	A	N					¬					ī	0.07				
I N	Agency	Name		STON-SALE	M F	OLICE	; IN	NCIDENT/INVESTIGATION					OCA 2441873				
C I	ORI						REPORT						Date / Time Reported S M T H T F S Month Day Yr Time				
D		NC I	VC 034	40200										11 20 2024 11:00 Hrs.			
E N	Crime Incident(s)											FS	Last K	nown Sec	cure Yr	SMT <u>₩</u> TFS Time	
Т	$\square Drug Violations \qquad \square X Com 11 20 2024 11:00 E$														2024	10:59 Hrs.	
D	$ = \frac{1}{2} \begin{bmatrix} \text{Crime Incident} \\ \text{Drive Incident} \end{bmatrix} = \frac{1}{2} \begin{bmatrix} \text{Att} \\ \text{Location of Incident} \\ \text{Att} \end{bmatrix} = \frac{1}{2} \begin{bmatrix} \text{Att} \\ \text{Location of Incident} \\ \text{Att} \end{bmatrix} = \frac{1}{2} \begin{bmatrix} \text{Att} \\ \text{Location of Incident} \\ \text{Att} \end{bmatrix} = \frac{1}{2} \begin{bmatrix} \text{Att} \\ \text{Location of Incident} \\ \text{Att} \end{bmatrix} = \frac{1}{2} \begin{bmatrix} \text{Att} \\ \text{Location of Incident} \\ \\ \text{Location of Incident } \\ \text{Location of Incident} \\ Location of Inci$															Offense Tract 213	
A T														Victim Residence Type			
A	#3 C		eraem										☐ Single Family ☐ Multi Family				
	How Attacked or Committed													Weapon	/ Tools		
MO	DA	TA ON	MITTEE)]Yes []No	X N/A							
	# of Vi	ctims	Туре	□ Person		Business			Injur	y ⊓ None	Mino		Loss of	Teeth	Drug/A	lcohol Use:	
	Image: Solution of the solut																
V	Religious L.E. Oncer Line of Duty Other/Onknown Internal Unconscious														X N		
C		ictim/E	susiness	Name (Last, First	, Mia	die)				Victim of Crime #	DOB / A	Age	Race S		tionship Offender		
T I	V1		DA	ΓΑ OMITTED						1,2						Non-Residen	
M	Home	Addres	· c							1,2				Home Pho	one	Unknown	
	Home Address DATA OMITTED														one		
	Employ	yer Nai	ne/Addi	ress		D	ATA OMI	ΓΤΕD					Business Phone				
	VYR	Ma	ke	Model	1 5	tyle	Color	Li	c/Lis			in					
					Ĩ	-)											
R S I N V O L V E D	DATA OMITTED																
Status	L = Lo	st S =	= Stolen	R = Recovered	D =	Damaged	Z = Seized	B = Buri	ned C =	Counterfeit / F	Forged F	= Foun	d				
Codes	(Check Victim	"OJ" (column i	if recovered for ot	ner ju	risdiction)					-						
	Victim #		Status	Value	OJ	QTY		Property	Descripti	ion			Make	/Model		erial Number	
							PIPES							DATA OMITTED			
	1 11 6 1 GLASS PIPE												I	FOR NFORMATION			
P ·															11	SECURITY	
R O																PURPOSES	
Р																	
E · R															01	NLY THE FIRST	
Т															TWEI	VE PROPERTY	
Y																ITEMS ARE	
															D	ISPLAYED ON	
															I	P2C REPORTS	
-																	
	Numbe Officer	r of Ve	hicles S	-	Nu D#	mber Veh	icles Recovere	. 0			0	Darvica	Signature	* 9			
ID		ON, A	. <i>E.</i> (1		υπ			ignature Superviso NAVY					or Signature <i>C, C. M. (15037)</i>				
Status													radition Declined				
								l/Leads Ex	hausted	Death of		r Г	Prosecu	ution Decl	lined	Page 1	