| I N | Agene | y ivain | | STON-SALE | INCIDENT/INVESTIGATION REPORT | | | | | | | 2433738 | | | | | |
|--|---|--------------|---------------------|---|----------------------------------|------------|---------------------------------------|--|---------|--------|----------------------|---|---|--|-------------------------|------------------------|------------------------------|
| C · I | ORI | | | (. . | | | | | | | | Date / Time Reported SMTWTES Month Day Yr Time | | | | | |
| D | | | NC 034 | | | - | | | 1 -1 -1 | | | 09 | 20 | 202 | 4 15:34 Hrs. | | |
| E N | #1 | Crime I | ncident(s | | | | □ Att At Found Month Day Yr Time | | | | | | | Last K Monti | nown S 1 Day | ecure Yr | SMTWT _± S Time |
| T. | | Trimo I | naidant | Missing Pe | ersor | n | | X Com | 09 | | | 15 | :34 Hrs | 09 | 20 | 2024 | 15:33 Hrs. |
| D | Com 2160 Potons Chook Pup Winst | | | | | | | | | | | | | | NC 2 | 7127 | Offense Tract 313 |
| A T | #3 | Crime I | ncident | | | | | | | nise T | | N I W | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | satem | | | ence Type |
| А | #3 | | | | | | | Com | | | | | | | □Si | ngle Fam | ily □ Multi Family |
| МО | | | d or Con MITTEI | | | | | | | | | | Forcible □ Yes [□ No | | Weapo | n / Tools | |
| | # of Victims Type A Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use: | | | | | | | | | | | | | | | Alcohol Use: | |
| | 1 | | | ciety 🗌 Governm | | | inancial Institu | | | _ | Broken Bones | | □ Severe | Lacerati | Lacerations Yes Unknown | | |
| V I | | Victim | | ligious □ L.E. Of Name (Last, First, | | | ity 🗌 Othe | er/Unknov | vn | | Internal | | scious | Other N | - | | |
| С | V1 | v ictiiii/ | | | what | ule) | | | | | Victim of Crime # | DOB | 54 / Age | Race | | lationship Offender | |
| T I | V I | | DA | FA OMITTED | | | | | | | 1, | | - | W | М | | □ Non-Residen |
| M· | Home | Addre | ss | | | | | | | | | | | | Home F | hone | Unknown |
| | | | | | | D. | ATA OMI | TA OMITTED | | | | | | | | | |
| | Emplo | oyer Na | me/Add | ress | | D. | ATA OMITTED | | | | | | | Business Phone | | | |
| | VYR | M | ake | Model | St | tyle | Color | Li | c/Lis | | | | Vin | | | | |
| | | | | | | | | | | | | | | | | | |
| H E R S I N V O L V E D | | DATA OMITTED | | | | | | | | | | | | | | | |
| Status | L = L | ost S | = Stolen | R = Recovered | D_= | Damaged | Z = Seized | B = Bur | ned | C = C | ounterfeit / Fe | orged | F = Found | 1 | | | |
| Codes | Victim | | | if recovered for oth | Ť | Í | | | | | | | | | | | |
| | # DCI Status Value OJ QTY | | | | | | Property Description | | | | | | | Make | /Model | | erial Number ATA OMITTED |
| - | | | | | | | | | | | | | | | | D. | FOR |
| | | | | | | | | | | | | | | | | I | NFORMATION |
| P- R | | | | | | | | | | | | | | | | | SECURITY |
| 0 | | | | | | | | | | | | | | | | | PURPOSES |
| Р' Е- | | | | | | | | | | | | | | | | | |
| R | | | | | | | | | | | | | | | | | NLY THE FIRST |
| T Y · | | | | | | | | | | | | | | | | TWE | LVE PROPERTY |
| · · | | | | | | | | | | | | | | | | | ITEMS ARE |
| - | | | | | | | | | | | | | | | | | DISPLAYED ON P2C REPORTS |
| - | | | | | | | | | | | | | | | | | |
| - | Numb | er of V | ehicles S | tolen 0 | Nu | mber Vehio | cles Recovere | d 0 | | | | | I | | | | |
| | Office | | | (15752) II |) # | | Officer Sig | nature | | | | | Supervisor | Signatur | e | 522.23 | |
| ID | | | , A. E. Signatur | (15753) | | | Case Status | s | | | Case Disposi | ition. | ĹANGL | JON, S | . L. (1 | 3223) | |
| Status | Comp | unun | Signatul | - | | | □ Further □ Inact | □ Further Investigation □ Unfounded □ Lo | | | | | | Cocated Extradition Declined Refuse to Cooperate nother Agency | | | |
| | | | | | | | X Closed | | hauste | ed | Death of | | | Prosecu | | clined | Page 1 |