I N	Agenc	y Nam		NSTON-SALEN	CIDENT/INVESTIGATION						OCA 2443246								
I C	ORI	NC	NC 02	40200	1		REPORT						Date / Time Reported SMTWTFS Month Day Yr Time						
D E	10		NC 034			☐ Att │ At Found │ ➡ M T W T F S						$12 \mid 01 \mid 2024 \mid 09:01$ Hrs.							
N T	#1	Jimio I		, phernalia- Usin	ı —	☐ Att At Found S M T W T F S Yr Time							Last Known Secure SMTWTFS month Day Yr Time 12 01 2024 09:00 Hrs.						
D .	#2	Crime I	ncident	r	<i>o</i> [,] –	77			_	Location			. 1 03	.01	12			Offense Tract	
A	Com 5939 University Pw/summit Squa																Vietim Deside	124	
T A	#3	Jrime i	ncident						☐ Att Premise Type ☐ Com							Victim Residence Type ☐ Single Family ☐ Multi Family			
МО			d or Com MITTEI					Forcible ☐ Yes ☐ No						Weapon / Tools					
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															cohol Use:			
17	Society															_			
V I		Victim/		Name (Last, First,			uty 🔲 Out	21/ ()11	IKIIOW	" <u> </u>		ctim of		B / Age	Race			Resident Status	
C T	V1		DA	ΓΑ OMITTED		Cri	Crime #					To Offender	☐ Resident ☐ Non-Resident						
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	Employer Name/Address DATA OMI'									 FTED						Business Phone			
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ID	Office TAY	r <i>LOR</i> ,	J. C. (1	ID (16205)	Officer Sig	Officer Signature Supervisor MATT							r Signature TSON, G. M. (15167)						
	Complainant Signature Case Statu									Case Disposition:							adition Daolinad		
Status	Inac									ve Cleared by Arrest Refuse to Cooperate							ooperate	adition Declined	
					☐ Closed			hausted		Cleared by Arrest by Another Agency						Page 1			