| I<br>N                                    | Agenc  | y Namo  |           | VSTON-SALE           | M Pi    | OLICE     | INCIDENT/INVESTIGATION                      |                            |           |                      |                   | <b>I</b>        | OCA 2444877   |                  |                            |                    |  |  |  |
|---|--|---|-----------|----------------------|---------|-----------|---|----------------------------|-----------|----------------------|-------------------|-----------------|---|------------------|----------------------------|--------------------|--|--|--|
| С   | ORI  |   | ,,,,,,    |                      |         |           | Att At Found SMTWTFS<br>Month Day Yr Time   |                            |           |                      |                   |                 | Date / Time Reported S M T W T F S<br>Month Day Yr Time |                  |                            |                    |  |  |  |
| I<br>D                                    |  | NC  | NC 034    | 40200                |         |           |   |                            |           |                      |                   |                 | Month Day Yr Time<br>12   14   2024  10:25 Hrs.         |                  |                            |                    |  |  |  |
| E<br>N                                    |  | Crime I   | ncident(s | )                    |         |           |   |                            |           |                      |                   |                 | Last Known Secure SMTWTFS                               |                  |                            |                    |  |  |  |
| T   | #1   |   |           | Larceny- Ali         | Oth     | er        | <b>X</b> Com 12   14   2024   10:25   H:    |                            |           |                      |                   |                 |   |                  |                            | Time<br>10:24 Hrs. |  |  |  |
| D   | #2   | Crime I   | ncident   |                      |         |           |   | 🗆 Att                      |           | of Incident          |                   |                 |   |                  |                            | Offense Tract      |  |  |  |
| A   | Crime Incident   |   |           |                      |         |           |   |                            |           |                      |                   |                 |   |                  |                            | 222                |  |  |  |
| T<br>A                                    | #3   | _rime i   | ncident   |                      |         |           | ☐ Att Premise Type<br>☐ Com                 |                            |           |                      |                   |                 | Victim Residence Type<br>☐ Single Family ☐ Multi Family |                  |                            |                    |  |  |  |
|   | How A  | Attacke   | d or Con  | mitted               |         |           |   |                            |           |                      |                   | Forcible        |   | Weapon           | -                          |                    |  |  |  |
| MO  | D  | ATA O   | MITTEI    | )                    |         |           |   |                            |           |                      |                   | □ Yes [<br>□ No | X N/A   | 1                |                            |                    |  |  |  |
|   | # of V   | victims   | Туре      | X Person             |         | Business  |   |                            | Injur     | y □ None             |                   |                 | Loss of '   | Teeth            | Drug/A                     | lcohol Use:        |  |  |  |
|   | Society Government Financial Institute Broken Bones Severe               |   |           |                      |         |           |   |                            |           |                      |                   |                 |   |                  | e Lacerations  Yes Unknown |                    |  |  |  |
| V   | I Religious L.E. Officer Line of Duty Other/Unknown Internal Unconscious |   |           |                      |         |           |   |                            |           |                      |                   |                 |   |                  | Other Major No N/A         |                    |  |  |  |
| I<br>C                                    |  | Victim/   | Business  | Name (Last, First,   | Midd    | le)       |   |                            |           | Victim of<br>Crime # | DOB /             | Age<br>66       | Race S  |                  | tionship<br>Offender       |                    |  |  |  |
| T<br>I                                    | V1   |   | DA        | <b>FA OMITTED</b>    |         |           |   |                            |           |                      | 00                |                 |   |                  | Non-Residen                |                    |  |  |  |
| M   |  | e Addre   |           |                      |         |           | 1,  |                            |           |                      |                   |                 |   |                  | RU                         | Unknown            |  |  |  |
|   | Home   | e Addre   | ess       |                      |         | D         | ATA OMI                                     | ATA OMITTED                |           |                      |                   |                 | Home Phone  |                  |                            |                    |  |  |  |
|   | Empl   | oyer Na   | ame/Add   | ress                 |         | D         | ATA OMITTED                                 |                            |           |                      |                   |                 | Business Phone  |                  |                            |                    |  |  |  |
