I N	Agenc	y Nam		NSTON-SALEN	. IN	INCIDENT/INVESTIGATION								OCA 2438045							
C I	ORI	NG					-	REPORT								Date / Time Reported SMIWTFS Month Day Yr Time					
D E			NC 034		Att At Found SMIWIFS Month Day Yr Time									10 22 2024 19:39 Hrs.							
N	#1	Jiiiic i	nerdent(s	, Larceny- All	Othe	or		ı —	Com	Month 10	Ι					onth Day Yr Time					
T	#2 Crime Incident Larceny- All Other Lacation of Incident Location of Incident Lo														10		22 20		19:38 Offense Ti		
D A								_	Com				ge Li	n - B, Win	ston-s				222		
T A	#3	Crime I	ncident			Att Com	Premise	Тур	pe					Victim Re		ce Type ⁄ ∐Multi	i Family				
	How A	Attacke	d or Con	nmitted					Force					Forcible	ble Weapon / Tools				,ividiti	Tulling	
МО	DATA OMITTED See No.															1					
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use																				
V	1			ciety Governm ligious L.E. Off			inancial Instit		know		_	roken Bone iternal 🔲		Severe	Lacera Other			∃ Yes No No	Unk		
I		Victim/		Name (Last, First,			uty 🔲 Out		IKHOW	<u> </u>		Victim of		B / Age	Race		Relation	ship	□N/A Resident	Status	
C T	V1		DA	ΓΑ OMITTED	Crime #					44			To Offer	nder	☐ Resid ☐ Non-I						
I M						1,			W	F	1NE		Unkn								
111	Home	Addre	ess		ATA OMI	TTED								Home Phone							
	Employer Name/Address DATA OM															Business Phone					
	VYR	Color Lic/Lis Vin						Vin													
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 = I er juri	Damaged sdiction)	Z = Seized	B =	Burn	ied C=	Cot	unterfeit / F	Forged	F = Foun	d						
	Victim # DCI Status Value OJ QTY								Property Description							Make/Model Serial Number				er	
	1 45 7 3 RUBBING A															DATA OMITTED					
P -	1	16	7		_	1 .	HOUSEHOLL	SEHOLD GOODS							HOTSH	SHOT FOR INFORMATION					
					\dashv									-					SECURIT		
R O																			PURPOS		
P :																					
R																			LY THE		
T Y :					_												T		E PROP		
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			ehicles S	-		nber Vehi	cles Recovere		0					g :	a.						
ID	Office:	r <u>NES,</u>	C. R. (16062)	Officer Sig								or Signature EN, W. A. (15431)								
	Complainant Signature Case State									Case Disposition:								Б.	1141 P		
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	tive /Clea	ared				by A	Locarrest □ rrest by Ancender □	Refuse other Ag	gency	ooperate		dition De		