I N	Agenc	y Nam		NSTON-SALE	CM F	POLICE	REPORT						OCA 2446455					
C I	ORI												Date / Time Reported S M T W T F S Month Day Yr Time					
D			NC 03-										12 27 2024 05:36 Hrs					
E N	#1	Crime I	ncident(s	·				□ Att	At Fou Month	nd S Day S		T⊒FS Time	Last K Month	nown Se	cure Yr	S M T V Time	¶⊒FS	
Т		<u>. </u>		aking & Enteri	ng W	Vith For	ce	X Com	12			5:36 Hrs	s 12	26	2024	21:30		
D	Van daligm														6	Offense ' 113	Iract	
A T A	Crime Insident													Victim Residence Type				
	#3							Com								ily □Mul		
МО			d or Con MITTEI									Forcible Yes No	X N/A	Weapon	ı / Tools			
V	# of V	ictims	Туре	Person	X	Business			Inju	ry 🗌 Non	e 🗆 N	/inor 🗌	Loss of					
	I Society Government Financial Institute Broken Bones Severe I I Religious L.E. Officer Line of Duty Other/Unknown Internal Unconscious																	
		Victim		ligious □ L.E. O s Name (Last, First			uty Othe	er/Unknow		Internal [nscious B / Age	Other M	-	ationship		/A nt Status	
Ċ	V1	v ictiiii/				uie)				Crime #		d / Age	Kace 3		Offender			
T I	V I		DA	TA OMITTED)					1,2							-Residen	
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H E S I N V O L V E D		DATA OMITTED																
Status Codes	L = L	ost S	= Stolen	R = Recovered	D=	Damaged	Z = Seized	B = Burr	ned C =	Counterfeit	/ Forged	F = Foun	d					
Coues	Victim			if recovered for ot		Í												
	#	DCI 10	Status 7	Value	OJ	QTY 15	THC A 1 GRA	Property	Descript	ion			Make	/Model		erial Nun ATA OM		
P · R · P · E · T · Y ·		1 10 7 15 I HC A I GRAM CARIS 1 10 7 1 CART THC A											D	FOR				
	1	10	7			7	VAPE BATTERY								I	NFORMA		
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	1	31	4			1	DRIVE THRU WINDOW							ONLY THE FIRST				
									TWELVE PROPERTY									
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			ehicles S	-		mber Veh	icles Recovere	-				G	Cierci					
ID	Office WIS		A. (162		D#		Officer Signature Supervisor Signature HILL, P. M. (15817)											
Status			Signatur				Case Status Further X Inact	us Case Disposition: er Investigation Unfounded Located 1 ctive Cleared by Arrest Refuse to Cooperate							tradition I			
							Closed		hausted	Death			Prosecu		lined	Pag	e 1	