| I N | Agenc | y Name | | STON-SALEN | OLICE | IN | INCIDENT/INVESTIGATION | | | | | | | OCA 2445941 | | | | | |
|-----------------------|---|--|--------------------|---------------------------------|----------------------|--------------------------|---|---------------------------------------|------------|----------|-----------------------------------|--------------------|--------------------------------|--|---|---------------|-----------------|------------------------------------|--|
| C · | ORI | NG | | | | 02102 | | REPORT | | | | | | | Date / Time Reported SMTWTFS Month Day Yr Time | | | | |
| D E | 10 | | NC 034 | | | | Att At Found SMTWTFS Month Day Yr Time | | | | | | | 12 22 2024 19:06 Hrs. Last Known Secure S M T W T F S Month Day Yr Time | | | | | |
| N T | #1 | Jimic II | icident(s | , Trespassi | ng | | | | Com | Month 12 | D | | | ime 0:06 Hrs | | | | Time $ 4 19:05 $ Hrs | |
| D . | #2 | Crime I | ncident | Trespussi | 18 | | | | _ | Location | | | + 15 | .00 | 3 12 | | 22 2022 | Offense Tract | |
| A | Com 412 E Hanes Mill Rd, Winston-san | | | | | | | | | | | | | | | | | 124 | |
| T A | #3 | Jrime I | ncident | | | | | | Att Com | Premise | Тур | pe | | | | | Victim Resion | nily Multi Family Multi Family | |
| МО | | | d or Con MITTEI | | | | • | | | | | Forcible Yes | X N/A | We | apon / Tool | S | | | |
| | # of V | ictims | Туре | ☐ Person | ו אר | Business | | | | Injur | y | ☐ None | | □ No | Loss o | f Tee | th Drug | Alcohol Use: | |
| | 2 Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow | | | | | | | | | | | | | | | _ | | | |
| V I | | Victim/ | | | | | ity Othe | er/Un | know | 'n 🗆 | | ternal Victim of | | | Other Race | <u> </u> | | | |
| C T | V1 Crime # | | | | | | | | | | | | | | Race | BCA | To Offende | Resident | |
| I | | | DA | ΓA OMITTED | | | | | | | | 1, | | | | | | ☐ Non-Residen ☐ Unknown | |
| М - | Home Address DATA OMI | | | | | | | | | TTED | | | | | | Home Phone | | | |
| | Emplo | me/Add | ATA OMI | A OMITTED | | | | | | | | Business Phone | | | | | | | |
| | VYR | M | Color Lic/Lis Vin | | | | | | | Vin | | | | | | | | | |
| | | | | | <u> </u> | | | | | | | | | | | | | | |
| O | | | | | | | | | | | | | | | | | | | |
| T H | | | | | | | | | | | | | | | | | | | |
| E | | | | | | | | | | | | | | | | | | | |
| R S | R S | | | | | | | | | | | | | | | | | | |
| | DATA OMITTED | | | | | | | | | | | | | | | | | | |
| I N | DATA UNITIED | | | | | | | | | | | | | | | | | | |
| V | | | | | | | | | | | | | | | | | | | |
| O L |) | | | | | | | | | | | | | | | | | | |
| V E | | | | | | | | | | | | | | | | | | | |
| D | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| Status Codes | | | | | | | | | | | | | | | | | | | |
| Cours | Victim | | Status | | Property Description | | | | | | | | Mal | ce/Mo | vdel | Serial Number | | | |
| - - P - | # | # DCI Status Value OJ QTY Property Description | | | | | | | | IVICI | C/ 141C | | DATA OMITTED | | | | | | |
| | | | | | | | | | | | | | | | | | | FOR | |
| | | | | | _ | | | | | | | | | | | | | INFORMATION SECURITY | |
| R O | | | | | \dashv | | | | | | | | | | | | | PURPOSES | |
| Р - | | | | | | | | | | | | | | | | | | | |
| E - R ₋ | | | | | | | | | | | | | | | | | (| ONLY THE FIRST | |
| Т Ү - | | | | | | | | | | | | | | | | | TWI | ELVE PROPERTY | |
| ٠. | | | | | | | | | | | | | | | | | | ITEMS ARE DISPLAYED ON | |
| - | | | | | \dashv | | | | | | | | | | | | | P2C REPORTS | |
| - | | | | | | | | | | | | | | | | | | | |
| | Number of Vehicles Stolen 0 Number Vehicles Recovered 0 Officer ID# Officer Signature Supervisor Signature | | | | | | | | | | | | | | | | | | |
| ID | Office TAY | r <i>LOR</i> , | Officer Sig | Officer Signature Supervise CLA | | | | | | | or Signature RK, D. C. (15090) | | | | | | | | |
| | Comp | lainant | Signatur | e | Case Statu | Status Case Disposition: | | | | | | | Located Extradition Declined | | | | | | |
| Status | | | | | | Inact | ☐ Further Investigation ☐ Unfounded ☐ Located ☐ Inactive ☐ Cleared by Arrest ☐ Refi | | | | | | | Refuse | e to C | Cooperate | raamuon Decimed | | |
| | | | | | | | | Closed/Cleared Cleared by Arrest by A | | | | | | | Another Agency Prosecution Declined Page 1 | | | | |