I N	Agenc	y Name		NSTON-SALEN	INCIDENT/INVESTIGATION							OCA 2444836							
C	ORI	NC	NC 02	10200			1	REPORT								Date / Time Reported SMTWTFS Month Day Yr Time			
D E			NC 034						A ++	At Foun	nd	SMTWTF Day Yr Time			12	2   13   2024  22:39 на			
N T	#1	inne n	icideiii(3	, Discharging F	irea	ırm			Com	Month 12	D			ime 2:39  Hrs			n Secure Day Yr !3   2024	Time	
D D	#2	Crime I	ncident	Discreti ging 1					-	Location			<u> </u>		12		3   2024	Offense Tract	
Α								_	Com				d/kes	ter Mill I	Rd, Wi			323	
T A	#3	Crime I	ncident						Att Com	Premise	Тур	pe				- 1	Victim Resid	ence Type ily ∏Multi Family	
	How A	Attacke	d or Com	mitted					Com					Forcible	I		apon / Tools	· ·	
МО	DATA OMITTED														Yes □X N/A   No				
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																		
V	1 Society Government Financial Institute Broken Bones Severe Lacerations Unknown Internal Unconscious Other Major No N/A															_			
I	1	Victim/		Name (Last, First,			пу 🔲 опи	<i>)</i> 1, C11	ikiio W	<u>"                                     </u>		Victim of		3 / Age	Race	<u> </u>		Resident Status	
C T	V1		DA	LY OWILLED	Crime #								To Offender	Resident Non-Resident					
I M																		Unknown	
111	Home	Addre	SS		ATA OMI	ITTED								Home Phone					
	Employer Name/Address DATA							A OMITTED							Business Phone				
	VYR	M	Color   Lic/Lis   Vin						Vin										
O T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes	(Chec	k "OJ"	= Stolen column i	R = Recovered for other	D = I r juri	Damaged sdiction)	Z = Seized	B =	Burn	ed C = 0	Cou	ınterfeit / F	orged	F = Foun	d				
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo	del S	erial Number	
- - P -													D	ATA OMITTED					
					$\dashv$												T	FOR NFORMATION	
					$\dashv$													SECURITY	
R O					$\dashv$													PURPOSES	
P :																			
R																		NLY THE FIRST	
Т Ү.					_												TWE	LVE PROPERTY	
					_													ITEMS ARE	
					$\dashv$													P2C REPORTS	
-					+														
-	Numb	er of V	ehicles S	tolen 0	Nun	nber Vehic	cles Recovere	d	0					<u>'</u>					
ID	Office:	RFII	ΔΙ	ID (16180)	Officer Sig	Officer Signature Supervisor Signature SOMERVILLE, T. J. (16036)													
ID	PERRELL, A. J. (16180)  Complainant Signature Case St														WILKVILLE, 1. J. (10030)				
Status	P		6				☐ Further ☐ Inact ☐ Closed ☐ Closed	r Inve ive /Clea	ared			☐ Unfoun☐ Cleared☐ Cleared☐	ded by Ai by Ai	Loc rest rest by And	Refuse other Ag	gency	ooperate	Page 1	