| I<br>N   | Agenc   | y Name  |                       | VSTON-SALEN                        | OLICE  | ] IN              | INCIDENT/INVESTIGATION    |               |          |          |      |                                |   | OCA 2440646                |   |                         |                          |          |                    |  |
|--|---|---------|-----------------------|------------------------------------|--|-------------------|---------------------------|---------------|----------|----------|------|--------------------------------|---|----------------------------|---|-------------------------|--------------------------|----------|--------------------|--|
| I<br>C   | ORI   | NC      | NC 034                | 10200                              |  |                   | -                         | REPORT        |          |          |      |                                |   |                            | Date / Time Reported SMTWTFS<br>Month Day Yr Time |                         |                          |          |                    |  |
| D<br>E   |   |         | ncident(s             |                                    | │ │ │ │ │ Att │ At Found │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ |                   |                           |               |          |          |      |                                | 11   11   2024   01:14   Hrs   Last Known Secure   SM T W T F S |                            |   |                         |                          |          |                    |  |
| N<br>T   | #1  |         |                       | Discharging F                      | _  |                   |                           |               |          |          |      |                                |   |                            | Tim   | e                       |                          |          |                    |  |
| D .  | #2  | Crime I | ncident               |                                    |  |                   |                           |               | Att      | Location | n of | Incident                       |   | •                          |   |                         | •                        | Offens   | se Tract           |  |
| A<br>T   | Coince Incident   |         |                       |                                    |  |                   |                           |               |          |          |      |                                |   |                            | em NC   |                         | 103<br>Victim Res        | 32       |                    |  |
| A  | #3  | Jime I  | nerdent               |                                    | ☐ Att   Premise Type ☐ Com                                     |                   |                           |               |          |          |      | ☐ Single Family ☐ Multi Family |   |                            |   |                         |                          |          |                    |  |
| МО   |   |         | d or Com<br>MITTED    |                                    |  | Forcible Yes      |                           |               |          |          |      | Weapon / Tools                 |   |                            |   |                         |                          |          |                    |  |
|  | # of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use: |         |                       |                                    |  |                   |                           |               |          |          |      |                                |   |                            |   | Use:                    |                          |          |                    |  |
| 3.7  | 1   |         |                       | ciety Governm                      |  |                   | inancial Institu          |               | know     |          | -    | roken Bone                     |   | Severe                     | Lacerar<br>Other                                  |                         |                          | _        | Unknown            |  |
| V<br>I   | Victim/Business Name (Last, First, Middle)  Victim of DOB / Age R                                   |         |                       |                                    |  |                   |                           |               |          |          |      |                                |   |                            |   |                         |                          | nip Resi | N/A<br>dent Status |  |
| C<br>T   | V1  |         | D۸۲                   | ΓA OMITTED                         |  |                   | Crime #                   |               |          |          |      |                                |   |                            | To Offeno   | ler   □ R               | tesident<br>Ion-Resident |          |                    |  |
| I<br>M ·   |   |         |                       | IA OMITIED                         |  |                   |                           |               |          |          |      | 1,                             |   |                            |   |                         |                          |          | Inknown            |  |
| 111  | Home Address DATA OMI   |         |                       |                                    |  |                   |                           |               |          | TTED     |      |                                |   |                            |   | Home Phone              |                          |          |                    |  |
|  | Employer Name/Address DATA C  |         |                       |                                    |  |                   |                           |               | MITTED   |          |      |                                |   |                            |   | Business Phone          |                          |          |                    |  |
|  | VYR   | M       | Color   Lic/Lis   Vin |                                    |  |                   |                           |               | Vin      |          |      |                                |   |                            |   |                         |                          |          |                    |  |
|  |   |         |                       |                                    |  |                   |                           |               |          |          |      |                                |   |                            |   |                         |                          |          |                    |  |
| O<br>T<br>H<br>E<br>R<br>S<br>I<br>N<br>V<br>O<br>L<br>V<br>E<br>D | DATA OMITTED  |         |                       |                                    |  |                   |                           |               |          |          |      |                                |   |                            |   |                         |                          |          |                    |  |
| Status<br>Codes  | (Chec   | k "OJ"  | = Stolen<br>column i  | R = Recovered frecovered for other | D = L<br>r juri  | Damaged sdiction) | Z = Seized                | В=            | Burn     | ed C=    | Cot  | ınterfeit / F                  | orged   | F = Foun                   | d   |                         |                          |          |                    |  |
|  | Victim<br># DCI Status Value OJ QTY   |         |                       |                                    |  |                   | Property Description      |               |          |          |      |                                |   |                            | Mak   | ake/Model Serial Number |                          |          |                    |  |
| -<br>-<br>P -<br>R   |   |         |                       |                                    |  |                   |                           |               |          |          |      |                                |   |                            | MITTED  |                         |                          |          |                    |  |
|  |   |         |                       |                                    | _  |                   |                           |               |          |          |      |                                |   |                            |   |                         |                          |          | OR<br>MATION       |  |
|  |   |         |                       |                                    | $\dashv$   |                   |                           |               |          |          |      |                                |   |                            |   |                         |                          |          | JRITY              |  |
| 0  |   |         |                       |                                    |  |                   |                           |               |          |          |      |                                |   |                            |   |                         |                          | PURI     | POSES              |  |
| Р <sup>-</sup><br>Е -  |   |         |                       |                                    |  |                   |                           |               |          |          |      |                                |   |                            |   |                         |                          |          |                    |  |
| R.   |   |         |                       |                                    | _  |                   |                           |               |          |          |      |                                |   |                            |   |                         |                          |          | HE FIRST           |  |
| Т<br>Ү   |   |         |                       |                                    | _  | +                 |                           |               |          |          |      |                                |   |                            |   |                         | 1 W                      |          | ROPERTY<br>IS ARE  |  |
| -  |   |         |                       |                                    | $\dashv$   |                   |                           |               |          |          |      |                                |   |                            |   |                         |                          |          | YED ON             |  |
| -  |   |         |                       |                                    |  |                   |                           |               |          |          |      |                                |   |                            |   |                         |                          | P2C RI   | EPORTS             |  |
| -  |   |         |                       |                                    |  |                   |                           |               |          |          |      |                                |   |                            |   |                         |                          |          |                    |  |
|  | Numb  |         | ehicles S             | tolen 0                            |  | nber Vehic        | cles Recovere Officer Sig |               | <i>0</i> |          |      |                                | I   | Supervisor                 | Signat  | ıre                     |                          |          |                    |  |
| ID   | PER   | RELL    | , A. J.               | (16180)                            | Officer Sig  | natur             |                           |               |          |          |      | SOME.                          | or Signature<br>ERVILLE, T. J. (16036)                          |                            |   |                         |                          |          |                    |  |
|  | Comp  | ainant  | e                     | Case Status                        | us Case Disposition:   |                   |                           |               |          |          |      | ated                           |   |                            | Extraditio  | n Declined              |                          |          |                    |  |
| Status   |   |         |                       |                                    |  |                   | ☐ Closed                  | tive<br>/Clea | ıred     |          |      | Cleared                        | by Ai   | Loc<br>rest<br>rest by And | Refuse<br>other Ag                                | gency                   | ooperate                 |          | age 1              |  |