							-						-					
I N	Agenc	y Name		STON-SALE	INCIDENT/INVESTIGATION							OCA 2435859						
C · I	ORI					02102	REPORT							Date / Time Reported S M T W T F S Month Day Yr Time				
D		NC	NC 034	40200								10   05   2024  23:35 Hrs.						
E N		Crime I	ncident(s					🗆 Att		Found	Day Yr	TW	T F <u>s</u> ime	Last K Monti	nown S 1 Day	ecure Yr	SMTWTF <sub>-</sub> S Time	
T .	#1			Missing Pe	ersor	n		X Con	<u> </u>		05   2024		:35  Hrs				23:34 Hrs.	
D	D #2 Crime Incident $\Box$ Att Location of Incident													1	NCO	7106	Offense Tract	
A T	Crime Insident																113 ence Type	
A	#3	Jinne I	nerdent											☐ Single Family ☐ Multi Family				
	How A	Attacke	d or Con	mitted									Forcible		Weapo	n / Tools		
МО	D.	ATA O	MITTEI	)									□ Yes [ □ No	X N/A				
	# of Victims Type A Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															Alcohol Use:		
	1		🗆 So	ciety 🔲 Governm			inancial Institu				Broken Bones		Severe					
V I		Victim		ligious □ L.E. Of Name (Last, First,			ity 🗌 Othe	er/Unkno	wn		Internal U			Other N				
С	V1	v ictiiii/			who	ule)					Victim of Crime #	DOR	/ Age 21	Race S		lationship Offender		
T I	V I		DA	FA OMITTED							1,			W	F		Non-Residen	
M·	Home	Addre	ss								-,				Home P	hone	Unknown	
						D	ATA OMI	ITED										
	Emplo	oyer Na	ume/Add	ress		D	ATA OMITTED							Business Phone				
	VYR	M	ake	Model	S	tyle	Color	L	ic/Lis				Vin					
T 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 = Bu	ned	$\mathbf{C} = \mathbf{C}$	ounterfeit / Fo	orged	F = Found	d				
Codes	(Chec Victim	k "OJ"	column	if recovered for oth	er ju	risdiction)												
	#							Property Description							/Model		erial Number	
																D.	ATA OMITTED 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 Vehic	cles Recovere	d 0					I					
	Office	r		II	<b>)</b> #		Officer Sig						Supervisor	Signatur	e	5(21)		
ID			<u>, A. J. (</u> Signatur	( <u>16270)</u> e			Case Status	5		<del></del>	Case Disposi	tion	WILLIA	<i>MS</i> , K	. A. (1	3031)		
Status	Comp	amant	Signatur	~			□ Further Investigation □ Unfounded □ Lo							□ Refuse to Cooperate				
							Closed		xhaust	ed	$\Box$ Cleared $\Box$ Death of			ther Age Prosecu		clined	Page 1	