I N	Agenc		NSTON-SALEN	CIDENT/INVESTIGATION						OCA 2435160										
C	ORI									RE	PO	RT			Date / Mon	Time	Reported	d S		FS
D E	10	NC Crime I			I							10	10 01 2024 08:58 Hrs.							
N T	#1								Month Day Yr Time								Month Day Yr Time			
	#2	Crime I	ncident	Larceny 11tt			-	10 Locatio		f Incident	4 00	5.30 1118	s		11 20		Offense Tra	Hrs.		
D A	Obtaining Money By False Pretense																		314	
T A	#3	Crime I	ncident					Att Com	Premis	е Ту	pe					Victim Re → Single I		ce Type y ∏Multi F	- amily	
МО			d or Com		Forcible Yes No						Weapon / Tools									
	# of V	ictims	Туре	☐ Person	[אַר	Business				Inju	ry	☐ None	ПΝ]Loss o	f Tee	th Dru	ıg/Al	cohol Use:	
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow															own				
V I		Victim		igious L.E. Off Name (Last, First,			uty Othe	er/Un	ıknow	[/] n [ן Ir ו	victim of		nscious [-	r Major No N/A Sex Relationship Resident Status				Statue
C T	V1	v ictiii/				Crime #				Race	SCA	To Offer	nder	☐ Resider	nt					
I	1		DA	ΓA OMITTED								1,2							□ Non-Re	
M	Home	Addre	ess		TTED							1	Home Phone							
	Employer Name/Address DATA OMI															Business Phone				
	VYR Make Model Style Color								Lic/Lis Vin											
O T H E R S I N V O L V E D	DATA OMITTED																			
Status Codes	(Chec	k "OJ"	= Stolen column	R = Recovered if recovered for other	D = i er jur	Damaged isdiction)	Z = Seized	B =	Burn	ied C =	: Co	unterfeit / F	Forged	F = Foun	ıd					
	Victim # DCI Status Value OJ QTY								Property Description							Iake/Model Serial Number				r_
	20 7 1 MONEY/CAS														US/Cur	<u> </u>				ED.
P -	1	36	7		_	1	2 PIECE DRII	LL SET							KOBAL	T		INI	FOR FORMATION	ON
					\dashv														SECURITY	
R O																			PURPOSES	
Р.																				
E ·																		ON	LY THE FI	RST
T Y																	TV		/E PROPE	
1 .																			TEMS AR	
					\dashv														SPLAYED C REPOR	
																		1.2	C KLI OK	-
-	Numb	er of V	ehicles S	tolen 0	Nur	nber Vehi	cles Recovere	d	0					1						-
ID	Office		C = A	(16350) ID	Officer Sig	icer Signature Supervisor Signature														
ID			Signatur	(16359) e	Case Statu	s	BURKS, C. M. (1521) Case Disposition:								J210)					
Status	- ··P		<i>G</i> 1				☐ Furthe: ☐ X Inact ☐ Closed	r Inve tive /Clea	ared			☐ Unfoun ☐ Cleared ☐ Cleared	ded by Ai by Ai	Loc rrest rrest by Ander] Refuse other Ag	gency	ooperate		Page 1	lined