I N	Agenc	y Name		STON-SALEN	1 PC	OLICE] IN	INCIDENT/INVESTIGATION						OCA 2442321				
C	ORI	NC	NC 03/	10200			1	REPORT						Date / Time Reported SMTWTFS				
D E	NC NC 0340200 Crime Incident(s)								Att At Found SMTWTFS Month Day Yr Time						11 23 2024 II:42 Hrs.			
N T	#1 C	'ommi	ınicatir	ng Threats -intin	nidai	tion, No	n Physical		Com	Month			lime 1:42 Hrs				Time 11:41 Hrs.	
D	#2	Crime I	ncident						Att Com		of Incident	'+ Win	ston-salen	n NC	2712	I	Offense Tract 412	
A T	#3	Crime I	ncident					片	$\overline{}$	Premise 7		i, vv iri	sion-saien	n IVC		Victim Reside		
A								Com					☐ Single Family ☐ Multi Family					
МО			d or Com MITTED					Forcible						Weapon / Tools				
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use: Broken Bones Severe Lacerations Yes Unknow																	
V	1			igious L.E. Off					know	. –	Internal [Lacera Other			_	
I C		Victim/	Business	Name (Last, First,	Midd	le)		Victim of D Crime #				f DO	B / Age	Race	Sex	Relationship To Offender	Resident Status Resident	
T I	VI DATA OMITTED										1,		24	$\mid_{B}\mid$	$_{F}$	1AQ	☐ Non-Resident	
M	Home	Addre	SS										<i>D</i>		ne Phone	Unknown		
	Employer Name/Address DATA O								DMITTED						D : N			
	Emplo	oyer Na	ime/Addi	ress	D.	ATA OMI	ΓA OMITTED						Business Phone					
	VYR	M	ake	Model	Sty	/le	Color		Lic	:/Lis			Vin					
O T H E R S I N V O L V E D		DATA OMITTED																
Status Codes	(Chec	k "OJ"	= Stolen column i	R = Recovered frecovered for other	D = L r juri:	Damaged sdiction)	Z = Seized	В=	Burn	ed $C = C$	Counterfeit	Forged	F = Found	d 				
	Victim # DCI Status Value OJ QTY					QTY	Property Description							Mak	ce/Mo		rial Number	
- P - R _		 											DA	TA OMITTED FOR				
																IN	FORMATION	
																	SECURITY	
O P .																	PURPOSES	
E - R																ON	LY THE FIRST	
T																	VE PROPERTY	
Υ :																	ITEMS ARE	
					_												SPLAYED ON	
					_											Р	2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Num	nber Vehic	cles Recovere	d	0									
ID	Office:		A. J. (ID 16078)		Officer Sig	Officer Signature Supervisor Signature WHELAN L. T. (15232)											
ID		Signatur			Case Status	Case Status Case Disposition:						WHELAN, L. T. (15232)						
Status	•		-				☐ Further ☐ Inact ☐ Closed ☐ Closed	ive /Clea	ıred		☐ Unfo	unded ed by A ed by A	☐ Loca	Refuse ther Ag	gency	ooperate	Page 1	