I N	Agenc	y Name		NSTON-SALEN	CIDENT/INVESTIGATION						OCA 2433851								
I C	ORI	NC	NC 034	40200			1	REPORT								Date / Time Reported SMTWTFS Month Day Yr Time			
D E		rime I		Att At Found							T F S	Day II Time O9 21 2024 10:18 Hrs. Last Known Secure S M T W T F S Month Day Yr Time							
N T	#1			, 1g Threats -intin	nida	ition, No	n Physical		Com	Month 09	Day			ime :18 Hrs				Time 10:17 Hrs.	
D.			ncident							Location	of Inci	dent		•				Offense Tract	
A T		'rima I	ncident	Disorderly Co	ondi	uct		☐ Att Premise Type							n-sale	-salem NC 27157 312 Victim Residence Type			
A	#3	Jime I	nerdent	Trespassi	☐ Att Premise Type ☐ Com							☐ Single Family ☐ Multi Family							
МО			d or Con MITTEI					Forcibl							Weapon / Tools				
	# of Victims Type Person X Business Injury None Minor Loss of Teeth Drug															th Drug/Al	cohol Use:		
	3			ciety Governm	ent	□ F:	inancial Instit			. –	Broker	n Bone	s	Severe	- Lacerat	ions	☐ Ye	s Unknown	
V I		Victim/		igious L.E. Off			ity 🔲 Othe	er/Un	iknow	n _	Interna	im of		scious Age	Other			□N/A Resident Status	
C T	V1	, 1001111				,		Crime #					, , rige	Rucc	DUA	To Offender	Resident Resident		
I			DA	ΓA OMITTED			3,									☐ Non-Resident ☐ Unknown			
М -	Home	Addre	ss		ATA OMI	TTED								Home Phone					
	F 1 N /A 11								OMITTED						Business Phone				
	VYR	Model	Color Lic/Lis Vin						Vin										
					_														
О																			
T H																			
E																			
R S	R S																		
	DATA OMITTED																		
I N																			
V	\checkmark																		
O L																			
V E																			
D																			
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column	R = Recovered if recovered for other	D = er jur	Damaged isdiction)	Z = Seized	B =	Burn	C = C	Counter	feit / F	orged	F = Foun	d				
	Victim # DCI Status Value OJ					QTY		Descriptio	Description				Mak	e/Mo	odel Se	rial Number			
- - P -		" 30 21															DA	TA OMITTED	
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R O					\dashv													PURPOSES	
Р ⁻ Е -																			
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-																		2C REPORTS	
-																			
			ehicles S	-		nber Vehi	cles Recovere		0				-	Cumam-!	Ciam-1	IPC			
ID	Officer SIM	ON, S	. T. (15	id (870)	Officer Sig								or Signature KS, C. M. (15216)						
	Complainant Signature Case Sta									Case Disposition:							□ Evtr	adition Declined	
Status							Inact	☐ Inactive ☐ Cleared by Arrest ☐ Refuse to Cooperate							adition Decilied				
							Closed/Cleared Cleared by Arrest by Closed/Leads Exhausted Death of Offender							Another Agency Prosecution Declined Page 1					