I N	Agenc	y Name		STON-SALEN	CID	CIDENT/INVESTIGATION						OCA 2439857							
C	ORI	NC	NC 034	10200	1	REPORT						Date / Time Reported SMIWTFS Month Day Yr Time							
D E			ncident(s		X Att At Found SMIWIFS Month Day Yr Time						$\begin{array}{c ccccccccccccccccccccccccccccccccccc$								
N T	#1		Obtain	ning Money By	Fals	e Preter	ise		Com	Month 11	Day			ime :38 Hrs			Day Yr 🖰	Time 11:37 Hrs.	
D	#2	Crime I	ncident						- 1	Location	of Incid	dent		•	•			Offense Tract	
A T	πэ (Crime I	ncident						Com Att	Premise T		ın Lut	ner r	King Jr D	r, win		Victim Reside	ence Type	
A	#3								Com		••					_		ily □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:																		
V	I Society ☐ Government ☐ Financial Institute ☐ Broken Bones ☐ Severe Lacerations ☐ Yes ☐ Unknown ☐ Internal ☐ Unconscious ☐ Other Major ☐ No ☐ N/A															_			
I C															Race		Relationship	Resident Status	
T	V1		DA	ΓA OMITTED								ne#					To Offender		
I M	Ноте	e e				1,					Hon	ne Phone	Unknown						
	Home Address DATA OMIT									(TED						Home I none			
	Employer Name/Address DATA OMI									ГТЕО					Business Phone				
,	VYR	M	ake	Model	Sty	/le	Color		Lic	/Lis				Vin	1				
T H E R S I N O L V E D	DATA OMITTED																		
Status Codes	L = L	ost S k "OJ"	= Stolen column i	R = Recovered f recovered for other	D = I r iuri	Damaged sdiction)	Z = Seized	B =	Burn	ed $C = C$	Counter	feit / Fo	orged	F = Foun	d				
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo	odel S	erial Number	
- - P - R																		ATA OMITTED	
					\dashv												17	FOR NFORMATION	
					\dashv													SECURITY	
O P -																		PURPOSES	
E ·					_												01	NLY THE FIRST	
R T					\dashv									-				LVE PROPERTY	
Y ·					_									+			1 1121	ITEMS ARE	
																	D	ISPLAYED ON	
]	P2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Nur	her Vehic	cles Recovere	d	0										
	Office	r		ID		7 01110	Officer Sig		-					Supervisor			(1.47(2))		
ID	ROBERTSON, B. W. (16352) Complainant Signature Case Statu									COLLIN						NŠ, A. B. (14763)			
Status	Comp	iamalli	Signatul(☐ Further ☐ Inact ☐ Closed ☐ Closed	r Inve ive /Clea	red			Infound Cleared Cleared	led by Ar by Ar	Loc rest rest by And	Refuse ther Ag	ency	ooperate	Page 1	