I N	Agenc	y Nam	NSTON-SALE	, IN	NCIDENT/INVESTIGATION						OCA 2431403										
C I	ORI	NC						REPORT							Date / Time Reported SMTWTFS Month Day Yr Time						
D E			NC 034											09   02   2024  18:21 Hrs.							
N	#1								e   □ Att   At Found   S								Month Day Yr Time				
T	#2	Crime I	ncident	iking & Linerin	8 11	un ron			_	09 Location	_	02   202 f Incident	4   10	8:21   HIS	s} 09	'   (	02   2		18:21   Offense Tra	Hrs. act	
D A	Vandalism																313				
T A	#3	Crime I	ncident	Resisting A		Att Com	Premise	е Ту	pe				- 1	Victim F  ☐ Single		ce Type y ∏Multi l	Family				
МО			d or Con MITTEI								Forcible Yes	X N/A		eapon / T	ools						
	# of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:															-					
			□ So	ciety   Governm	ent	□ I	Financial Instit			[	•	Broken Bon	_	∏ Severe	_			-	Unkr	- 1	
V	3			igious L.E. Of			outy   Othe	er/Un	know	'n [	] Ir	nternal [		nscious [	Other	Majo	or	No No			
I C	Victim/Business Name (Last, First, Middle)  Victim of DOB / Age Crime #														Race	Sex	Relatio To Offe	nship   ender	Resident S		
T I	V1		DA	ΓA OMITTED								1, 2							☐ Non-R	Residen	
M	Home	Addre	ess									1, 2				Hor	ne Phon	l	☐ Unkno	<u>wn</u>	
	DATA OMI									FTED											
	Employer Name/Address DATA OMI									ГТЕD					Business Phone						
	VYR	Color	Color Lic/Lis Vin						Vin												
H E R S I N V O L V E D	DATA OMITTED																				
Status Codes																					
Codes	Victim				December December									Make/Model Serial Number							
	# DCI Status Value OJ QTY  35 4 0 0 GLASS DOO							Property Description							Mai	ke/Mo	odel		TA OMIT		
	77 4 1 GLASS DOOR													FOR							
P · R .																			FORMATI		
																			SECURIT		
O P																		-	PURPOSE	<u>.s</u>	
E ·																		ON	LY THE F	IRST	
R T																	Т		VE PROPE		
Y																			ITEMS AF	RE	
																		DI	SPLAYED	ON	
																		P2	2C REPOR	tTS	
	Numb	er of V	ehicles S	tolen 0	Nive	mber Vol	icles Recovere	d	0												
	Officer	r		ID		moer ven	Officer Sig		_					Supervisor							
ID	CROALL, D. E. (16110)								BIELS								TEN, A. R. (15598)				
Status	Compl	iainant	Signatur	e			Case Statu Further X Inact Closed	r Inve tive I/Clea	ıred				nded d by A d by A	Loc rrest [ rrest by Ander	Refuse other Ag	gency	Cooperate	ē —	Page 1		