I N C	Agenc	y Name		NSTON-SALE	A P	OLICE	INCIDENT/INVESTIGATION REPORT							OCA 2443114					
I	ORI	NC	NC 034	40200			KLFOKI							Date / Time Reported   S M T W T F S Month Day Yr Time   11   29   2024   23:58 Hrs					
D E			ncident(s					_ A	<sub>ff</sub>	At Found	S	1 T W	T F S	11   Last			24   23 S M T		
N T	#1								om	Month	Day Yr	Т	'ıme			n Secure Pay Yr 19   2024	Time!   23::	ė	
	#2	Crime I	ncident				LX Com   11   29   2024   23:58   H						7 11		9   2029		se Tract		
D A								_ c			osie St/ca	ssell S	St, Winste	on-sal			21		
T A	#3 Crime Incident														Victim Residence Type ☐ Single Family ☐ Multi Family				
	How	Attacke	d or Con	nmitted				□ C	om		Forcible				Weapon / Tools				
MO			MITTEI										☐ Yes	X N/A					
	# of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:															Use.			
	∇X Society    Government																		
V	T ☐ Religious ☐ L.E. Officer Line of Duty ☐ Other/Unknown ☐ Internal ☐ Unconscious ☐ Other Major ☐ NO ☐ N/A																		
I C																Relationshi To Offende	p Resid	dent Status esident	
T	V1		DA	TA OMITTED							Crime #					To Officiac		on-Resident	
I M		4.11									1,				Unknown				
	Home	e Addre	SS			D.	ATA OMI	ГТED	)						Home Phone				
	Empl	oyer Na	me/Add	ress		D.	ATA OMITTED							Business Phone					
	VYR	I M	ake	Model	I St	yle							Vin						
				1110001		,,,,,			210/1										
H E R S I N V O L V E D	DATA OMITTED																		
Status Codes	L = L (Chec	ost S	= Stolen	R = Recovered if recovered for other	D = i	Damaged isdiction)	Z = Seized	B = E	Burne	$\mathbf{C} = \mathbf{C}$	ounterfeit / I	orged	F = Foun	ıd					
	Victim	l			Ť	Í	Property Description							Mal	e/Mo	dal	Serial N	ı, ma ba an	
P - R _	#	# DCI Status Value OJ QTY						Property Description							.e/1V1O			MITTED	
																	FC	OR	
																		MATION	
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O P .																	PURF	POSES	
Ε .					$\dashv$												NI V TI	HE FIRST	
R T																		ROPERTY	
Y ·																		IS ARE	
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																	P2C RE	EPORTS	
			ehicles S	-		nber Vehic	cles Recovere	-	1				~						
ID	Office EDF		. (1622	ID 20)	#		Officer Sig	Officer Signature Supervisor Signature MITCHELL, J. R. (15672)											
11/			Signatur				Case Status	Case Status Case Disposition:											
Status	1		-				☐ Further ☐ Inact ☐ Closed ☐ Closed	ive /Cleare	ed	on	☐ Unfoun☐ Cleared☐ Cleared	ded by Ar by Ar	Loc rest   C rest by And nder   C	] Refuse other Ag	gency	ooperate		n Declined	

DCI-600F