I N	Agenc	y Name		VSTON-SALEN	1 PC	OLICE] IN	INCIDENT/INVESTIGATION							OCA 2444963					
I C	ORI	NC	NC 03/	10200			1	REPORT							Date / Time Reported SMTWTFS Month Day Yr Time					
D E	NC NC 0340200 Crime Incident(s)						Att At Found								12 15 2024 02:23 Last Known Secure					
N T	#1			Trespassi	Att At Found S M T W T F S Yr Time T S 2024 02:23 Hrs								Month Day Yr Time							
D .	#2	Crime I	ncident	*		Att	Location	of Ir	ncident					•		Offense Tract				
A T		'rime I	ncident					_	Com	5034 F			Vinst	on-salem	NC 2		Victim Re	siden	124	
A	#3	Jime I	nerdent					☐ Att Premise Type ☐ Com								☐ Single Family ☐ Multi Family				
МО			d or Com MITTED					•					Forcible Yes	X N/A	We	apon / To	ols			
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/															ıg/Ald	cohol Use:	\dashv		
	Z Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown															<i>w</i> n				
V I		Jictim/		igious L.E. Off Name (Last, First,			ity Othe	er/Un	know	n 🗆	_	rnal victim of			Other Race			No hin	□N/A Resident Sta	tue
C T	V1	v ictiii/				Victim of Crime # DOB / Age				Race	ЗСХ	To Offen	der	☐ Resident						
I	,]		DA	ΓA OMITTED								1,							☐ Non-Resi	
М -	Home Address DATA OMI									TTED						Home Phone				
	Employer Name/Address DATA							TA OMITTED							Business Phone					-
	VYR Make Model Style						Color Lic/Lis Vin						Vin							
H E R S I N V O L V E D	DATA OMITTED																			
Status Codes																				
Cours	Victim # DCI Status Value OJ QTY						Property Description								Mak	Iake/Model Serial Number				\neg
	#	" Toperly Bescripton									- Triun	C/ 1110	der		ГА ОМІТТЕ	D				
P - R - O																		TATI	FOR	
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ID	SCH	AEFI		S. (16050)		ĞEG							sor Signature OGHEGAN, M. R. (16168)							
	Comp	ainant	Signatur	e	Case Status							□ Loc	Located Extradition Declined							
Status							☐ Inact	ive /Clea	ared			Cleared Cleared	by Ar	rest Esc rest by And	Refuse other Ag	gency	ooperate	_	Page 1	_