I N	Agenc	y Name		VSTON-SALEN] IN	INCIDENT/INVESTIGATION							OCA 2445501							
I C	ORI	NC	NC 03/	10200			1	REPORT								Date / Time Reported S M T W F S Month Day Yr Time				
D E	NC NC 0340200 Crime Incident(s)									Att At Found SMTWIFS Month Day Yr Time							12 19 2024 10:43 Hrs. Last Known Secure SMTWIFS SMTW			
N T	#1			Trespassi	ng				Com	Month 12				ime):43 Hrs				Time 10:42 Hrs.		
D	#2	Crime I	ncident				Location		Incident		•			•	Offense Tract					
A T															/C 2/1		Victim Resid	312 lence Type		
A								Com							☐ Single Family ☐ Multi Family					
МО			d or Con MITTEI											Forcible Yes No	X N/A	We	apon / Tools	1		
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																			
V	Religious ☐ L.E. Officer Line of Duty ☐ Other/Unknown ☐ Internal ☐ Unconscious ☐ Other Major ☐ N/A															Yes □Unknown				
I C	Victim/Business Name (Last, First, Middle) Victim of I													3 / Age	Race		Relationshi	p Resident Status		
T	V1		DA	ΓA OMITTED			Crime #								To Offende	Resident Non-Resident				
I M ·	Ноте	Addro	e e		1,								Hon	ne Phone	Unknown					
	Home Address DATA OMI									TTED										
	Employer Name/Address DATA (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 (Chec	ost S k "OJ"	= Stolen column i	R = Recovered for other	D = E r juri:	Damaged sdiction)	Z = Seized	B =	Burn	ed C = 0	Cou	ınterfeit / F	orged	F = Foun	d					
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo	del	Serial Number		
- - P - R -														OATA OMITTED						
																		FOR INFORMATION		
																		SECURITY		
O P -																		PURPOSES		
Ē -														+				NLY THE FIRST		
R T Y					+													LVE PROPERTY		
																		ITEMS ARE		
																		DISPLAYED ON		
-					_													P2C REPORTS		
-	Numb	er of V	ehicles S	tolen 0	Num	nber Vehic	cles Recovere	d	0											
	Office	r		ID				Officer Signature Supervisor Signature												
ID	MEA, A. N. (15205) Complainant Signature Case								Status Case Disposition:						URKS, C. M. (15216)					
Status	P		G				☐ Further ☐ Inact ☐ Closed	r Inve tive /Clea	ıred			☐ Unfoun☐ Cleared☐ Cleared☐	ded by Ai by Ai	Test by And	Refuse other Ag	gency	ooperate	tradition Declined Page 1		