I N	Agenc	y Name		NSTON-SALEN	OLICE	, IN	INCIDENT/INVESTIGATION								OCA 2444036			
C ·	ORI	NG				OLICE	REPORT								Date / Time Reported SMTWTFS			
D E	10		NC 034			I D A# A+ E0.104 인제 커 II 먼								12 07 2024 14:20 Hrs.				
N T	#1	Jimic I	neideni(s	Arson	_	Att At Found S M T W T F S Last Known Secure S M T W T F S Last Known Secure S M T W T I M S Last Known Secure S M T W T I M S Last Known Secure S M T W T I M S Last Known Secure S M T W T I M S Last Known Secure S M T W T I M S Last Known Secure S M T W T F S Last Known Secure S M T W T F S Last Known Secure S M T W T F S Last Known Secure S M T W T F S Last Known Secure S M T W T F S Last Known Secure S M T W T F S Last Known Secure S M T W T F S Last Known Secure S M T W T F S Last Known Secure S M T W T F S Last Known Secure S M T W T F S Last Known Secure S M T W T F S Last Known Secure S M T W T F S Last Known Secure S M T W T W T F S Last Known Secure S M T W T W T T W T S Last Known Secure S M T W T W T T W T S Last Known Secure S M T W T W T T W T S Last Known Secure S M T W T W T T W T S Last Known Secure S M T W T W T T W T S Last Known Secure S M T W T W T W T S Last Known Secure S M T W T W T W T W T S Last Known Secure S M T W T W T W T W T W T W T W T W T W T												
D .	#2	Crime I	ncident	1115011		\rightarrow	Location			+ 15	1.20 1113	12	10	77 2022				
A	Com 758 Clemmonsville Cr, Winston-sales																	212
T A	#3 Crime Incident Premise Type															- 1		dence Type nily
МО			d or Com				☐ Yes						Forcible Yes					
																Alashal Usar		
	# of Victims Type Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use: Drug/Alcohol Use: Property Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use: Property Person Person																	
V				igious L.E. Of			uty Othe	er/Un	know	n _				nscious	Other	Majo	r 🔼	No □N/A
I C	Victim/Business Name (Last, First, Middle) Victim of Crime # J88														Race		Relationsh To Offende	
T I	VI DATA OMITTED											1,			$\mid B \mid$	$_F$	1PA	☐ Non-Residen ☐ Unknown
М -	Home	Addre	ess		LLE	TFD						Home Phone			_ Clikilowii			
	Employer Name/Address DATA OM DATA OM														Business Phone			
	VYR	M	Model							Vin								
O T H E R S I N V O L V E D	DATA OMITTED																	
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column i	R = Recovered if recovered for other	D = I er juri	Damaged isdiction)	Z = Seized	B =	Burn	ed $C = 0$	Cour	nterfeit / F	orged	F = Found	i			
	Victim #		Pro	perty	Description	on				Mak	e/Mo	del	Serial Number					
- - P - R	1								CTURES - SINGLE OCCUPANCY DWELLING								I	DATA OMITTED
		- 													FOR INFORMATION			
					_													SECURITY
0																		PURPOSES
Р ⁻ Е -																		
R.																		ONLY THE FIRST ELVE PROPERTY
T Y					_												1 W I	ITEMS ARE
					\dashv													DISPLAYED ON
-																		P2C REPORTS
-					\Box													
	Numb		ehicles S	tolen 0		nber Vehi	cles Recovere Officer Sig		0				-	Supervisor	Signat	ıre		
ID	RAY	, C. B	. (1635			Officer Sig	natur						NAVY,	or Signature Y, C. M. (15037)				
	Comp	lainant	Signatur	e	Case Statu	Status Case Disposition: Further Investigation Unfounded					☐ Located ☐ Extradition Declined							
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	tive /Clea	ıred		[Cleared	by A	rest by Ano	Refuse ther Ag	gency	ooperate	Page 1