I N	Agenc	y Name		STON-SALEN	OLICE] IN	INCIDENT/INVESTIGATION							OCA 2483744				
C	ORI	NC	NC 034				-			REP	ORT			Date / Mon	Time	Reported S	1 1 1 1 1-1-1	
D E		ncident(s			Att At Found SMTWTFS Month Day Yr Time							In Day IF Time 11 01 2024 11:54 Hrs. Last Known Secure S M T W T F S Month Day Yr Time						
N T	#1 All Other Fraud									Month Day Yr Time Month Day Yr Time Month Day Yr Time Down 09 09 2024 23:07 Hrs 09 09 2024 23:07								
D	#2	Crime I	ncident					_	Att Location of Incident Offense T								Offense Tract 114	
A T	#3	Crime I	ncident				_	☐ Com 3807 Reynolda Rd, Winston-sail ☐ Att Premise Type					iem IV	Victim Residence Type				
A								Com					☐ Single Family ☐ Multi Family					
МО			d or Com					Forcible						Weapon / Tools				
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																	
V	1															_		
I C		Victim/	Business	Name (Last, First,	Midd	le)		Victim of DOI				B / Age	<u> </u>			Resident Status Resident		
T I	V1 DATA OMITTED										1 Crime #		43	W	M	RU	☐ Non-Resident	
M	Home Address													\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		ne Phone	Unknown	
	Employer Name/Address DATA O								MITTED									
	Emplo	oyer Na	ime/Addi	ress	D	ATA OMI	TA OMITTED						Business Phone					
,	VYR	M	ake	Model	Sty	/le	Color		Lic	/Lis			Vin					
T H E R S I N V O L V E D	DATA OMITTED																	
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column i	R = Recovered for other	D = L r juri:	Damaged sdiction)	Z = Seized	B =	Burn	ed $C = C$	Counterfeit	/ Forgeo	l F = Foun	d				
	Victim # DCI Status Value OJ QTY						Property Description							Mal	ke/Mo	odel Se	rial Number	
- - P - R														DA	TA OMITTED FOR			
					_											IN	FORMATION	
																	SECURITY	
O P .																	PURPOSES	
E ·																ON	LY THE FIRST	
R T					\dashv												VE PROPERTY	
Υ .																	ITEMS ARE	
																	SPLAYED ON	
-					+											P	2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Num	nber Vehic	cles Recovere	d	0									
ID	Office	r		ID				Officer Signature Supervisor Signature										
ID			<i>DER, J.</i> Signatur	<u>C. (15741)</u> e		Case Status							ALEXANDER, J. C. (15741)					
Status	P		G				☐ Further ☐ Inact ☐X Closed ☐ Closed	· Inve ive /Clea	red		☐ Unfo ☐ Clea ☐ Clea	ounded red by A red by A	☐ Loc	Refuse ther Ag	gency	looperate	Page 1	