| I N | Agenc | y Name | | NSTON-SALE | M F | POLICE | REPORT | | | | | | | OCA 2438461 | | | | |
|----------------------------------------------------------|---------------------------------------------------------|---------|--------------------|----------------------|--------|-----------|---------------|------------------------------------------|--------|--------|----------------|--------|------------|--------------------------------------------------------------------|--------------------------------------------------------|-----------|----------------------------------|--|
| C I | ORI | NG | | (02.0.0 | | | | | | | | | | Date / Time Reported S M T W T F S Month Day Yr Time | | | | |
| D | | | NC 034 | | | | | | | | | | | 10 | 26 | 5 202 | 24 <i>00:13</i> Hrs. | |
| E N | #1 | rime I | ncident(s | · | | | | Att | Mon | th | Day Yr | : ' ' | lime | | Known S h Day | | SMTWTF ₋ S Time | |
| Т | $ \begin{array}{c c c c c c c c c c c c c c c c c c c $ | | | | | | | | | | | | | | 26 | 2024 | 00:12 Hrs. Offense Tract | |
| D | #2 | June 1 | neruent | | | | | ☐ Att ☐ Com | | | leitman D | r. Wii | nston-sale | em NC | 27107 | 7 | 212 | |
| A T | #3 | Crime I | ncident | | | | | ☐ Att | | nise T | | , ,, | iston sur | | | | lence Type | |
| А | #3 | | | | | | | Com | | | | | | | | ingle Far | nily <mark>∏</mark> Multi Family | |
| МО | | | d or Con MITTEI | | | | | | | | | | Forcible | X N/A | Weapo | n / Tools | 3 | |
| V I | # of V | ictims | | Person | | Business | | | Iı | njury | □ None | _ | linor □ | Loss of | Teeth | - | Alcohol Use: | |
| | | | | | | | | | | | | | | | Chacerations ☐ Yes ☐ Unknown Other Major ⊠ No ☐ N/A | | | |
| | , | Victim/ | | Name (Last, First | | | | | VII | | Victim of | | B / Age | Race | | lationshi | | |
| C T | V1 Crime # | | | | | | | | | | | | | | | Offende | r 🗖 Resident | |
| I | | | DA | TA OMITTED | | | | | | | 1, | | | | | | □ Non-Residen | |
| M | Home Address | | | | | | | | | | | | | | Home I | Phone | | |
| | | | | | | D | ATA OMI | ГТЕD | TED | | | | | | | | | |
| | Emplo | oyer Na | ume/Add | ress | | D | ATA OMITTED | | | | | | | Business Phone | | | | |
| | VYR | M | ake | Model | tyle | Color | Li | c/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 = Co | ounterfeit / I | Forged | F = Foun | d | | | | |
| Codes | Victim | | column | if recovered for oth | ier ju | | | | | | | | | | | | | |
| | # DCI Status Value OJ | | | | | QTY | | Property Description | | | | Mak | e/Model | | Serial Number | | | |
| | | | | | | | | | | | | | | | | L | FOR | |
| | | | | | | | | | | | | | | | | | INFORMATION | |
| P. R | | | | | | | | | | | | | | | | | SECURITY | |
| 0 | | | | | | | | | | | | | | | | | PURPOSES | |
| Р. Г | | | | | | | | | | | | | | | | | | |
| E · R | | | | | | | | | | | | | | | | C | ONLY THE FIRST | |
| T. | | | | | | | | | | | | | | | | TWE | ELVE PROPERTY | |
| Y · | | | | | | | | | | | | | | | | | ITEMS ARE | |
| | | | | | | | | | | | | | | | | | DISPLAYED ON | |
| | | | | | | | | | | | | | | | | | P2C REPORTS | |
| - | | | | | | | | | | | | | | | | | | |
| | | | ehicles S | - | | mber Vehi | cles Recovere | - | | | | | <u>a</u> : | <u> </u> | | | | |
| ID | Officer PET | | C. N. (| | D# | | Officer Sig | Officer Signature Supervise MULC | | | | | | | or Signature GREW, M. J. (14746) | | | |
| | | | Signatur | | | | | Case Status Case Disposition: | | | | | | | | | | |
| Status | - | | | | | | _X Inact | □ Further Investigation □ Unfounded □ Lo | | | | | | Cated Extradition Declined Refuse to Cooperate nother Agency | | | | |
| | | | | | | | Closed | /Leads Ex | hauste | d | Death o | | | ף Prosec ך | | eclined | Page 1 | |