I N	Agenc	y Name		NSTON-SALEN	OLICE	IN	INCIDENT/INVESTIGATION							OCA 2443965					
C ·	ORI	NG				REPORT								Date / Time Reported S M T W T F S Month Day Yr Time					
D E	10		NC 034			☐ Att At Found SMTWTES Month Day Yr Time							12 06 2024 19:05 Hrs.						
N T	#1	iiiic ii	icident(s) Drug Violai	tion	S		_	Com	Month 12				ime 1:05 Hrs				Time $19:04$ Hrs.	
D .	#2	Crime I	ncident	27118 7101111					_	Location			19	.03 1115	12	(0 2024	Offense Tract	
A	☐ Com 100 Edgeway Dr/w I														nston-			321	
T A	#3	rime I	ncident						Att Com	Premise	ype					- 1	Victim Resid Single Fan	ence 1ype ily	
МО			d or Com		Forcible ☐ Yes ☐ No						Weapon / Tools								
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															Alcohol Use:			
* 7	1			ciety Governm	ent	□ F:	inancial Instit		len ove			n Bone		Severe			. –	es Unknown	
V I															Other				
C T	V1			ΓA OMITTED	Crime #					. 8			To Offende						
I M			DA.	IA OMITIED	1,										☐ Non-Resident				
141	Home Address DATA OMI'									TTED .						Home Phone			
•	Employer Name/Address DATA OM														Business Phone				
	VYR	Model	Color Lic/Lis Vin						Vin										
				l					<u> </u>										
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I N	DATA OMITTED																		
V	· V																		
O L																			
V E																			
D																			
Status Codes	L = L	ost S k "OJ"	= Stolen column i	R = Recovered for other	D = i	Damaged isdiction)	Z = Seized	B =	Burn	ed C = C	Counter	rfeit / F	orged	F = Foun	d				
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo	del S	erial Number	
- - P -	π														171411	.0, 1,10		ATA OMITTED	
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					\dashv													NFORMATION SECURITY	
R O																		PURPOSES	
Р ⁻ Е -																			
R																		NLY THE FIRST	
T Y																	TWE	LVE PROPERTY ITEMS ARE	
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-	NI '	on -£ 77	abi-1- C	tolon 0	N.	mbos V 1	alas D	a	0										
	Office	r	ehicles S	ID		nder Vehic	cles Recovere Officer Sig		e e				I	Supervisor					
ID	SNII	DER, 2	A. P. (1	(6152)		FLYN							N, J. L. (15605)						
	Comp	aınant	Signatur	e		er Investigation Unfounded Loc						ated		□ Ex	tradition Declined				
Status										ive Cleared by Arrest I						Refuse to Cooperate			
							Closed			hausted				nder \Box				Page 1	