I N	Agenc	y Name	e WIN] IN	INCIDENT/INVESTIGATION							OCA 2444851							
C	ORI	NC	NC 034	10200			1	REPORT								Date / Time Reported SMTWTFS Month Day Yr Time			
D E			ncident(s			Att At Found SMTWTFS Month Day Yr Time								12 14 2024 03:24 Hrs.					
N T	#1		iioidoini(s	, Discharging F	`irea	ırm		ı —	Com	Month 12	Γ			ime 1:24 Hrs				Time 4 03:23 Hrs	
D	#2	Crime I	ncident						_		_	Incident	+ 0.	1.24	12		4 202	Offense Tract	
Α		· · ·						_	Com				l Bv/j	onestown	Rd,	1.	7' .' D	323	
T A	#3	Irime I	ncident						Att Com	Premise	Тур	pe				- 1		dence Type mily Multi Famil	
МО			d or Com									Forcible Yes	X N/A	We	apon / Too	ls			
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															/Alcohol Use:			
V I		liotim/		-			ity 🔲 Othe	er/Un	know	'n 🗆		ternal Vistim of			Other			No N/A ip Resident Status	
Ċ	Victim/Business Name (Last, First, Middle) Victim of Crime # DOB / Age Crime #														Race	sex	To Offend	er Resident	
T I	* 1		DA	ΓA OMITTED								1,						☐ Non-Residen	
M	Home Address DATA OMI															Home Phone			
	Employer Name/Address DATA ON															Business Phone			
	VYR	M							Vin										
O T H E R S I N V O L V E D							DATA												
Status Codes																			
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo	del	Serial Number	
P -														DATA OMITTED					
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•	Numb	er of V	ehicles S	tolen 0	Nun	nber Vehic	cles Recovere	d	0										
ID	Office	r PEII	A 1	ID (16180)	Officer Sig	Officer Signature Supervisor Signature SOMERVILLE, T. J. (16036)										36)			
ID			<i>J., A. J.</i> (Signature	(16180) e			Case Status	s			(Case Dispos	sition:	SUME	ı v ILL	ι <u>ι</u> , Ι	. J. (100.	<i></i>	
Status	-omp		<u>-</u>				☐ Further ☐ Inact ☐ Closed ☐ Closed	r Inve ive /Clea	ıred			☐ Unfoun	ded by Ai by Ai	rest by And] Refuse other Ag	gency	ooperate	extradition Declined Page 1	