I N	Agenc	y INallio		VSTON-SALE								2436224					
C · I	ORI			( . <b>.</b>			REPORT							Date / Time Reported SMI MTFS Month Day Yr Time			
D			NC 034									10   08   2024   21:47 Hrs.					
E N	#1	Crime I	ncident(s				Att At Found Month Day Yr Time							Last H Mont	Known So h Day	ecure Yr	SM <u>T</u> WTFS Time
T.		Trimo I	naidant	Drug Viold	ition	s		X Con	10		08   2024	1 21	:47  Hrs	10	08	2024	<u>  21:46  Hrs.</u>
D	D #2																Offense Tract
A T	#3 Crime Incident     Image: Arrow of the product of th															m Resid	ence Type
А	#3							Con	ı						□ Sin	ngle Fan	nily <b>□</b> Multi Family
МО			d or Con MITTEI										Forcible □ Yes [ □ No	X N/A	Weapor	n / Tools	
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															Alcohol Use:	
	1		🛛 🖾 So	ciety 🔲 Governn			inancial Institu			_	Broken Bone		□ Severe	Lacerations Yes Unknown			
V I		Victim		ligious 🔲 L.E. Of Name (Last, First,			ity 🗌 Othe	er/Unknov	wn		Internal			Other ]			
Ċ		v icuiti/			witu	ule)					Victim of Crime #	DOB	/ Age	Race		ationshij Offende	
T I																	Non-Residen
M·	Home	Addre	ss					1,				Home P	hone	Unknown			
						D.	ATA OMI	ATA OMITTED									
	Emple	oyer Na	ume/Add	ress		D.	ATA OMITTED							Business Phone			
	VYR	M	ake	Model	S	tyle	Color	Li	ic/Lis				Vin				
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 = Bur	ned (	$C = C_{0}$	ounterfeit / F	orged	F = Found	d			
Codes	Victim	K OJ	column	if recovered for oth	er ju	risdiction)											
	#	DCI 77	Status EVID	Value	OJ	QTY 4 1	PARAPHERN	Property	Desc	riptior	1			Mak	e/Model		Serial Number
		// LVID 4 PAKAPHEKNALIA												D	FOR		
																I	NFORMATION
P- R																	SECURITY
0																	PURPOSES
Р <sup>-</sup> Е -																	
R																	NLY THE FIRST
T Y ·																TWE	LVE PROPERTY
																T	ITEMS ARE
-																	P2C REPORTS
-																	
-	Numb	er of V	ehicles S	Stolen 0	Nu	mber Vehi	cles Recovere	d 0					· · · ·				
ID	Office		2 1/ /1		D#		Officer Sig	nature					Supervisor	Signatu	re (1512)	))	
ID			3. N. (1 Signatur			Case Status	5		<del></del>	Case Dispos	ition <sup>.</sup>	ĊHUE,	<i>v</i> . /V.	(1313)	)		
Status	-omp						☐ Further ☐ Inact	□ Further Investigation □ Unfounded □ Lo						□ Refuse to Cooperate			
							Closed		chauste	ed	Death of				ution De	clined	Page 1