I N	Agenc	y Name		STON-SALE	M P	POLICE	INCIDENT/INVESTIGATION							OCA 2440228			
C · I	ORI				REPORT							Date / Time Reported SM TW FS Month Day Yr Time					
D			NC 034									11	07	7 202	24 20:06 Hrs.		
E N	#1	Crime I	ncident(s	·			□ Att At Found SMTWIFS Month Day Yr Time							Last H Mont	Known S h Day	Secure Yr	SMTW <u></u> FS Time
T .		7		Aggravated A	Assa	ult		X Con	11			! 20	0:06 Hrs	11	07	2024	<u>20:05</u> Hrs.
D	Com 1020 Engaging Dr. I. Win														m NC		Offense Tract 314
A T	<u>шр (</u>	Crime I	ncident							nise T		<i>DI</i> -	<i>J</i> , <i>wmsto</i>	n-suie		tim Resid	ence Type
А	#3													□ Single Family □ Multi Family			
МО			d or Con MITTEI						-				Forcible	X N/A	Weapo	on / Tools	
																Alashal Usar	
	# of Victims Type Type Business Injury None Minor Loss of Teeth Drug/Alcohol Use: I Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow																
v	1			igious 🔲 L.E. Of					wn		Internal		Iscious	Other 1			
I C	Victim/Business Name (Last, First, Middle) Victim of DOB / Age														Sex Re	lationshi	
Т													51			Offende	r ⊠ Resident □ Non-Residen
I M·											1,					IAQ	Unknown
	Home	e Addre	SS			D	ATA OMIT	TA OMITTED						Home Phone			
	Emplo	oyer Na	ume/Add	ress	D.	ATA OMITTED							Business Phone				
	VYR	M	ake	Model	S	tyle	Color	L	ic/Lis				Vin				
O T H																	
E R																	
S																	
Ι	DATA OMITTED																
Ν																	
V O	L																
L																	
V E																	
D																	
Status	L = L	ost S	= Stolen	R = Recovered	D_=	Damaged	Z = Seized	B = Bur	ned	C = C	ounterfeit / Fe	orged	F = Found	i			
Codes	Victim	K OJ	column	if recovered for oth	er ju	risdiction)											
	#	# DCI Status Value OJ QTY						Property Description							e/Model		Serial Number
-														D	FOR		
																I	NFORMATION
P- R																	SECURITY
0																	PURPOSES
Р ⁻ Е -																	
R T																	NLY THE FIRST
Y ·																1 WL	ITEMS ARE
-																I	DISPLAYED ON
-																	P2C REPORTS
-						ĻT											
	Numb Office		ehicles S		Nu D#	mber Vehio	cles Recovere						Supervisor	Signature	re		
ID			B. T. (.		J#			Officer Signature Supervisor Signature <i>MCCARTHY</i> , D. J. (15427))
	Comp	lainant	Signatur	e				Case Status Case Disposition:						Extendition Dealined			
Status						Inact	□ Further Investigation □ Unfounded □ Lo □ Inactive □ Cleared by Arrest □						Refuse to Cooperate				
							Closed		xhaust	ed	Cleared		rest by Ano	ther Ag Prosec		eclined	Page 1