I N	Agenc	y Name		ISTON-SALEN	OLICE	INCIDENT/INVESTIGATION						OCA 2444961							
I C	ORI	NC	NC 034	10200			REPORT							Date / Time Reported SMTWTFS Month Day Yr Time					
D E			ncident(s			Att At Found SMTWTFS Month Day Yr Time							12   15   2024   01:32 Hrs.   Last Known Secure						
N T	#1			Discharging F	irea	rm		_	Com	Month 12			lime 1:32   Hrs			Day Yr 🗀	Time $01:31$ Hrs.		
D .	#2	Crime I	ncident						Att	Location	of Incident	·	•			<del>-  </del>	Offense Tract		
A T		'rime I	ncident						Com	299 E	Twenty-for	urth S	St/n Patte	rson A		Victim Resider	121		
A	#3	Jime i	nerdent					☐ Att   Premise Type ☐ Com						☐ Single Family ☐ Multi Family					
МО			d or Com MITTEE						•				Forcible Yes	X N/A	We	apon / Tools			
	# of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:															cohol Use:			
V I		Victim/		igious L.E. Off Name (Last, First,			ity   Othe	er/Unl	know	n	Internal  Victim of		scious E	Other Race			□N/A Resident Status		
C T	V1	v ictiii/			viidai						Crime #	1001	o / Age	Race	Sex	To Offender	☐ Resident		
I	, ]		DA	ΓA OMITTED		1,									☐ Non-Resident ☐ Unknown				
М -	Home Address DATA OMI									TTED					Home Phone				
	E1 N/A dd							OMITTED						Business Phone					
•	VYR	M	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	L = L (Chec	ost S k "OJ"	= Stolen column i	R = Recovered for other	D = D r juris	Damaged sdiction)	Z = Seized	B =	Burn	ed $C = C$	ounterfeit / I	Forged	F = Foun	d					
	Victim # DCI Status Value OJ QTY						Property Description							Mak	e/Mo	del Se	rial Number		
- - P - R																DA	TA OMITTED		
					+											IN	FOR FORMATION		
					+												SECURITY		
0																	PURPOSES		
Р <sup>-</sup> Е -																			
R.					_												LY THE FIRST		
Т Ү					+												VE PROPERTY ITEMS ARE		
-					+												SPLAYED ON		
-					+												2C REPORTS		
-																			
			ehicles S			ber Vehic	cles Recovere		0										
ID	Office: BAL		G. (163	77)		Officer Sig								or Signature GHEGAN, M. R. (16168)					
	Complainant Signature Case								ase Status Case Disposition:										
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	tive /Clea	red			l by Aı l by Aı	Test by Ander	Refuse other Ag	gency	ooperate	adition Declined Page 1		