| I N | Agency | y Name | | NSTON-SALE | OLICE | , IN | INCIDENT/INVESTIGATION | | | | | | | OCA 2440838 | | | | | | |
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| C | ORI | | | | | LICE | 1 | REPORT | | | | | | | Date / Time Reported SM WTFS | | | | | |
| D E | | | NC 034 | | | | | | | | | | | | | 11 12 2024 13:17 Hrs. | | | | |
| N | #1 | Time ii | icideii(8 |) Vandalis | m | | | 1 — | | | | | | | | nth Day Yr Time | | | | |
| T . | Crime Incident | | | | | | | | | | | | | | | | 10 2024 | 23:16 Offense | | |
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| T A | #3 | Crime I | ncident | | | | ☐ Att Premise Type ☐ Com | | | | | | | Victim Residence Type ☐ Single Family ☐ Multi Family | | | | | | |
| МО | | | d or Con | | | | | | | | | | | Forcible Yes | X N/A | We | apon / Tool | 3 | | |
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| | Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow | | | | | | | | | | | | | | | | | | | |
| V I | | Liotina / | | ligious L.E. Of Name (Last, First, | | | uty Othe | er/Un | know | n 🗆 | | ternal 🔲 | | nscious | Other | Majo | | | nt Status | |
| C T | V1 | / ICUIII/ | | | | Victim of Crime # | | | | 3 / Age 36 | Race | Sex | Relationsh To Offende | r 🔯 Res | sident | | | | | |
| I | DATA OMITTED | | | | | | | | | | | | | | B | F | | | n-Resident known | |
| М | Home Address DATA OMI | | | | | | | | | TTFD | | | | | | Home Phone | | | | |
| | Employer Name/Address DATA ON | | | | | | | | | | | | | | Business Phone | | | | | |
| | VYR | | ake | Model | | | | | | | Vin | | | | | | | | | |
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| Status Codes | L = Lo (Checl | ost S k "OJ" | = Stolen column | R = Recovered if recovered for other | D = D er juris | amaged diction) | Z = Seized | B = | Burn | C = C | Cou | interfeit / F | orged | F = Found | i | | | | | |
| | Victim # | DCI | Status | Value | QTY | | Property Description | | | | | | | Make/Model Serial Number | | | | | | |
| | | WINDSHIELL | | | | | | | | | DATA OMITTED | | | | | | | | | |
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| | Officer ID# Officer Signature Supervisor Signature | | | | | | | | | | | | | | | | | | | |
| ID | | | <i>J. C.</i> (1 Signatur | | | | Case Statu | | | | | | | CLARK | CLARK, Ď. C. (15090) | | | | | |
| G4 · | p1 | | G | | | | ☐ Furthe | ☐ Further Investigation ☐ Unfounded ☐ Located | | | | | | | Refus | a to C | □ E | tradition l | Declined | |
| Status | ☐ Inactive ☐ Cleared by Arrest ☐ Re☐ Closed/Cleared ☐ Cleared by Arrest by Anothe | | | | | | | | | | | | ther Ag | gency | | Pag | re 1 | | | |