I N	Agenc	y Name		STON-SALEN	OLICE	CIE	CIDENT/INVESTIGATION						OCA 2442255						
I C	ORI	NC	NC 034	10200				REPORT							Date / Time Reported SMTWTES Month Day Yr Time				
D E			ncident(s		Att At Found SMTWT₽								11 22 2024 21:01 Hrs						
N T	#1 l			, 1g Threats -intir	nida	ation, No	n Physical		Com	Month 11				ime :01 Hrs				r 💳	Time $21:00$ Hrs.
D.			ncident						Att	Location	of Inc	cident							Offense Tract
A T		Trima I	ncident	Disorderly C	ondi	uct		_	Com	4420 (Premise 7		rn Av,	Win.	ston-salen	n NC)5 /ictim Re	ngidan	122
A	#3	Jillie i	neident						Att Com	Fielilise	ype					- 1			ce Type y □Multi Family
МО			d or Com MITTEI		Forcible ☐ Yes ☐ No						☐ Yes ☐	Weapon / Tools							
	# of Victims Type Type Person Business Injury Type Minor Loss of Teeth Drug/Alcohol Use:															cohol Use:			
	2			ciety Governm		_	inancial Institu		len ove	. –		en Bone		□ Severe				_	Unknown
V I		Victim/		igious L.E. Off Name (Last, First,			пу 🔲 Опи	21/ U1	r/Unknown Internal Unc					B / Age	Other		Sex Relationship Resident St		
C T	V1			ΓA OMITTED			Crime #						58			To Offer	nder	Resident	
I M ·			DA	IA OMITTED					1				В	F	1NE		☐ Non-Residen ☐ Unknown		
141	Home	Addre	SS		D	ATA OMI	OMITTED								Home Phone				
	Emplo	yer Na	me/Add	ress		TA OMITTED							Business Phone						
	VYR	Model							Vin										
O T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes	(Chec	k "OJ"	= Stolen column	R = Recovered for other	D = er jur	Damaged isdiction)	Z = Seized	B =	Burr	C = C	Counte	erfeit / F	orged	F = Found	i 				
	Victim # DCI Status Value OJ QTY						Property Description							Mak	ake/Model Serial Number				
- - P - R															DA	FOR			
																		INI	FOR FORMATION
					\dashv														SECURITY
0]	PURPOSES
Р ⁻ Е -																			
R .					_												T		LY THE FIRST
Т Ү														-			1		TEMS ARE
-					\dashv														SPLAYED ON
-																		P2	C REPORTS
-					\Box														
	Numb		ehicles S	tolen 0		mber Vehi	cles Recovere		0 re				Т	Supervisor	Signati	ıre			
ID	SHA	, L. A. (<u> </u>								r Signature E, R. D. (15708)							
	Complainant Signature Case Stat									Case Disposition: nvestigation Unfounded Located								Extra	dition Declined
Status							☐ Inact	ive /Clea	ared			Cleared Cleared	by Ar	rest by Ano	Refuse ther Ag	gency	ooperate	_	Page 1