I N	Agenc	y Name		VSTON-SALEN] IN	ICIDENT/INVESTIGATION						OCA 2433721							
C I	ORI	NC	NC 034				1	REPORT							Date / Time Reported S M T W T F S Month Day Yr Time				
D E			ncident(s		<u> </u>	☐ Att						Day 17 Time 13:04 Hrs. Last Known Secure SMTMTFS Month Day Yr Time							
N T	$^{#1}$	'ommi	ınicatir	ng Threats -intin	nida	tion, No	n Physical	_	Com	Month 09				ime 3:04 Hrs	Mont 09			Time 12:48 Hrs.	
D	#2	Crime I	ncident					_	Att	Location		cident			JC 27	1107	·	Offense Tract 213	
A T	#3	Crime I	ncident					_	Com Att	Premise 7		n St, W	inste	n-salem 1	VC 27		/ictim Resid		
A									Com							_		ily ∏Multi Family	
МО			d or Com MITTEE											Forcible Yes No	Weapon / Tools				
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																		
V	1			ciety Government Gious L.E. Off			inancial Institution		know			en Bone nal □		Severe l	Lacerat Other	tions Maio		es Unknown O N/A	
I C		Victim/		Name (Last, First,		·		Victim of DOB /			B / Age	Race	Sex	Relationship	Resident Status				
T I	V1		DA	ΓA OMITTED							45	n		To Offende	Resident ☐ Non-Resident				
M	1														В	Hon	ne Phone	Unknown	
	DATA OMI									ГТЕD									
	Employer Name/Address DATA C								OMITTED						Business Phone				
ı	VYR	M	ake	Model	Sty	yle	Color		Lic	c/Lis				Vin					
T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes	(Chec	k "OJ"	= Stolen column i	R = Recovered frecovered for other	D = I r juri	Damaged sdiction)	Z = Seized	B =	Burn	ed C = C	Counte	erfeit / F	orged	F = Found					
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo		erial Number	
- P - R _		 											D	ATA OMITTED FOR					
					_												I	NFORMATION	
																		SECURITY	
O P .					_													PURPOSES	
E - R					_												О	NLY THE FIRST	
T					\dashv													LVE PROPERTY	
Y																		ITEMS ARE	
					_													DISPLAYED ON	
					\dashv													P2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Nun	nber Vehic	cles Recovere	d	0										
ID	Office	r) WN	C. C. (1	ID 16002)	Officer Sig	Officer Signature Supervisor Signature NAVY, C. M. (15037)													
ID			Signatur		Case Status	tus Case Disposition:													
Status	•		-				☐ Further ☐ Inact ☐ Closed ☐ Closed	ive /Clea	ared			Unfoun- Cleared Cleared	ded by Aı by Aı	Loca	Refuse ther Ag	gency	ooperate [Page 1	