I N	Agenc	y Name		VSTON-SALE	M P	POLICE	INCIDENT/INVESTIGATION					I	OCA 2482308				
C I	ORI						REPORT						Date / Time Reported S M I W T F S Month Day Yr Time				
D		NC	NC 034	40200									07 02 2024 14:44 Hrs.				
E N		Crime I	ncident(s	3)			Att At Found SMIW TFS Month Day Yr Time						Last Known Secure SM T F S Month Day Yr Time				
T	#1			Shoplift	ing			X Com	07	02 202		41 Hrs			024	11:41 Hrs.	
D	\square #2 Crime Incident \square Att Location of Incident															Offense Tract	
A T															Resider	323 nce Type	
Ă	#3	Jinne I	nerdent										☐ Single Family ☐ Multi Family				
	How A	Attacke	d or Con	nmitted							I	Forcible		Weapon / 7	ools	· <u> </u>	
MO	D.	ATA O	MITTEI)								□ Yes [□ No	X N/A				
	# of V	ictims	Туре	□ Person	ГХ	Business			Injur	y ⊓ None	Mir	nor □	Loss of	Teeth D	rug/Al	lcohol Use:	
	Society Government Financial Institute Broken Bones Severa														re Lacerations ☐ Yes ☐ Unknown ☐ Other Major		
V I	Image:														No No	□N/A Resident Status	
Ċ	V1	v ictiiii/			, who	ule)				Crime #	DOB /	Age	Race S	Sex Relatio To Off		Resident Resident	
T I	V I		DA	TA OMITTED						1						□ Non-Residen	
Μ	Home	Addre	ss											Home Phone			
						D	ATA OMI	ATA OMITTED									
	Emplo	oyer Na	ame/Add	ress		D	ATA OMITTED						Business Phone				
	VYR	M	ake	Model	S	tyle	Color	Li	c/Lis		`	Vin					
H E R S I N V O L V E D		DATA OMITTED															
Status	L = L	ost S	= Stolen	R = Recovered	D_=	Damaged	Z = Seized	B = Burr	ned C =	Counterfeit / I	Forged	F = Found	d				
Codes	Victim		column	if recovered for oth	ier ju	risdiction)											
	#	DCI 99	Status 7	Value	OJ	QTY 1 I	LEAF BLOWE	1 1	Descripti	on				/Model na/Husqv		rial Number	
	1	"	/				LEAF BLOWL	21					iusqvuri	uu/11usqv	DA	FOR	
															IN	FORMATION	
P· R																SECURITY	
0																PURPOSES	
Р' Е.																	
R																LY THE FIRST	
T Y·														'		VE PROPERTY	
																ITEMS ARE	
-																2C REPORTS	
-															-		
	Numb	er of V	ehicles S	Stolen 0	Nu	mber Vehic	cles Recovere	d 0									
ID	Office RAT		ת א	(15687)	D#		Officer Sig	Officer Signature Supervisor Signature RATLIFF, K. D. (15687)									
ID			Signatur	· · · · · · · · · · · · · · · · · · ·			Case Status	s		Case Dispo	sition:	NATLI	ГГ, А. I				
Status	r		0				□ Further Investigation □ Unfounded □ Lo						□ Refuse to Cooperate				
									hausted	Death				tion Declin	ed	Page 1	