| I<br>N  | Agenc  | y Name      | e WIN                | IN                      | INCIDENT/INVESTIGATION |  |                            |                                     |         |                      |      | OCA 2482252                  |                            |                    |   |       |                   |                      |
|---|--|-------------|----------------------|-------------------------|------------------------|--|----------------------------|-------------------------------------|---------|----------------------|------|------------------------------|----------------------------|--------------------|---|-------|-------------------|----------------------|
| C   | ORI  | NC          | NC 034               | 10200                   |                        |  | 1                          | REPORT                              |         |                      |      |                              |                            |                    | Date / Time Reported SMTWTFS<br>Month Day Yr Time |       |                   |                      |
| D<br>E  |  |             | ncident(s            |                         |                        | X Att At Found SMTWTFS Month Day Yr Time |                            |                                     |         |                      |      |                              | Day 17   Time   16:42 Hrs. |                    |   |       |                   |                      |
| N<br>T  | #1   |             |                      | All Other F             | rau                    | d  |                            | _                                   | Com     | Month 06             |      |                              |                            | ime<br>1:26  Hrs   |   |       |                   | Time<br>  14:26  Hrs |
| D   | #2   | Crime I     | ncident              |                         |                        |  | ı —                        | Att Location of Incident Offense Tr |         |                      |      |                              |                            |                    |   |       | Offense Tract 114 |                      |
| A<br>T  | #3   | Crime I     | ncident              |                         |                        |  |                            | _                                   | Att     | Premise              |      |                              | n Ln                       | - A, Wirisi        | on-sc   |       | Victim Resid      |                      |
| A   |  |             |                      |                         |                        |  |                            |                                     | Com     |                      |      |                              |                            | r                  |   |       |                   | ily □Multi Family    |
| МО  |  |             | d or Com             |                         |                        |  |                            |                                     |         |                      |      | Forcible  Yes  No            | X N/A                      | We                 | apon / Tools                                      |       |                   |                      |
|   | # of V   | ictims      | l                    | N Person                | _                      | Business                                 |                            |                                     |         | Inju                 | •    | None                         |                            | _                  | Loss o  |       |                   | Alcohol Use:         |
| V   | I Society ☐ Government ☐ Financial Institute ☐ Broken Bones ☐ Severe Lacerations ☐ Yes ☐ Unknow ☐ Religious ☐ L.E. Officer Line of Duty ☐ Other/Unknown ☐ Internal ☐ Unconscious ☐ Other Major ☐ N/A |             |                      |                         |                        |  |                            |                                     |         |                      |      |                              |                            |                    |   | _     |                   |                      |
| I<br>C  | Victim/Business Name (Last, First, Middle)   |             |                      |                         |                        |  |                            |                                     |         |                      |      |                              | Victim of DOB / Age R      |                    |   |       | Relationship      | Resident Status      |
| T   | V1   |             | DA                   | ΓA OMITTED              |                        |  |                            |                                     | Crime # |                      | 37   | _                            | _                          | To Offender        | Resident Non-Residen                              |       |                   |                      |
| I<br>M  | Ноте   | Addre       | ue e                 |                         |                        |  |                            |                                     |         |                      |      | 1                            |                            |                    | В   | F     | RU ne Phone       | Unknown              |
|   |  |             |                      | ATA OMI                 | ITTED                  |  |                            |                                     |         |                      |      | Home I none                  |                            |                    |   |       |                   |                      |
|   | Employer Name/Address DATA C   |             |                      |                         |                        |  |                            |                                     | MITTED  |                      |      |                              |                            |                    | Business Phone                                    |       |                   |                      |
| ,   | VYR  | M           | ake                  | Model                   | St                     | yle                                      | Color                      |                                     | Lic     | c/Lis                |      |                              |                            | Vin                |   |       |                   |                      |
| T<br>H<br>E<br>R<br>S<br>I<br>N<br>V<br>O<br>L<br>V<br>E<br>D | DATA OMITTED   |             |                      |                         |                        |  |                            |                                     |         |                      |      |                              |                            |                    |   |       |                   |                      |
| Status<br>Codes   | (Chec  | k "OJ"      | = Stolen<br>column i | R = Recovered for other | D =<br>er jur          | Damaged isdiction)                       | Z = Seized                 | B =                                 | Burn    | ied C=               | : Co | ounterfeit / F               | Forged                     | F = Found          | 1   |       |                   |                      |
|   | Victim<br># DCI Status Value OJ QTY  |             |                      |                         |                        |  | Property Description       |                                     |         |                      |      |                              |                            |                    | Mal   | ce/Mo | odel S            | erial Number         |
| -<br>P -<br>R   |  |             |                      |                         |                        |  |                            |                                     |         |                      |      |                              | D                          | ATA OMITTED<br>FOR |   |       |                   |                      |
|   |  |             |                      |                         |                        |  |                            |                                     |         |                      |      |                              |                            |                    |   |       | I                 | NFORMATION           |
|   |  |             |                      |                         |                        |  |                            |                                     |         |                      |      |                              |                            |                    |   |       |                   | SECURITY             |
| O .   |  |             |                      |                         |                        |  |                            |                                     |         |                      |      |                              |                            |                    |   |       |                   | PURPOSES             |
| E ·   |  |             |                      |                         |                        |  |                            |                                     |         |                      |      |                              |                            |                    |   |       | 0                 | NLY THE FIRST        |
| R<br>T  |  |             |                      |                         |                        |  |                            |                                     |         |                      |      |                              |                            |                    |   |       |                   | LVE PROPERTY         |
| Y   |  |             |                      |                         |                        |  |                            |                                     |         |                      |      |                              |                            |                    |   |       |                   | ITEMS ARE            |
|   |  |             |                      |                         |                        |  |                            |                                     |         |                      |      |                              |                            |                    |   |       | Ι                 | DISPLAYED ON         |
|   |  |             |                      |                         |                        |  |                            |                                     |         |                      |      |                              |                            |                    |   |       |                   | P2C REPORTS          |
| -   | Numb   | er of V     | ehicles S            | tolen 0                 | Niii                   | mber Vebi                                | cles Recovere              | d                                   | 0       |                      |      |                              |                            |                    |   |       |                   |                      |
|   | Officer ID# Officer Signature Supervisor Signature   |             |                      |                         |                        |  |                            |                                     |         |                      |      |                              |                            |                    |   |       |                   |                      |
| ID  |  | Case Status |                      |                         |                        | Τ,                                       | Case Dispos                | ition:                              | ALEXA   | ANDER, J. C. (15741) |      |                              |                            |                    |   |       |                   |                      |
| Status  | Comp   | iamallí     | Signatur             | _                       |                        |  | ☐ Further ☐ Inact ☐ Closed | r Inve<br>ive<br>/Clea              | ared    |                      |      | ☐ Unfoun ☐ Cleared ☐ Cleared | ded<br>by Ai<br>by Ai      | Loca               | Refuse<br>ther Ag                                 | gency | ooperate<br>r     | Page 1               |