I N	Agenc	y Nam		NSTON-SALEN	CIE	CIDENT/INVESTIGATION						OCA 2445596									
C	ORI REPORT														Date / Mon	Date / Time Reported SMTWTFS Month Day Yr Time					
D E		Crime Incident(s)							☐ Att   At Found								12   20   2024  00:53 Hrs.				
N T	#1			, Drug Viola		Att   At Found   S M T W T F S   M T W T F S   M T W T F S   M T W T F S   M T W T F S   M T W T F S S   M T W T F S S   M T W T F S S   M T W T F S S S S S S S S S S S S S S S S S S							Month Day Yr Time								
D	#2	Crime I	ncident			Att	Location	of Inc	cident	·	•	•		20   202		ffense T					
A T	Crime Indiana																Viotim Do	idon	122		
A	#3	Jillie I	ncident		☐ Att Premise Type ☐ Com							Victim Residence Type  ☐ Single Family ☐ Multi Family									
МО			d or Con MITTEI		Forcible Yes						Weapon / Tools										
	# of V	ictims	**	Person		Business				Injury	′ <u></u>	None			] Loss o	f Tee	th Dru	g/Alc	ohol Use	e:	
V	1 Society Government Financial Institute Broken Bones Severe Lacerations Wes Unknown Internal Unconscious Other Major																				
I		Victim/		Name (Last, First,				21/ (31)	KIIOW	<u>"                                     </u>		ctim of		B / Age	Race		Relations	hip	Resident	Status	
C T																	To Offen		☐ Resid		
I M											1	',2							Unkn		
	Home Address DATA OMIT									ГТЕD						Home Phone					
	Employer Name/Address DATA OMIT									TTED						Business Phone					
,	VYR	Color	Color Lic/Lis Vin						Vin												
O T																					
H E																					
R S																					
Б	DATA OMITTED																				
I N	DATA OMITTED																				
V	N V																				
O L																					
V E																					
D																					
Status Codes																					
Coucs	Victim				Property Description								M-1	lake/Model Serial Number							
	#	# DCI Status Value OJ QTY   80 OTHE   1 WEAPONS														DATA OMITTED					
	1	1 11 6 1 DRUGS/NARCOTICS EQUIPMENT													FOR						
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ID	Office WIS		A. (162	72) ID		Officer Sig	natur 	nature Supervi						or Signature (E, V. N. (15139)							
			Signatur				Case Statu		Case Disposition:								C 37-4	dition D	valima 1		
Status					tive									uiuon De	cimed						
	Closed/Cleared Clear													rest by And	other Ag	gency			Page	1	