I N	Agenc	y Name		NSTON-SALEN	OLICE	IN	INCIDENT/INVESTIGATION							OCA 2436780						
I C	ORI	NC	NC 034	10200			1									nte / Time Reported S M T W T F S Ionth Day Yr Time				
D E			ncident(s		Att At Found SMTWTFS Month Day Yr Time								10 13 2024 00:02 Hrs. Last Known Secure SMTWTFS Month Day Yr Time							
N T	#1		`	Drug Viola	tions	S		ı —	Com	Month 10	Da			lime 0:02 Hrs				Tir 4 00.	ne	
D .	#2	Crime I	ncident							Location	of l	Incident						Offer	nse Tract	
A T		Trime I	Viol	ation Of Auto L	aw-	all Othe	r	_	☐ Att Premise Type						on-sa	-salem NC 221 Victim Residence Type				
A	#3	Jime I	nerdent						Com	Tiennse	тур					- 1			ypc Multi Family	
МО			d or Con MITTEI					•					Forcible Yes No	X N/A	We	apon / Too	ls			
		ictims	<u> </u>			D	Injury	v	□ None	Loss of Teeth Drug/Alcohol Use:										
		icums	X So	☐ Person ciety ☐ Governm	ent		inancial Instit					☐ None oken Bone	s DM	inor ∟	-				Unknown	
V	$\frac{I}{I}$			igious L.E. Off			ity 🔲 Othe	er/Un	know	n 🗆		ernal 🔲		scious [Other	Majo]N/A	
C		Victim/		Name (Last, First,	Victim of Crime # DOB / Ag					3 / Age	Race	Sex	Relations To Offend		sident Status Resident					
T I	V1		DA	ΓA OMITTED	1,2										Non-Residen Unknown					
М -	Home Address DATA OMI															Home Phone				
	Employer Name/Address DATA OM															Business Phone				
	VYR	M	ake	Model							Vin									
						yle														
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 = 1 er jur	Damaged isdiction)	Z = Seized	B =	Burn	ed $C = 0$	Cou	nterfeit / F	orged	F = Foun	d					
	Victim # DCI Status Value OJ QTY						Property Description								Mak	ake/Model Serial Number				
- - P - R															OMITTED					
																			FOR MATION	
					\dashv														URITY	
0																		PUR	POSES	
Р ⁻ Е -																				
R T					\dashv														PROPERTY	
Y ·					-												1 W		MS ARE	
-					\dashv														AYED ON	
-					\neg														EPORTS	
_																				
	Numb		ehicles S	tolen 0		nber Vehic	cles Recovere		0				- 1	Supervise	Signat	ıre				
ID			A. (15		Officer Sig	Officer Signature Supervise HATO								or Signature CH, M. B. (14878)						
	Complainant Signature Case Stat									Case Disposition:							Tytrodia:	on Dealined		
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	ive /Clea	ıred		j 1		by Ai	Loc rest rest by And	Refuse other Ag	gency	ooperate		on Declined Page 1	