I N	Agenc	y Name		VSTON-SALEN	CIDENT/INVESTIGATION						OCA 2443671									
C I	ORI	NC					1	REPORT						Date / Time Reported SMTWTFS Month Day Yr Time						
D E	NC NC 0340200 Crime Incident(s)									☐ Att At Found SMT₩TFS Month Day Yr Time							12 04 2024 13:37 Hrs. Last Known Secure S M T M T F S Month Day Yr Time Time Month Day Yr Month Day Yr Time Month Day Yr Month Day Yr			
N T	#1	5	Simple 1	Assault-non Agg	_	Com	Month 12	Ι			lime 3:37 Hrs				Time 13:36 Hrs.					
D	#2	Crime I	ncident			- 1			Incident					7102	Offense Tract 323					
A T	#3 Crime Incident														Victim Residence Type					
A		1	1 6	* 1			Com					F 31	☐ Single Family ☐ Multi Family							
MO			d or Com MITTED											Forcible ☐ Yes [☐ No	X N/A	We	apon / Tools			
	# of V	ictims	l	▼ Person	_	Business				Inju	•	None None		_	Loss o			Alcohol Use:		
V	1			ciety Government Gious L.E. Off			inancial Institution		know		_	roken Bone nternal □		Severe	Lacera Other	tions Majo		es Unknown O N/A		
I C		Victim/	Business	Name (Last, First,						Victim of Crime #	of DOB / Age F					Resident Status				
T I	V1		DA	ΓA OMITTED					1,		24	$\mid_{B}\mid$	$_{F}$	1SB	☐ Non-Resident					
M	Home Address														Б		ne Phone	Unknown		
	Employer Name/Address DATA OMI'															Business Phone				
	VYR Make Model Style Color									TTED Lic/Lis				17:		Dusiness I none				
	VIK	IVI	аке	Wodel	Siy	yie	Color		LIC	J/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 for other	D = I r juri	Damaged sdiction)	Z = Seized	B =	Burn	ied C=	Coı	unterfeit / F	orged	F = Found	1					
	Victim # DCI Status Value OJ QTY						Property Description								Mak	ce/Mo		erial Number		
- P - R _													D.	ATA OMITTED FOR						
																	I	NFORMATION		
																		SECURITY		
O P .					_													PURPOSES		
E - R																	0	NLY THE FIRST		
T.																		VE PROPERTY		
Υ .																		ITEMS ARE		
																		ISPLAYED ON		
					_													P2C REPORTS		
-	Numb	er of V	ehicles S	tolen 0	Nun	nber Vehi	cles Recovere	d	0											
	Office	r		ID			Officer Sig		_					Supervisor			A (15205)			
ID			. <i>(1481</i> Signature				Case Status	2			10	Case Dispos	ition	JAMER	SON,	В. Л	M. (15386)			
Status	Comp	iamalli	Signatul				☐ Further ☐ Inact ☐ Closed	Inve ive /Clea	ared			☐ Unfoun☐ Cleared☐ Cleared☐	ded by Ai by Ai	Locarrest Locarrest Locarrest Locarrest Locarrest by Ano	Refuse ther Ag	gency	ooperate Г	Page 1		