I N	Agenc	y Name		NSTON-SALEN	, IN	INCIDENT/INVESTIGATION						OCA 2440773								
C	ORI	NG				02102	-	REPORT						Date / Time Reported S M W T F S Month Day Yr Time						
D E	10		NC 034				Att   At Found							TIFISI	11   12   2024   02:29 Hrs.  Last Known Secure SMIW TFS Month Day Yr Time					
N T	#1	Jimic I	nerdent(s	, Vandalis	m			Loga (	- 1	Month 11	Day			ime :29  Hrs			Day Yr 🖰	Time $02:28$ Hrs.		
D .	#2	Crime I	ncident	renteettis					$\rightarrow$	Location			1 02	.29  1118	11		2   2024	Offense Tract		
A		~ · ·						_	Com			own A	lv, W	inston-so	ılem Λ			411		
T A	# X													уре				Victim Residence Type ☐ Single Family ☐ Multi Family		
МО	How Attacked or Committed DATA OMITTED												Forcible Yes	X N/A	We	apon / Tools				
	# of Victims   Type   Person   X Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:															lcohol Use:				
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown															_				
V I		Victim/		Name (Last, First,			uty   Othe	er/Unl	know	n	Internal Victin			scious  Age	Other					
C T	VI DATA OMITTED																To Offender			
I M			DA	IA OMITTED							1,							Unknown		
171	Home Address DATA OMI									ГТЕО						Home Phone				
	Employer Name/Address DATA OM								TTED						Business Phone					
,	VYR	M	Model	Color		Lic	/Lis				Vin									
T H E R S I N V O L V E D	DATA OMITTED																			
Status Codes																				
	Victim		Status	Value	Property Description								Mak	e/Mo	ıdel S	erial Number				
							WINDOW								Ivian	C/ 1/10		ATA OMITTED		
P -																	17	FOR NFORMATION		
					$\dashv$									+			- 11	SECURITY		
R O																		PURPOSES		
P :																				
R T					$\dashv$													NLY THE FIRST LVE PROPERTY		
Y ·					$\dashv$									-			1 WEI	ITEMS ARE		
														+			D	ISPLAYED ON		
																	I	P2C REPORTS		
					$\Box$															
	Numb		ehicles S	Stolen 0		mber Veh	Officer Sig		<u>0</u> е				Т	Supervisor	Signati	ire				
ID	AN7	'AL, K	Z. A. (10	5125)									PERKI	or Signature IINS, R. A. (15028)						
	Comp	lainant	Signatur	e			Case Status	Further Investigation ☐ Unfounded ☐ Loc							ated		☐ Ext	radition Declined		
Status							☐ Closed	/Clea		nancted	Cl		by Ar	rest	Refuse other Ag	ency	ooperate	Page 1		