I N	Agenc	y Name		VSTON-SALEN	OLICE	] IN	INCIDENT/INVESTIGATION							OCA 2443925					
C	ORI	NC					REPORT							Date / Time Reported SMTWT星S Month Day Yr Time					
D E	10		NC 034			X Att   At Found   SMTWTFS							TFS	12   06   2024  13:52 Hrs.					
N T	#1			, Shopliftir	ıg			X Att   At Found   S M T W T F S   Month Day Yr Time   12   06   2024   13:52   Hrs								Month Day Yr Time			
D	#2	Crime I	ncident	1 0	0				- 1	Location	of l	Incident						Offense Tract	
A T		'rime I	ncident					_	Com	100 H			Bv, W	inston-so	ılem N		7103 Victim Reside	322	
A	#3							☐ Att Premise Type ☐ Com								☐ Single Family ☐ Multi Family			
МО			d or Con MITTEI					-						Forcible Yes	X N/A	We	apon / Tools		
	# of Victims   Type   Person   X Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:															lcohol Use:			
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown															s Unknown			
V I		Victim/		igious L.E. Off Name (Last, First,			ity   Othe	er/Un	know	n 📗 🗖	_	ernal   Victim of		_	Other Race	<u> </u>		□N/A Resident Status	
C T	V1														race	Бел	To Offender		
I M				ΓA OMITTED								1,						☐ Non-Resident ☐ Unknown	
171	Home Address DATA OMITTED															Home Phone			
	Emplo	yer Na	me/Add	ATA OMI	TA OMITTED							Business Phone							
,	VYR	M	Model	Color Lic/Lis Vin						Vin									
O T																			
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S																			
I	DATA OMITTED																		
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Ö	v O																		
V																			
E D																			
Status Codes																			
Cours	Victim			Property Description								Mal	e/Mo	odel Se	rial Number				
- - P -	#	# DCI Status Value OJ QTY						Troperty Description							Iviar	C/IVIC		TA OMITTED	
																	-	FOR	
					$\dashv$													FORMATION SECURITY	
R O					$\dashv$													PURPOSES	
P :																			
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Т Ү .					_													VE PROPERTY ITEMS ARE	
-					$\dashv$									+				SPLAYED ON	
•					$\neg$												P	2C REPORTS	
				. 1	Ţ		1 5	1											
	Office	r	ehicles S	ID		nber Vehic	cles Recovere Officer Sig		<i>0</i>				I	Supervisor	Signat	ıre			
ID	PHI.	LLIPS		(16316)		$\mathcal{C}$													
	Comp	iainant	Signatur	ē.			☐ Further							□ Loc	Located   Extradition Declined				
Status							Closed						rrest Refuse to Cooperate rrest by Another Agency reder Prosecution Declined Page 1						