I N	Agenc	y Name		STON-SALEN] IN	INCIDENT/INVESTIGATION							OCA 2444178						
C ·	ORI	NC			-	REPORT							Date / Time Reported SMTWTFS Month Day Yr Time						
D E	NC NC 0340200 Crime Incident(s)									☐ Att At Found						12 09 2024 00:28 Hrs. Last Known Secure SMT WTFS Month Day Yr Time			
N T	#1	inne n	icideiii(3	, Drug Violat	ions	7		ı —	Com	Month 12	Day			ime :28 Hrs			Day Yr 🖰	Time 00.27 Hrs.	
D .	#2	Crime I	ncident	27118 710101	1011	,			-	Location			00.	.20 1113	12	(Offense Tract	
A		· · ·						Creek	Pw/	hutton Si	t, Win.			412					
T A	#3	rime I	ncident						Att Com	Premise T	ype					- 1	Victim Reside Single Fam	nce Type ily ∏Multi Family	
МО			d or Com		Forcible ☐ Yes ☐ No						☐ Yes [Weapon / Tools							
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use															lcohol Use:			
	1			ciety Governm	ent	☐ Fi	inancial Institu		1	. –	Broken			□ Severe			. –	es Unknown	
V I															Other				
C T	Crime #													. 8			To Offender		
I M				IA OMITIED	1,										☐ Non-Resident				
141	Home Address DATA OMI									TTED						Home Phone			
	Employer Name/Address DATA OM								TTED							Business Phone			
	VYR	M	ake	Model	St	yle	Color		Lic	/Lis				Vin					
		<u> </u>																	
О																			
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	DATA OMITTED																		
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L																			
V E																			
D																			
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column i	R = Recovered for other	D = l r juri	Damaged isdiction)	Z = Seized	B =	Burn	ed $C = C$	ounterfe	eit / For	ged	F = Found	d				
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo	odel S	erial Number	
- - P - R													DA	ATA OMITTED					
					_												IN	FOR NFORMATION	
					_												- 11	SECURITY	
0																		PURPOSES	
Р ⁻ Е -																			
R T					_													NLY THE FIRST LVE PROPERTY	
Y ·					\dashv												1 WEI	ITEMS ARE	
-					\dashv												D	ISPLAYED ON	
-					\Box												I	P2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Nun	nber Vebi	cles Recovere	d	0										
_	Officer ID# Officer Signature Supervisor Signature																		
ID			<i>O, O. J</i> Signatur	(. (16254)	Case Status	COL							LIER, L. B. (15465)						
	Comp	umalit	orginatul (<u>-</u>	☐ Further	r Inve	Investigation Unfounded Located Ex							□ Ext	radition Declined				
Status							☐ Inact	ctive Cleared by Arrest Refuse to Coope						Г	Page 1				
							☐ Closed	/Lead	ıs Exl	nausted 1	\Box De	eath of C	Itter	nder 🗆	I Prosec	:11f10r	Declined L	rage I	