|   | VYR  | ΙM  | ake       | Model                | St      | vle I     |   |                            |           |                      |                   | Vin             |   |                  |                            |                    |  |  |  |
|   | , IK   |   | une       | linder               | J.      | , ie      | Color                                       |                            | C/ 115    |                      |                   | v III           |   |                  |                            |                    |  |  |  |
| E<br>R<br>S<br>V<br>O<br>L<br>V<br>E<br>D |  | DATA OMITTED  |           |                      |         |           |   |                            |           |                      |                   |                 |   |                  |                            |                    |  |  |  |
| Status                                    | L = L  | ost S   | = Stolen  | R = Recovered        | D = 1   | Damaged   | Z = Seized                                  | B = Bur                    | ned C =   | Counterfeit / F      | Forged            | F = Found       | 1   |                  |                            |                    |  |  |  |
| Codes                                     | (Chec<br>Victim  | k "OJ"  | column    | if recovered for oth | er juri | sdiction) |   |                            |           |                      |                   |                 |   |                  |                            |                    |  |  |  |
|   | #  | DCI   |           | Value                | OJ      | QTY       |   | 1 2                        | Descripti | on                   |                   |                 |   | /Model           |                            | erial Number       |  |  |  |
|   | 1  |   |           |                      |         |           |   | WHEEL CHAIR<br>WHEEL CHAIR |           |                      |                   |                 |   | IM<br>IM         | DA                         | TA OMITTED         |  |  |  |
|   | 1  | 77  | 5         |                      |         | 1 1       | WHEEL CHAI                                  | IK                         |           |                      |                   | (               | QUANTU  | /M               | IN                         | FOR<br>FORMATION   |  |  |  |
| P ·                                       |  |   |           |                      |         |           |   |                            |           |                      |                   |                 |   |                  | 11                         | SECURITY           |  |  |  |
| R.<br>O                                   |  |   |           |                      |         |           |   |                            |           |                      |                   |                 |   |                  |                            | PURPOSES           |  |  |  |
| P.  |  |   |           |                      |         |           |   |                            |           |                      |                   |                 |   |                  |                            |                    |  |  |  |
| E ·<br>R                                  |  |   |           |                      |         |           |   |                            |           |                      |                   |                 |   |                  | ON                         | ILY THE FIRST      |  |  |  |
| Т   |  |   |           |                      |         |           |   |                            |           |                      |                   |                 |   |                  | TWEL                       | VE PROPERTY        |  |  |  |
| Y .                                       |  |   |           |                      |         |           |   |                            |           |                      |                   |                 |   |                  |                            | ITEMS ARE          |  |  |  |
| -   |  |   |           |                      |         |           |   |                            |           |                      |                   |                 |   |                  |                            | ISPLAYED ON        |  |  |  |
| -   |  |   |           |                      |         |           |   |                            |           |                      |                   |                 |   |                  | F                          | 2C REPORTS         |  |  |  |
| -   | Numb   | Number of Vehicles Stolen 0 Number Vehicles Recovered 0 |           |                      |         |           |   |                            |           |                      |                   |                 |   |                  |                            |                    |  |  |  |
|   | Office   | r   |           | <br>                 | D#      |           | Officer Sig                                 | . 0                        |           |                      | S                 | upervisor       | Signatur  | e                |                            |                    |  |  |  |
| ID  | MO   | ONEY  |           | (15484)              |         |           |   |                            |           |                      |                   | CLARK           | , Ď. C.   | (15090           | ))                         |                    |  |  |  |
| Status                                    | Comp   | iainant   | Signatur  | e                    |         |           | Case Status<br>Further<br>X Inact<br>Closed | r Investiga<br>ive         | tion      | Case Dispos          | nded<br>1 by Arre |                 | Refuse t  | to Cooper        | Extrate                    | radition Declined  |  |  |  |
|   |  |   |           |                      |         |           | Closed                                      |                            | hausted   | Cleared              |                   |                 |   | ncy<br>tion Decl | lined                      | Page 1             |  |  |  |