I Agency Name INCIDENT/INIVESTIGATION													OCA					
N	rigene	oy i taiii		NSTON-SALE	M P	OLICE	INCIDENT/INVESTIGATION REPORT							2443878				
C I	ORI				1			REPO	)R I			Date /	Time I	Reported S Day Yr				
D			NC 034									12   06   2024  02:46 Hrs.						
E N	#1	Crime I	ncident(s	•			Att At Found SMTWTFS Month Day Yr Time							Last Known Secure SMTWTFS Month Day Yr Time				
T	T vanadusm 12 06												:46  Hrs	12	06	<u> </u>		
D	D #2														calem NC 27104 Offense Tract			
A T	ща	Crime I	ncident					☐ Att	-	emise Ty		u, **	insion-su	em iv		ctim Residen		
A	#3							☐ Co		•	•					Single Famil	y □Multi Family	
МО			d or Con										Forcible					
WO	DATA OMITTED See No.																	
V I	# of V	Victims	1 **	∑ Person	_	Business				Injury	☐ None	$\square$ M	linor 🗆	Loss of	f Teeth	.	cohol Use:	
	1			ciety  Governm ligious L.E. Of			inancial Institu			_	Broken Bone		□ Severe	e Lacerations Yes Unknown  Other Major No N/A				
		Victim		Name (Last, First,			uty 🔲 Oute	21/ UHKH	OWII		nternal  Victim of		S / Age	Race	<u> </u>	No Relationship	□N/A Resident Status	
C T	Victim of BOB / Age Crime # 34															To Offender	■ Resident	
I	` -		DA	TA OMITTED							1,			W	F	1AQ	☐ Non-Resident	
M	Hom	e Addre	ess				ATTA OMIT	TTED							Home Phone			
	F 1		/A 11				ATA OMI	TTTED 										
	Empl	loyer Na	ame/Add	ress		D	ATA OMITTED							Business Phone				
	VYR	.   M	ake	Model	St	yle	Color Lic/Lis Vin						Vin					
O T																		
Н																		
E R																		
S																		
	DATA OMITTED																	
I N																		
V																		
O L																		
V E																		
D																		
Status	L = L	ost S	= Stolen	R = Recovered	D = 1	Damaged	Z = Seized	B = Bu	ırned	C = Cc	ounterfeit / F	orged	F = Found	d				
Codes	(Che	ck "OJ"		if recovered for oth														
P -	Victing #         DCI         Status         Value         OJ         QTY           1         43         4         1         1						Property Description							Mak	e/Mod		rial Number	
	1	43	4		WINDOW									DA	TA OMITTED			
					$\dashv$											IN	FOR FORMATION	
						+											SECURITY	
R O																	PURPOSES	
P : E :																		
R																	LY THE FIRST	
T Y					_												VE PROPERTY	
					-												SPLAYED ON	
																	C REPORTS	
		12C KEI OKTS																
			ehicles S	-		nber Veh	cles Recovere							a:				
ID	Office GIL		T. L. (	16374)	<b>)</b> #		Officer Sig	Officer Signature Supervisor Signature SOMERVILLE, T. J. (16036)										
			Signatur					Case Status Case Disposition:								,		
Status							☐ Further☐ Inact		gation	1	☐ Unfoun☐ Cleared		rest Loca	ated   Refuse	to Cod	Extra operate	adition Declined	
J	☐ Closed/Cleared ☐ Cleared by Arrest by And																	