							~					,					
I N	Agenc	y Name		VSTON-SALE	M P	OLICE	INCIDENT/INVESTIGATION					N	OCA 2439790				
C	ORI		,, 11			02102	REPORT						Date / Time Reported S # T W T F S Month Day Yr Time				
I D		NC	NC 034	40200									11   04   2024  18:40 Hrs.				
E N		Crime I	ncident(s	)			Att At Found SM TW TFS Month Day Yr Time						Last Known Secure SM TWTFS Month Day Yr Time				
T	#1			Lost Prop	perty			X Com	11	04   202		5:30  Hrs				15:00 Hrs.	
D	the second seco															Offense Tract	
A T	Crime Insident													Victim R	esider	322	
A	#3	June 1	licident										☐ Single Family ☐ Multi Family				
	How A	Attacke	d or Con	nmitted								Forcible		Weapon / T		<u>,                                     </u>	
MO	D.	ATA O	MITTEI	)								□ Yes [ □ No	X N/A				
	# of V	ictims	Туре	□ Person		Business			Injury	y ⊓ None			Loss of	Teeth Di	ug/Al	cohol Use:	
	0 Society Government Financial Institute Broken Bones Severe														⊐ Ye	s 🗖 Unknown	
V I	Religious L.E. Officer Line of Duty Other/Unknown Internal Officer Line of Duty																
С		victim/	Business	Name (Last, First,	, Mila	die)				Victim of Crime #		3 / Age	Race S	Sex Relation To Offe		Resident Status	
T I	V1		DA	TA OMITTED												□ Non-Residen	
M	Home	Addre												Home Phone		Unknown	
	TIOIIR	/ fuure				D	ATA OMI	ATA OMITTED									
·	Emplo	oyer Na	ume/Add	ress		D	ATA OMITTED						Business Phone				
	VYR	M	ake	Model	St	tyle	Color	Li	c/Lis			Vin					
E R S V O L V E D		DATA OMITTED															
Status				R = Recovered			Z = Seized	B = Burr	ned $C = 0$	Counterfeit /	Forged	F = Foun	d				
Codes	(Chec Victim		column	if recovered for oth	ier jui	risdiction)											
- -	#	DCI 13	Status LOST	Value	OJ	QTY	380) SIG SAL	1 /	Description	on			Make, SIG/380	Model		rial Number TA OMITTED	
		15	LOSI			1 (	560) SIG SAL	/K					516/580		DA	FOR	
															IN	FORMATION	
P· R																SECURITY	
0																PURPOSES	
Р' Е.																	
R																LY THE FIRST	
T Y·														Т		VE PROPERTY	
																ITEMS ARE	
-																2C REPORTS	
-															-		
-	Numb	er of V	ehicles S	tolen 0	Nu	mber Vehic	cles Recovered	d 0				I					
ID	Office WE		. S. (15		D#		Officer Sig	Officer Signature Supervisor Signature FLYNN, J. L. (15605)									
ID			Signatur				Case Status	Case Status Case Disposition:									
~	·P		0				☐ Further	□ Further Investigation □ Unfounded □ Lo						cated Extradition Declined			
Status							Closed	□ Inactive □ Cleared by Arrest □ □ Closed/Cleared □ Cleared by Arrest by Ar									
							Closed	/Leads Ex	hausted	Death				tion Decline	d	Page 1	