I N	Agenc	y Name		NSTON-SALEN	OLICE	IN	INCIDENT/INVESTIGATION							OCA 2441674					
I C	ORI	NC	NC 034	10200			1	REPORT							Date / Time Reported SMTWTFS Month Day Yr Time				
D E		Crime I			Att At Found SMTWTFS Month Day Yr Time							$\begin{array}{c ccccccccccccccccccccccccccccccccccc$							
N T	#1		Blackmail/ Ex	_										Time 18:43 Hrs.					
D	#2	Crime I	ncident				_	Att Location of Incident Offense									Offense Tract 321		
A T	#3	Crime I	ncident					_	Att	Premise			v, vv	insion-sai	em iv		Victim Reside		
A							Com						☐ Single Family ☐ Multi Family						
МО			d or Com										Forcible Yes [No	Weapon / Tools					
	# of V	ictims		N Person	_	Business				Inju	•	None			Loss o			lcohol Use:	
V	1 Society Government Financial Institute Broken Bones Severe Lacerations Who Major Ves Multiple Unknown Internal Unconscious Other Major No No NA															_			
I C		Victim/	Business	Name (Last, First,	dle)			Victim of D				DOI	B / Age	Race	Sex	Relationship To Offender			
T I	V1		DA	ΓΑ OMITTED	$\begin{bmatrix} I, \end{bmatrix}$					51	W	M		☐ Non-Residen					
M ·	Home	Addre	ss									1,					ne Phone	Unknown	
	Employer Name/Address DATA OMI Employer Name/Address									TTED									
	Emplo	oyer Na	ress	ATA OMI	IITTED					Business Phone									
•	VYR	M	ake	Model	St	yle	Color		Lic	:/Lis				Vin					
T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column i	R = Recovered for other	D = er jur	Damaged isdiction)	Z = Seized	B =	Burn	ed C=	Co	unterfeit / F	Forged	F = Found	d				
	Victim # DCI Status Value OJ QTY						Property Description								Mak	ke/Mo	odel S	erial Number	
- - P - R													Da	ATA OMITTED					
																	II	FOR FORMATION	
																		SECURITY	
O P -																		PURPOSES	
Ē -																	01	NLY THE FIRST	
R T																		VE PROPERTY	
Y																	1 11 21	ITEMS ARE	
-																	D	ISPLAYED ON	
																	I	2C REPORTS	
-	Num1	or of V	ehicles S	tolen 0	N	mber Vak:	cles Recovere	d	0										
	Office	r		ID		moer veni	Officer Sig		0 re					Supervisor	Signat	ure			
ID	MO	RRISE		R. I. (16384)		SOMERVILLE, T. J. (16036)													
Status	Compl	iainant	Signatur	e		☐ Further	Case Status ☐ Further Investigation ☐ Inactive ☐ Closed/Cleared ☐ Closed/Cleared ☐ Case Disposition: ☐ Unfounded ☐ Located ☐ Cleared by Arrest ☐ Refuse to ☐ Cleared by Arrest by Another Agen							e to C	ooperate	radition Declined			
										hausted	- [ender 🗀				Page 1	