I N	Agenc	y Nam		NSTON-SALE	IN	INCIDENT/INVESTIGATION							OCA 2434400							
C ·	ORI									REPORT						Date / Time Reported SMTWTFS Month Day Yr Time				
D E	NC NC 0340200 Crime Incident(s)									Les Au L At Court J Cl M m tal m tol cl						09 25 2024 15:31 Hrs.				
N	#1 Crime incident(s) Drug Violations									☐ Att							Month Day Yr Time			
T D	#2	Crime I	ncident	Drug viola	i i Ori.	3			-	09 Location			<i>‡</i> <i>13</i>):31 HIS	s 09		23 2024	Offense Tract		
A								_	Com				BLK	, Winstor	ı-saler			213		
T A	#3	Jrime I	ncident						Att Com	Premise '	Тур	be					Victim Reside Single Fam	ence Type ily □Multi Family		
МО			d or Con		☐ Yes						Forcible Yes	Weapon / Tools								
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															Icohol Use:				
																_				
V I		Victim/		Name (Last, First,			uty Otne	er/Un	Know	n _		ternal Victim of		scious [Race	-				
C T	V1			ΓA OMITTED		Crime #					- /8-		~	To Offender						
I M ·				IA OMITTED		1,									☐ Unknown					
141	Home Address DATA OMIT									ГТЕD						Home Phone				
	Employer Name/Address DATA OMI								TTED						Business Phone					
	VYR	Color Lic/Lis Vin							Vin											
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т	DATA OMITTED																			
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L V																				
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D																				
Status	S L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found																			
Codes	(Chec	k "OJ"	column	if recovered for other	er jur	isdiction)	Z = Beizeu		Duin	eu c – c		interrent / I	orged	1 - 1 out						
	#	Property Description 45) FIREARMS/AMMUNITION									e/Mo		erial Number							
-									OTICS EQUIPMENT						GLOCK	<u> </u>	D/	ATA OMITTED FOR		
P - R		- 11	EVID			1	DIC 05/11/11C										II	NFORMATION		
																		SECURITY		
O P -																		PURPOSES		
Ē -																	01	NLY THE FIRST		
R T						+												VE PROPERTY		
Y																		ITEMS ARE		
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-	Numb	er of V	ehicles S	tolen 0	Nur	nher Veb	cles Recovere	d	0											
	Office	r		ID		110C1 V CIII	Officer Sig		-				Ī	Supervisor			15.400			
ID	VAN KUREN, E. W. (15939) Complainant Signature Case State									ĞER						ALD, J. B. (15409)				
	Comp	iaiiidill	Digitaluf	•	☐ Furthe	r Inve	Investigation ☐ Unfounded ☐ Located ☐ Extra							radition Declined						
Status					tive /Clea					by Aı	rest by And	Refuse to Cooperate Another Agency								
							☐ Closed	/Lear	is Ext	hausted	1	□ Death o	t Offe	nder 🗆	1 Prosec	ultior	Declined	Page 1		