		NC Victim Reside	111		
A	#3 Resisting Arrest									Tremise	тур						Single Fam	ily	
МО			d or Con MITTEI											Forcible ☐ Yes ☐ No	X N/A	We	apon / Tools		
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															lcohol Use:			
V	2			ciety Governm igious L.E. Off			inancial Institution		know		•	oken Bone		Severe	Lacerar Other	ions Moio		Unknown	
I		Victim/		Name (Last, First,			ity 🔟 Ouk	21/ (31)	1 1 1 1 1 1 1 1					3 / Age	Age Race Sex Relationship Resident S				
C T	V1		DΔ	ΓΑ OMITTED	Crime #								To Offender	☐ Resident ☐ Non-Resident					
I M				TA OMITTED					1,2,3,						Unknown				
111	Home Address DATA OMI								ГТЕО							Home Phone			
•	Employer Name/Address DATA OM								TTED							Business Phone			
1	VYR	M	ake	Model	Sty	yle	Color		Lic	:/Lis				Vin					
T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes	L = L	ost S k "OJ"	= Stolen	R = Recovered f recovered for other	D = I er iuri	Damaged sdiction)	Z = Seized	B =	Burn	ed C = 0	Cou	nterfeit / F	orged	F = Foun	d				
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo	del S	erial Number	
P -	п	" Topony Bestiman												ATA OMITTED					
					_													FOR	
					-												11	NFORMATION SECURITY	
R O					+													PURPOSES	
P :																			
R																		NLY THE FIRST	
T Y					_												TWEI	VE PROPERTY	
					+												D	ITEMS ARE ISPLAYED ON	
					\dashv													P2C REPORTS	
-																			
			ehicles S			nber Vehic	cles Recovere		0										
ID	Office: ANL	r D <i>ERSO</i>	ON, B.	ID R. (15633)	Officer Sig	Officer Signature Supervisor Signature WAGONER, S. D. (15802)													
	Complainant Signature Case Statu									Case Disposition:									
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	ive /Clea	red				by Ai	Loc rrest rrest by Ander	Refuse other Ag	gency	ooperate	Page 1	