I N	Agenc	y Name		NSTON-SALE	M P	OLICE	IN	INCIDENT/INVESTIGATION							OCA 2439622					
C I	ORI	NC	NC 02	40200			1			REP)K I		Ī	Date / Mon	Time th	Reported	[≦ (r	M T I	WTFS	
D E	17		NC 034				☐ Att At Found					메티이	11 03 2024 14							
N	#1	Jillie I	ncident(s				,m		Day Yr	Т	ime			n Secure Day Yr		Time				
T		Trime I	ncident	Vandalis			\square Com $11 \mid 03 \mid 2024 \mid 14:16 \mid \square$ Att Location of Incident						11 01 2024 17:00 Hrs Offense Tract							
D A	#2	erime r	incraciii	Discharging l	Fire	arm		☐ Att Decision of medicin												
T	#3 Crime Incident														Victim Residence Type					
A	□ Com															Single F	amily	′ □Mu	ılti Family	
МО			d or Con										Forcible Yes	N/A	Weapon / Tools					
1110	DATA OMITTED See No.															1				
17	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																			
	2 Society Government Financial Institute Broken Bones Severe Lacerations Meligious L.E. Officer Line of Duty Other/Unknown Internal Unconscious Other Major No NA																			
V I		Victim/		Name (Last, First,			uty U Otne	er/Unkn	own		Victim of		S / Age			jor No N/A x Relationship Resident Status				
C	V1	v iceiiii			11110	aic)					Crime #	DOL	31	Race	To Offender 🛛 Reside			sident		
T I	* 1		DA'	TA OMITTED							1,			$\mid_{B}\mid$	-			_	n-Residen	
M	Home	e Addre	ss								<u> </u>				Home Phone Unknown					
						D	ATA OMI	ГТЕО												
	Empl	oyer Na	me/Add	ress	D	ATA OMITTED							Business Phone							
	VYR	M	ake	Model	Color Lic/Lis Vin						Vin									
H E R S I N V O L V E D	DATA OMITTED																			
Status																				
Codes	Victim		column		er ju	QTY														
	# DCI Status Value OJ 1 29 4						DOUDIE DAN			escription	1			Mak	e/Mo			al Nur		
P . R	1	29	4		DOUBLE PANE GLASS WINDOW								DATA OMITTED FOR							
																	INF		ATION	
																		ECUR		
0																	F	PURPC	OSES	
P :																				
R																	ONL	Y THI	E FIRST	
T Y																TW	ELV	E PRC	OPERTY	
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-	Numb	er of V	ehicles S	Stolen 0	Nin	mber Vebi	cles Recovere	d 0												
	Office		emeles S	Stolen <i>U</i>		moer veni	Officer Sig					Т	Supervisor	Signati	ıre					
ID	GR/	<i>Y, C</i> .	R. (16-	400)	- ''		Ů	Officer Signature Supervisor MULI							LINS, B. H. (15079)					
	Comp	lainant	Signatur	re			Case Status							ocated Extradition Declined						
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	ive /Cleare	d		☐ Cleared	by Ar	☐ Loca rest ☐ rest by Ano nder ☐	Refuse ther Ag	gency	ooperate	zxtra	Pag		

DCI-600F