| I N | Agenc | y Nam | | NSTON-SALE | 'M F | | INCIDENT/INVESTIGATION REPORT | | | | | | | OCA 2483754 | | | | | |
|---|--|--------------|------------------------------|-------------------------------------|-------------|-----------|--|--|------|-----------|---|----------------|-----------------------|--|-------|-------------|---------------------------------|--|--|
| C I | ORI | | | | 171 1 | OLICE | | | | | | | | Date / Time Reported S M T W T F S Month Day Yr Time | | | | | |
| D E | | | NC 034 | │ | | | | | | | 11 01 2024 13:56 Hrs. Last Known Secure Month Day Yr SMTWTFS | | | | | | | | |
| Ν | #1 | | nerdent(s | , Vandali | sm | | | Att | MC | n nth n | Day Yr | 1 | lime 2:40 Hrs | | | y Yr' | Time 12:40 Hrs | | |
| T D | #2 | Crime I | ncident | , списии | 5117 | | | □ Att | 1 | 0 | of Incident | F 12 | | 10 | 23 | 2024 | Offense Tract | | |
| А | | <u></u> | .1 . | | | | | Cor | | | loverdale | Av, V | Vinston-se | ilem N | | | 312 | | |
| T A | #3 | rime I | ncident | | | | | ☐ Att ☐ Cor | | emise T | уре | | | | | | ence Type iily ⊡Multi Family | | |
| МО | | | d or Con MITTEI | | | | | | | | | | Forcible Yes No | y N/A | Weap | on / Tools | | | |
| V I | # of V | ictims | | X Person | | Business | | Injury None Minor | | | | | | Loss of Teeth Drug/Alcohol Use: | | | | | |
| | 1 | | | ciety 🔲 Governr ligious 🔲 L.E. O | | | inancial Instit | ute | | | | | | ere Lacerations □ Yes □ Unknown □ Other Major □ № □ N/A | | | | | |
| | | Victim/ | | Name (Last, First | | | | | | | Victim of | | B / Age | Race | Sex R | elationship | Resident Status | | |
| C T | V1 | | DA | TA OMITTED | | | | | | | Crime # | | 22 | | | o Offender | Resident | | |
| I M | | | | - | | | | | | | 1 | | | | F | | Unknown | | |
| | Home | e Addre | ess | | | D. | ATA OMITTED | | | | | | | Home Phone | | | | | |
| | Empl | oyer Na | ame/Add | ress | ATA OMITTED | | | | | | | Business Phone | | | | | | | |
| | VYR | M | ake | Color | | ic/Li | 8 | | | Vin | | | | | | | | | |
| E R S I N V O L V E D | | DATA OMITTED | | | | | | | | | | | | | | | | | |
| Status | | | | R = Recovered | | | Z = Seized | B = Bu | rned | C = C | ounterfeit / F | orged | F = Found | 1 | | | | | |
| Codes P - | Victim | | | if recovered for oth | | Í | | | | | | | | Make/Model Serial Number | | | | | |
| | # DCI Status Value OJ QTY 1 92 4 1 1 | | | | | | Property Description /EHICLE PAINT/BODY | | | | | | | Make Subaru/O | | | erial Number ATA OMITTED | | |
| | | | | | | | | | | | | | | | | | FOR | | |
| | | | | | | | | | | | | | | | | Ι | NFORMATION | | |
| R. O | | | | | | | | | | | | | | | | | SECURITY PURPOSES | | |
| P · | | | | | | | | | | | | | | | | | I UKI USES | | |
| E · R | | | | | | | | | | | | | | | | 0 | NLY THE FIRST | | |
| Т | | | | | | | | | | | | | | | | TWE | LVE PROPERTY | | |
| Y | | | | | | | | | | | | | | | | | ITEMS ARE | | |
| - | | | | | | | | | | | | | | | | | DISPLAYED ON P2C REPORTS | | |
| - | | | | | | | | | | | | | | | | | | | |
| | Numb | er of V | ehicles S | tolen 0 | Nu | mber Vehi | cles Recovere | d 0 | | | | | | | | | | | |
| ID | Office WA | r DDFI | ΙΙΔ | . (15882) | D# | | Officer Sig | Officer Signature Supervisor Signature WADDELL, J. A. (15882) | | | | | | | | | | | |
| II/ | | | <i>L, J. A</i> . Signatur | | | | | Case Status Case Disposition: | | | | | | | | | | | |
| Status | | | | | | | Inact | □ Further Investigation □ Unfounded □ Lo □ Inactive □ Cleared by Arrest ↓ □ Closed/Cleared □ Cleared by Arrest by Arrest ↓ | | | | | | Cated Extradition Declined Refuse to Cooperate | | | | | |
| | | | | | | | | | | sted | Death o | | | Prosec | | eclined | Page 1 | | |