I N	Agenc	y Name		VSTON-SALEN	OLICE	] IN	INCIDENT/INVESTIGATION							OCA 2444911					
C	ORI	NC	NC 034	10200			1	REPORT								Date / Time Reported S M T W T F S Month Day Yr Time			
D E			ncident(s		<u> </u>	Att At Found SMTWTFS Month Day Yr Time								12   14   2024   15:43 Hrs.  Last Known Secure SMTWTFS  Month Day Yr  Time  Time  Time  Time  Time					
N T	#1			Aggravated A	ssau	elt		ı —	Com	Month 12	Day 14			ime :43  Hrs				Time 15:42  Hrs.	
D	#2	Crime I	ncident			ı —	Att Location of Incident Offens									Offense Tract  114			
A T	#3	Crime I	ncident				_	Att Premise Type						uem r	Victim Residence Type				
A		\	d or Com				Com						F'l-1-	☐ Single Family ☐ Multi Family  Weapon / Tools					
MO			MITTEE				☐ Ye							Forcible  Yes  No					
V	# of Victims   Type   None   Minor   Loss of Teeth   Drug/Alcohol Use:																		
	I       □ Society       □ Government       □ Financial Institute       □ Broken Bones       □ Severe Lacerations       □ Yes       □ Unknow         □ Religious       □ L.E. Officer Line of Duty       □ Other/Unknown       □ Internal       □ Unconscious       ▼ Other Major       ▼ No       □ N/A															_			
I C		Victim/		Name (Last, First,										Relationship					
T I	V1		DA	ΓΑ OMITTED		1,						30	W	M	1RU	Non-Residen			
M	Home Address														\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		ne Phone	Unknown	
	DATA C								MITTED						Business Phone				
,	•				ATA OMITTED							***	Dustriess Friorie						
	VYR	М	ake	Model	Sty	le	Color		Lic	/Lis				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 frecovered for other	D = D r juris	Damaged sdiction)	Z = Seized	B =	Burn	ed C = 0	Count	terfeit / F	orged	F = Found	i 				
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo		rial Number	
- P - R _													DA	TA OMITTED FOR					
																	IN	FORMATION	
																		SECURITY	
O P .					_													PURPOSES	
Е.					_												ON	ILY THE FIRST	
R T					+													VE PROPERTY	
Υ .																		ITEMS ARE	
																		SPLAYED ON	
					_												P	2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Num	ber Vehic	cles Recovere	d	0										
	Office	r		ID		, cinc	Officer Sig		-					Supervisor	Signatu	ire	4 (1515 <del>5</del> )		
ID			. <i>O.</i> (1. Signature			Case Status							MATTI	MATTISŎN, G. M. (15167)					
Status	Comp	iamant	Signatur				☐ Further ☐ Inact ☐ Closed ☐ Closed	r Inve ive /Clea	red			] Unfoun ] Cleared ] Cleared	ded by Ar by Ar	Locarest Drest by Ano	Refuse ther Ag	gency	ooperate	Page 1	