I N	Agenc	y Name		NSTON-SALEN	— И Р	OLICE	IN	NCIDENT/INVESTIGATION						OCA 2438822						
I C																e/Time Reported S型TWTFSnth Day Yr Time				
D E			ncident(s		Att At Found SMTWTFS Month Day Yr Time							10 28 2024 18:18 Hrs. Last Known Secure SMT W T F S Month Day Yr Time								
N T	N #1 . Month													ime 3:18 Hrs					Time 18:18	Hrs.
D	Com 500 N Martin Luthan Vina In Dr														v DI	Offense Tract 221				
A T	#3 Crime Incident															Victim Residence Type				
A								□ Com						☐ Single Family ☐ Multi Family						
МО			d or Com MITTEI								Forcible Yes No									
	# of V	ictims	l	Person		Business				Injury	•	None			Loss o				ohol Use	
V	I I Society □ Government □ Financial Institute □ Broken Bones □ Severe Lacerations □ Ves □ Unknown □ Internal □ Unconscious □ Other Major □ N/A																			
I C	Victim/Business Name (Last, First, Middle) Victim of DOB / Age														Race	<u> </u>	Relations	nip I	Resident	Status
T	V1 DATA OMITTED																To Offeno		□ Reside	
I M ·	Home Address															Home Phone				
					D)						Home Filone								
	Employer Name/Address DATA OMITTED															Business Phone				
•	VYR Make Model Style						Color		Lic	c/Lis				Vin						
T H E R S I N V O L V E D	DATA OMITTED																			
Status Codes																				
	Victim # DCI Status Value OJ QTY						Property Description								Mak	Make/Model Serial Number				er
		Transfer of the contract of th												DAT.	A OMIT	TED				
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	Numb Office		ehicles S	tolen 0		mber Vehi	cles Recovere Officer Sig		e e				Ī	Supervisor	Signati	ure				
ID	LAN	'CAST		W. (16169)								(0)	S-14th	•						
Status	Comp	lainant	Signatur	e			Inact	: Investigation ☐ Unfounded ☐ Cleared by Arrest					rest							
							Closed/Cleared Cleared by Arrest by A Closed/Leads Exhausted Death of Offender							another Agency						