I N	Agenc	y Name		NSTON-SALEN	1 P	OLICE] IN	INCIDENT/INVESTIGATION						OCA 2445132				
C ·	ORI	NC					REPORT							Date / Time Reported SMTWTFS Month Day Yr Time				
D E	10		NC 034				Att At Found SMTWTFS Month Day Yr Time							12 16 2024 16:03 Hrs.				
N T	#1		ioraem(o	, Trespassi	ng			DX (- 1	Month 12			ime $5:03$ Hrs			Day Yr 🖰	Time $16:02$ Hrs.	
D.	#2	Crime I	ncident		0				- 1	Location	of Incident	•	•				Offense Tract	
A T	Colors Incident												King Jr D	r, Win		<i>-salem</i> Victim Reside	221	
A	#3							֝֝֟֜֝֓֜֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓		110111190 1) PC				- 1		ily □Multi Family	
МО			d or Com MITTED						-				Forcible Yes No	X N/A	We	apon / Tools		
	# of Victims Type Person Minor Loss of Teeth Drug/Alcohol Use:															lcohol Use:		
V	2 Society Government Financial Institute Broken Bones Severe Lacerations Wes Unknown Internal Unconscious Other Major No NA															_		
V I																Relationship	Resident Status	
C T	V1		DA	ΓΑ OMITTED							Crime #					To Offender		
I M ·											1,						Unknown	
	Home Address DATA OM								ITTED						Home Phone			
	Emplo	yer Na	me/Addi	ress	D.	ATA OMI	TA OMITTED						Business Phone					
	VYR	M	ake	Model	Sty	yle	Color		Lic	/Lis			Vin					
T H E R S I N V O L V E D	DATA OMITTED																	
Status Codes	L = L	ost S	= Stolen	R = Recovered	D = I	Damaged	Z = Seized	B =	Burn	C = C	ounterfeit / F	orged	F = Foun	d				
	Wictim # DCI Status Value OJ QTY						Property Description							Mak	e/Mo	del S	erial Number	
- - P - R	π	π 201 Saatus Value 03 Q11						Property Bescription									ATA OMITTED	
					_											IN	FOR NFORMATION	
					_											- 11	SECURITY	
0																	PURPOSES	
Р ⁻ Е -																		
R T					_												NLY THE FIRST LVE PROPERTY	
Y					+											TWE	ITEMS ARE	
-																D	ISPLAYED ON	
																I	2C REPORTS	
-	Numl	or of V	ehicles S	tolen 0	None	ober Val	cles Recovere	d	0									
	Office	r		ID		noer venic	Officer Sig		0 e				Supervisor					
ID	HAS			GOI						DON, J. G. (15435)								
Status	Comp	ainant	Signatur	e			☐ Further ☐ Inact ☐ Closed	☐ Inactive ☐ Cleared by Arrest ☐ Refuse to Cooperate ☐ Closed/Cleared ☐ Cleared by Arrest by Another Agency							ooperate	Page 1		
							☐ Closed	/Lead	s Exh	austed L	□ Death c	or Offe	nder \Box	1 Prosec	cution	Declined	Page 1	