I.	Agency Name INCIDENT/INVESTIGATION OCA 2432068																		
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C · I	ORI	NG	NGON	40200															
D E			NC 034					l							09 15 2024 01:21 Hrs.				
N	#1		ncident(s	·			Att At Found SM T M T F S Month Day Yr Time							Last Known Secure Month Day Yr Time					
Τ.			ncident	Assault-non Ag	gra	vatea Ass	sault	⊠ Com □ Att	09 Locatio	-	<u>5 2024</u> Incident	01	:21 Hrs	09	15	2024	01:20 Hrs. Offense Tract		
D A	D #2																211		
Т	#3	Crime I	ncident					Att		mise Type				Victim Residence Type					
A	π 3							Com								0	ily □ Multi Family		
МО			d or Con MITTEI										Forcible Yes		Weapo	n / Tools			
	# of Victims Type Type Rerson Business Injury Type None Minor Loss of Teeth Drug/Alcohol Use:															Alcohol Use:			
	2			ciety 🔲 Governr	nent	\Box F	inancial Instit				roken Bones	s	□ Severe	Lacerati					
V I				ligious 🔲 L.E. O			ity 🗌 Othe	er/Unknov	^{/n} [ternal			Other N	-				
С																lationshij Offender			
T I	V1		DA	TA OMITTED							1,		20	W		SB,2V	□ Non-Residen		
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	Emplo	oyer Na	me/Add	ress		D.	ATA OMI	TA OMITTED						Business Phone					
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Status	L = L	ost S	= Stolen	R = Recovered	D =	Damaged	Z = Seized	B = Burr	ned C =	= Coι	unterfeit / Fe	orged	F = Found	1					
Codes	(Chec Victim	k "OJ"	column	if recovered for oth	ier ju	risdiction)													
	#	DCI	Status	Value	OJ	QTY		Property							/Model		erial Number		
-		13 OTHE 1 (9MM) FIREARMS/AMMUNITION									1	TAURUS	/G2c	D	ATA OMITTED FOR				
-																I	NFORMATION		
P R																	SECURITY		
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ID	Office GAF		F. I. (1		D#		Officer Sig	Officer Signature Supervisor Signature PARKER,								Signature R, M. J. (15308)			
	Comp	lainant	Signatur	e			Case Status	s Case Disposition:											
Status							Inact	☐ Further Investigation ☐ Unfounded ☐ Lo ☐ Inactive ☐ Cleared by Arrest						Cated Extradition Declined Refuse to Cooperate					
							Closed	/Cleared	hausted		Cleared Death of		rest by Ano		ncy	г	Page 1		
																	···		