							-						-				
I N	Agenc	y Name		STON-SALE	M P	OLICE	INCIDENT/INVESTIGATION REPORT							OCA 2441351 Date / Time Reported S M T W T F S Month Day Yr Time			
C · I	ORI					02102											
D		NC	NC 034	40200								11 16 2024 07:47 Hrs.					
E N		Crime I	ncident(s				Att At Found SMTWTFS Month Day Yr Time							Last Known Secure SMTWTFS Month Day Yr Time			
T .	#1			Trespass	ing			X Con	¹ 11		16 2024		:47 Hrs			2024	07:46 Hrs.
D	D #2 Crime Incident														NC 27	101	Offense Tract
A T	T Crime Insident - Att Dramics Type													salem.			412 ence Type
A	#3		lieldelle											☐ Single Family ☐ Multi Family			
	How A	Attacke	d or Con	mitted									Forcible		Weapo	n / Tools	
MO	D.	ATA O	MITTEI)									□ Yes [□ No	X N/A			
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															Alcohol Use:	
	2		🛛 🖾 So	ciety 🔲 Governn			inancial Institu			_	Broken Bone		Severe				es □Unknown
V I		liating		ligious □ L.E. Of Name (Last, First,			ity 🗌 Othe	er/Unknov	wn	[[Internal			Other N			
С	V1	v icuiti/			witu	uie)					Victim of Crime #	DOB	/ Age	Race		ationshij Offende	
T I	V I		DA	FA OMITTED						1,						□ Non-Residen	
M·	Home	Addre	ss												Home P	hone	Unknown
						D.	ATA OMI	TA OMITTED									
	Emplo	oyer Na	ume/Add	ress		D.	ATA OMITTED							Business Phone			
	VYR	M	ake	Model	S	tyle	Color	L	ic/Lis				Vin				
H E R S I N V O L V E D	DATA OMITTED																
Status	L = L	ost S	= Stolen	R = Recovered	D =	Damaged	Z = Seized	B = Bur	ned (C = C	ounterfeit / F	orged	F = Found	d			
Codes	(Chec Victim	k "OJ"	column	if recovered for oth	er ju	risdiction)											
	#							Property Description							e/Model		Serial Number ATA OMITTED
														D	FOR		
-																I	NFORMATION
P- R																	SECURITY
0																	PURPOSES
Р' Е-																	
R																0	NLY THE FIRST
T Y ·																TWE	LVE PROPERTY
-																	ITEMS ARE
-						┝──┤											DISPLAYED ON P2C REPORTS
-																	F2C REFORTS
-	Numb	er of V	ehicles S	tolen 0	Nu	mber Vehi	cles Recovere	d 0					I				
	Office	r		II	D#		Officer Sig						Supervisor	Signatu	re		
ID			<i>ON, B.</i> Signatur	<u>R. (15633)</u>			Case Status	2			Case Diance	ition	ŴAGO	NER, S	5. D. (1	5802)	
	Comp	amallí	Signatur				☐ Further	□ Further Investigation □ Unfounded □ Lo									
Status							□ Inact	active Cleared by Arrest						□ Refuse to Cooperate			
							\square Closed		xhauste	ed	\square Death of			Prosect		clined	Page 1