I N	Agenc	· WIN	IN	INCIDENT/INVESTIGATION							OCA 2438560								
I C	ORI	NC	NC 034	10200			1	REPORT								Date / Time Reported SMTWTFS Month Day Yr Time			
D E			ncident(s				│ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │								10   26   2024   19:43 Hrs.  Last Known Secure SMTWTFS  Month Day Yr Time				
N T	#1			, Disorderly Co	ondi	uct		ı —	Com	Month 10	. 1			Time 1:43   Hrs			Day Yr -	Time $19:42$ Hrs.	
D.	#2	Crime I	ncident					_	Att		_	f Incident	+   12	7.43	7 10			Offense Tract	
A	Com 1000 Waughtown St, Win														alem .			211	
T A	#3	Jime i	ncident						Att Com	Premise	ery	pe				- 1	Victim Reside	nce Type ly ∏Multi Family	
МО			d or Com MITTED			•					Forcible  Yes  No	X N/A	We	apon / Tools					
	# of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:															lcohol Use:			
	1			ciety  Government igious  L.E. Off	ent	$\Box$ F	inancial Instit		.1		_	roken Bone		□ Severe			. –	s Unknown	
V I		Victim/		Name (Last, First,			шіу 🔲 Опіс	21/ U1	IKHOW	<sup>/11</sup>   [	] Ir 	victim of		S / Age	Other Race	<u> </u>		□N/A Resident Status	
C T	V1			ΓA OMITTED				Crime #					To Offender	☐ Resident					
I M			DA.	IA OMITIED					1,						☐ Non-Resident☐ Unknown				
IVI ·	Home Address DATA OMI								TTED							Home Phone			
•	Employer Name/Address DATA OM								 ITTED							Business Phone			
	VYR	M	Color Lic/Lis Vin							Vin									
									1										
О																			
T H																			
E	E																		
R S																			
	DATA OMITTED																		
I N																			
V																			
O L																			
V E																			
D																			
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column i	R = Recovered for other	D = i r jur	Damaged isdiction)	Z = Seized	B =	Burn	ned C=	Co	ounterfeit / F	Forged	F = Foun	ıd				
	Victim # DCI Status Value OJ QTY						Property Description								Mal	ce/Mc	odel Se	rial Number	
- - P -		Tray and I a											DA	TA OMITTED					
																	TN:	FOR	
					-													FORMATION SECURITY	
R O					_													PURPOSES	
Р <sup>-</sup> Е -																			
R																		LY THE FIRST	
Т Ү -																		VE PROPERTY	
٠.					-													ITEMS ARE ISPLAYED ON	
-					$\dashv$													2C REPORTS	
_																			
			ehicles S			nber Vehi	cles Recovere		0				-	C '	. C: -				
ID	Office:	DER,	M. D. (	ID (15720)	Officer Sig	Officer Signature Supervisor Signature MULGREW, M. J. (14746)													
	Complainant Signature Case Sta									tion		Case Dispos			ated		- Evt	adition Declined	
Status				Inact	tive Cleared by Arrest Refuse to Cooperate						Cooperate	auruon Decimed							
							☐ Closed/Cleared ☐ Cleared by Arrest by Another Agency ☐ Closed/Leads Exhausted ☐ Death of Offender ☐ Prosecution Declined							Page 1					