I N	Agenc	y Name	e WIM	. IN	INCIDENT/INVESTIGATION							OCA 2439015								
C I	ORI	NG				32102	REPORT							Date / Time Reported SMTWTFS Month Day Yr Time						
D E			40200									10 30 2024 07:15 Hrs.								
N	#1 Crime Incident(s) Found Property									Att At Found S M T H T F S Month Day Yr Time N T T S M T H T F S M T H T							Month Day Yr Time			
T	#2	Crime I	ncident	Touna Trop	ену	<u>'</u>			_	10 Locatio		10 202	4 07	7:15 HFS	s 10		30 2024	Offense Tract		
D A	Com 34 Miller St, Winston														C 2710			321		
T A	#3	Crime I	ncident					☐ Att Premise Type ☐ Com								Victim Residence Type ☐ Single Family ☐ Multi Family				
МО			d or Com		Forcible □ Yes □ No						Weapon / Tools									
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															Alcohol Use:				
	0 Society Government Financial Institute Broken Bones Severe Lacerations Yes Unkno Internal Unconscious Other Major No N/A															_				
V I		Victim/		Name (Last, First,			uty Otne	er/Un	Know	n [ternal Victim of		S / Age	Other Race	<u> </u>				
C T	Crime #													<i>y y y y y y y y y y</i>			To Offende	r Resident		
I			DA	ΓA OMITTED														☐ Non-Resident		
M	Home Address DATA OMI									TTED						Home Phone				
	Employer Name/Address DATA OM															Business Phone				
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О																				
T																				
H E																				
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5	DATA OMITTED																			
I	DATA OMITTED																			
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V																				
E D																				
Status	L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found																			
Codes	(Chec		column	if recovered for other	r juri	sdiction)														
	# DCI Status Value OJ QTY 13 FOUN 1						Property Description (9MM) FIREARMS/AMMUNITION								Mal TAURU	e/Mo		Serial Number ATA OMITTED		
- P - R _		13 FOUN 1 (9M							www.jrikearwis/awwwUniiiUn							S/G2	С L	FOR		
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O P .					_													PURPOSES		
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R T Y					+													LVE PROPERTY		
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-					\dashv													P2C REPORTS		
-	Numb	er of V	ehicles S	tolen 0	Nun	nber Vehi	cles Recovere	d	0											
ID	Office	r		ID			er Signature Supervisor Signature													
ID	HASLER, A. E. (16368) Complainant Signature Case St															JĞHAN, A. M. (14884)				
C4. 4	P		<i>5</i>			☐ Further	☐ Further Investigation ☐ Unfounded ☐ Located ☐ Extrac								tradition Declined					
Status							Closed	☐ Inactive ☐ Cleared by Arrest ☐ Cleared by A						rest by And						