I N	Agenc	y Namo		NSTON-SALEN	, IN	INCIDENT/INVESTIGATION							OCA 2436209							
C I	ORI	NC	NC 034	40200			1	REPORT							Date / Time Reported SMIWTFS Month Day Yr Time					
D E	10		ncident(s		Att At Found SM								10 08 2024 19:13 Hrs.							
N T	#1			, Larceny- All									Month Day Yr Time							
D	#2 Crime Incident																		Offense T	
A T		Trimo I	ncident					_	Com				ı St, \	Winston-se	alem .		Victim Residence Type			
A	#3	Jiiiie i	ncident					☐ Att Premise Type ☐ Com							☐ Single Family ☐ Multi Family					
МО			d or Com											Forcible Yes	X N/A	Weapon / Tools				
																1 177				
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use: Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown Use:																			
V	I Religious ☐ L.E. Officer Line of Duty ☐ Other/Unknown ☐ Internal ☐ Unconscious ☐ Other Major ☐ No ☐ N/A															Λ				
C C	Victim/Business Name (Last, First, Middle) Victim of DOB / Age Crime # 2														Race	Sex	Relation To Offe		Resident Resid	
T I	V1 DATA OMITTED											1,		2)	B	$_{F}$			☐ Non-l	Resident
M																Home Phone Unknown				
	Employer Name/Address DATA OMIT															Business Phone				
	VYR Make Model Style Color									Lic/Lis						Business I none				
	VYK	M	аке	Model	St	yıe	Color		Li	C/L1S				Vin						
O T H E R S I N V O L V E D	DATA OMITTED																			
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	ied C=	: Co	ounterfeit / F	Forged	F = Found	d					
	Victim # DCI Status Value OJ QTY								Property Description						Mal	Make/Model Serial Number				
	1 23 7 1 TEL						TELEPHONE	ELEPHONE/TELEPHONE EQUIPMENT								OGLE/Pixel 7 DATA OMITTED				
P - R - O				+	_													INI	FOR FORMAT	ΓΙΟΝ
																			SECURI	
]	PURPOS	ES
P .																		ONT	X TITE	FIDOT
R T																	T		LY THE I	
Y					\dashv												- 1		TEMS A	
•																		DIS	SPLAYE	D ON
					\Box													P2	C REPO	RTS
-	Muss.1	or of V	ehicles S	tolen 0	N	nhar Val-	icles Recovere	d	0											
	Office	r		ID	#		Officer Sig		0 re				1	Supervisor	Signat	ure				
ID	ROL	DRIG	UEZ-BI		MULGR								REW, M. J. (14746)							
Status	Comp	iainant	Signatur	е			Case Status Further X Inact Closed	r Inve ive /Clea	ared				ded by Ai by Ai	Loca	Refus ther A	gency	Cooperate	_	dition De	