| I N | Agenc | y Name | | NSTON-SALEN | , IN | INCIDENT/INVESTIGATION | | | | | | | OCA 2437164 | | | | | | |
|-----------------------|--------------------------------|-----------------|--------------------|--------------------------------------|---------------|------------------------|--|-------------------------------------|------------|----------------|---------------|----------------|-------------|--|-----------------------|------------------|-------------------------------|------------------------------|--|
| C · | ORI | NG | | | 02102 | | REPORT | | | | | | | Date / Time Reported SMIWTFS Month Day Yr Time | | | | | |
| D E | 10 | | NC 034 | | | | ☐ Att At Found SMIWIFS Month Day Yr Time | | | | | | | 10 15 2024 22:41 Hrs. Last Known Secure S M = W T F S Month Day Yr Time Time Month Day Yr Time Ti | | | | | |
| N T | #1 | Jimic I | nerdent(s |) Drug Viola | tion | S | | ı — | Com | Month 10 | D | | | ime 2:41 Hrs | | | Day Yr 15 15 2024 | Time | |
| D . | #2 | Crime I | ncident | Drug riota | | | | | _ | Location | | | + 22 | 41 *** | 3 ₁ 10 | | | Offense Tract | |
| A | | ~ · · | | | | | | _ | Com | | | | t, Wir | iston-sale | em NC | | | 212 | |
| T A | #3 | rime i | ncident | | | | | | Att Com | Premise 7 | тур | pe | | | | - 1 | Victim Resider Single Fami | nce Type ly ∏Multi Family | |
| МО | | | d or Com | | | | | | | | Forcible Yes | Weapon / Tools | | | | | | | |
| | # of V | ictims | Туре | ☐ Person | П | Business | | | | Injury | y | ☐ None | | _ |]Loss o | f Tee | th Drug/A | lcohol Use: | |
| | X Society | | | | | | | | | | | | | | | _ | | | |
| V I | | Victim/ | | Name (Last, First, | | | uty 🗌 Othe | 21/ ()11 | ikilow | ^{/11} | $\overline{}$ | Victim of | | S / Age | Race | <u> </u> | | □N/A Resident Status | |
| C T | V1 | | | ΓΑ OMITTED | | | | | | | | Crime # | | . 8 | | | To Offender | ☐ Resident ☐ Non-Resident | |
| I M | | | | IA OMITIED | | 1, | | | | | | | | | Unknown | | | | |
| 141 | Home Address DATA OMI | | | | | | | | | ГТЕD | | | | | | Home Phone | | | |
| | Employer Name/Address DATA OMI | | | | | | | | | | | | | | Business Phone | | | | |
| • | VYR | M | Model | Color Lic/Lis Vin | | | | | | | Vin | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| О | | | | | | | | | | | | | | | | | | | |
| T H | | | | | | | | | | | | | | | | | | | |
| E | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| | DATA OMITTED | | | | | | | | | | | | | | | | | | |
| I N | DATA OMITTED | | | | | | | | | | | | | | | | | | |
| V | 1 | | | | | | | | | | | | | | | | | | |
| O L | | | | | | | | | | | | | | | | | | | |
| V E | | | | | | | | | | | | | | | | | | | |
| D | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| 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 | C = 0 | Cou | ınterfeit / F | Forged | F = Foun | ıd | | | | |
| | Victim # | DCI | Status | Value | | Property Description | | | | | | | Mak | Make/Model Serial Number | | | | | |
| | | | | | | | TOBACCO PI | TOBACCO PRODUCTS | | | | | | | ECIGA. | RETT | E DA | TA OMITTED | |
| P - | | | | | | | | | | | | | | | | | IN | FOR FORMATION | |
| | | | | | | | | | | | | | | | | | | SECURITY | |
| R O | | | | | | | | | | | | | | | | | | PURPOSES | |
| Р ⁻ Е - | | | | | | | | | | | | | | | | | | | |
| R | | | | | | | | | | | | | | | | | | LY THE FIRST | |
| Т Ү - | | | | | - | | | | | | | | | | | | | VE PROPERTY ITEMS ARE | |
| - | | | | | \dashv | | | | | | | | | | | | | SPLAYED ON | |
| | | | | | | | | | | | | | | | | | P | 2C REPORTS | |
| - | NT . | | .1.: 1 ~ | 4-1 | N, | 1 37 1 | :-1 P | | | | _ | | | | | | | | |
| | Office | r | ehicles S | ID | | iiber veh | icles Recovere Officer Sig | | o re | | | | 1 | Supervisor | Signat | ıre | | | |
| ID | PET | TET, | C. N. (| 16077) | | <i>MULGRĔW</i> | | | | | | | | | J. (14746) | | | | |
| | Comp | ıaınant | Signatur | e | | | r Inve | Investigation Unfounded Located Ext | | | | | | | □ Extr | adition Declined | | | |
| Status | | | | | | | ☐ Inact | ctive Cleared by Arrest | | | | | | rest _ | ☐ Refuse to Cooperate | | | | |
| | | | | | | | Closed | | | hausted | | | | nder 🗆 | | | | Page 1 | |