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I N	Agenc	y Name		STON-SALE	M P	OLICE								OCA 2442723 Date/Time Reported SMIWTFS Month Day Yr Time					
C · I	ORI					0 21 0 2													
D			NC 034											<u>11 26 2024 16:08 H</u>				s.	
E N	#1	^{t1} Crime Incident(s) <i>Discharging Firearm</i>						Att	At Fo Mont	h	Day Yr	Ti	me		nown Se	Yr '	S M T W T F Time		
T .		Crime I	ncident	Discharging	Fired	arm		⊠ Con	<u>11</u> Locat		26 2024 of Incident	1 16:	08 Hrs	s 11	26	2024	<u> 16:07</u> Hr: Offense Tract	s.	
D A	#2 Crime incident \Box Att Location of incident \Box Com 4333 Grove Av, Winston-saler														105		122		
Т	#3 Crime Incident															ence Type	-		
А		1	1 0	1. 1				Con					C '11			0	ily ∏Multi Fami	ly	
МО			d or Con MITTEI										Forcible Yes [No	X N/A	weapor	n / Tools			
																Loss of Teeth Drug/Alcohol Use:			
v	1			ciety 🔲 Governn ligious 🔲 L.E. Ot			inancial Institution		vn	_	Broken Bones		Severe	Laceratio Other M			es Unknown	1	
Ι	'	Victim/		Name (Last, First,					·"		Victim of	DOB		Race S	<u> </u>	ationshi		IS	
C T	V1			TA OMITTED							Crime #		-		То	Offender	Resident	.	
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141	Home	e Addre	SS			D	ATA OMI	ГТЕD						1	Home Pl	none		_	
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H E R S V O L V E D	DATA OMITTED																		
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	Victim	DCI	Status	Value	J	QTY		Property	Descri	ntion				Make	/Model	ç	erial Number	_	
	# DCI Status Value OJ QTY					QII	Property Description							Wake	Widder		ATA OMITTED	_	
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ID	Office WIL		<u>S, C</u> . D	D. (16372)	D#		Unicer Sig	Officer Signature Supervisor Signat ARNDT, V. 2										_	
Status	Comp	lainant	Signatur	e			X Inact	her Investigation Unfounded Located active Cleared by Arrest Refuse to						to Coope		tradition Declined	d		
							Closed		hausted	1	\square Cleared \square Death of			other Age Prosecu		clined	Page 1	_	