I N C	Agenc	y Name		NSTON-SALE	M P	OLICE	IN	INCIDENT/INVESTIGATION REPORT							OCA 2439701					
I	ORI	NC	NC 034	40200						1 \ L1 \						Reported Day	S =	M T W Time 10:22	T F S	
D E			ncident(s				I 🗆 A	tt I	At Found	-S 1	M T W	T F S	11 Last					TFS		
N	#1								Com	Month	Day Yı	: I	'ıme			n Secure Pay Yr	T	Time		
T	#2	Crime I	ncident	Snopiljii			$\begin{array}{ c c c c c c c c c c c c c c c c c c c$						11 03 2024 03:45 Hrs. Offense Tract							
D A	#4								- 1	1450 L	umber Ln	, Win	ston-sale	m NC	2712	<i>?7</i>		314		
T	#3	#3 Crime Incident													Victim Residence Type					
A									Com						☐ Single Family ☐ Multi Family					
MO			d or Con MITTEI					Forcible Yes						Weapon / Tools ▼ N/A						
	# of Victims Type Person Type Person															<u>. </u>				
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use: Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown																			
V	T ☐ Religious ☐ L.E. Officer Line of Duty ☐ Other/Unknown ☐ Internal ☐ Unconscious ☐ Other Major ☐ No ☐ N/A																			
I C																e Sex Relationship Resident Status To Offender Resident				
T	V1		DA'	TA OMITTED							Crime #					To Offeno			lent Resident	
I M			DI	TH OMITTED							1,				Unkno					
IVI ·	Hom	e Addre	ess			D	ATA OMI	ГТЕГ)		•	•		•	Home Phone					
	Empl	oyer Na	me/Add	ress	D	ATA OMITTED								Business Phone						
,	VYR Make Model Style						Color Lic/Lis Vin						Vin							
T H E R S I N V O L V E D	DATA OMITTED L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found																			
Status Codes	Chec	ost S k "OJ"	= Stolen column	if recovered for oth	D = er jui	Damaged risdiction)	Z = Seized	$\mathbf{B} = \mathbf{I}$	Burne	ed C=C	ounterfeit / l	rorged	F = Foun	ıd						
	Victin	DCI	Value	Property Description							Mak	Make/Model Serial Number								
P - R .	1	"						LEAF BLOWER KIT							TSMAN/Cm DATA OMITTED				TED	
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Р ⁻ Е -																				
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			ehicles S			mber Vehi	cles Recovere)				g :	G.						
ID	Office BIE		V. A. R	. (15598)) #		Officer Sig	nature					Supervisor LANG.	Signati DON	ture S. L. (15223)					
עוו			Signatur				Case Status	Case Status Case Disposition:							DOIY, D. L. (13443)					
Status	Р		,a				☐ Further ☐ Inact ☐ Closed ☐ Closed	r Investive /Clear	ed		☐ Unfour☐ Cleared☐ Cleared	nded d by Ai d by Ai	Test Locarest Locares] Refuse other Ag	gency	ooperate	Extrad	lition De		

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