| I<br>N  | Agenc  | y Name   |                     | NSTON-SALE                          | мр         |                         | . IN  | INCIDENT/INVESTIGATION<br>REPORT  |      |                 |                           |         |                 | OCA 2484155   |                           |             |                            |          |  |
|---|--|--|---------------------|-------------------------------------|------------|-------------------------|---|---|------|-----------------|---------------------------|---------|-----------------|---|---------------------------|-------------|----------------------------|----------|--|
| C ·<br>I  | ORI  |  | <b>VV 1</b> 1       | STON-SALL                           |            | OLICE                   | ,<br>                                       |   |      |                 |                           |         |                 | Date / Time Reported SM TW TE S                           |                           |             |                            |          |  |
| D   |  |  | NC 034              |                                     |            |                         |   |   |      |                 |                           |         |                 |   | 12   06   2024 19:34 Hrs. |             |                            |          |  |
| E<br>N  | #1   | Crime I  | ncident(s           | ·                                   | л ·        | , ,.                    |   | Att   | Mo   | t Found<br>onth | -                         |         | T≟ S<br>Time    | 1   |                           | y Yr'       | S M T W T<br>Time          |          |  |
| T .   |  | Crime I  | ncident             | Larceny From                        | Bui        | lding                   | $\square \text{ Att Location of Incident} $ |   |      |                 |                           |         | 5:50  Hrs       | Hrs. 12   06   2024   15:50   Hrs.<br>Offense Tract       |                           |             |                            |          |  |
| D<br>A  | ) #2   |  |                     |                                     |            |                         |   |   |      |                 |                           |         |                 |   |                           |             | 412                        |          |  |
| T<br>A  | #3   | Crime I  | ncident             |                                     |            |                         |   | Att   |      | emise T         | ype                       |         |                 |   |                           |             | ence Type<br>nily ∏Multi H | Family   |  |
|   | How A  | Attacke  | d or Con            | nmitted                             |            |                         |   |   |      |                 |                           |         | Forcible        |   |                           | on / Tools  | • •                        | anniy    |  |
| MO  | D.   | ATA O  | MITTEI              | )                                   |            |                         |   |   |      |                 |                           |         | □ Yes [<br>□ No | Ŋ N∕A   |                           |             |                            |          |  |
|   | # of V   | ictims   |                     | Person                              |            | Business                |   |   |      | Injury          | □ None                    |         | _               |   | f Teeth                   | -           | Alcohol Use:               |          |  |
| v   | 1  |  |                     | ciety 🔲 Governm<br>ligious 🔲 L.E. O |            |                         | Financial Instit                            |   | wn   |                 | Broken Bone<br>Internal 🔲 |         |                 | re Lacerations ☐ Yes ☐ Unknown<br>☐ Other Major ☑ No ☐N/A |                           |             |                            |          |  |
| Ι   | Victim/Business Name (Last, First, Middle) Victim of DOB / Age |  |                     |                                     |            |                         |   |   |      |                 |                           |         |                 |   |                           | elationship | Resident S                 |          |  |
| C<br>T  | V1   |  | D۵                  | TA OMITTED                          |            |                         |   |   |      |                 | Crime #                   |         | 44              |   | To                        | o Offender  | Reside                     |          |  |
| I<br>M·   |  |  |                     |                                     |            |                         |   |   |      |                 | 1                         |         |                 | U   |                           | RU          |                            |          |  |
|   | Home   | e Addre  | SS                  |                                     |            | D                       | ATA OMI                                     | ГТЕD  |      |                 |                           |         |                 |   | Home                      | Phone       |                            |          |  |
|   | Emplo  | oyer Na  | me/Add              | ress                                | D          | OATA OMI                | ÍTTED                                       |   |      |                 |                           |         | Business Phone  |   |                           |             |                            |          |  |
|   | VYR  | M  | ake                 | Model                               | Color      | L                       | ic/Li                                       | s   |      |                 | Vin                       |         |                 |   |                           |             |                            |          |  |
| 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                                     | L = L  | ost S  | = Stolen            | R = Recovered                       | D =        | Damaged                 | Z = Seized                                  | B = Bu  | med  | C = C           | ounterfeit / F            | Forged  | F = Found       | 1   |                           |             |                            |          |  |
| 2.5405  | Victim   |  |                     |                                     | OJ         | QTY                     | Property Description                        |   |      |                 |                           |         |                 | Make/Model Serial Number                                  |                           |             |                            |          |  |
|   | #1   | DCI<br>25  | Status<br>7         | Value                               | PURSES/HAN | PURSES/HANDBAGS/WALLETS |   |   |      |                 |                           |         | e/ wiode        |   | ATA OMITT                 |             |                            |          |  |
| -   |  | 1     25     7     1     PURSES/HANDBAGS/WALLETS |                     |                                     |            |                         |   |   |      |                 |                           |         |                 |   |                           | FOR         |                            |          |  |
| Р-  |  |  |                     |                                     |            |                         |   |   |      |                 |                           |         |                 |   |                           | Ι           | NFORMATI                   |          |  |
| R   |  |  |                     |                                     |            |                         |   |   |      |                 |                           |         |                 |   |                           |             | SECURITY                   |          |  |
| O<br>P·   |  |  |                     |                                     |            |                         |   |   |      |                 |                           |         |                 |   |                           |             | PURPOSE                    | <u>s</u> |  |
| Е-  |  |  |                     |                                     |            |                         |   |   |      |                 |                           |         |                 |   |                           | 0           | NLY THE FI                 | IRST     |  |
| R<br>T  |  |  |                     |                                     |            |                         |   |   |      |                 |                           |         |                 |   |                           |             | LVE PROPE                  |          |  |
| Y -   |  |  |                     |                                     |            |                         |   |   |      |                 |                           |         | ITEMS ARE       |   |                           |             |                            |          |  |
| _   |  |  |                     |                                     |            |                         |   |   |      |                 |                           |         |                 |   |                           |             | DISPLAYED                  |          |  |
| -   |  |  |                     |                                     |            |                         |   |   |      |                 |                           |         |                 |   |                           |             | P2C REPOR                  | TS       |  |
| -   | Numb   | er of V  | ehicles S           | Stolen ()                           | Nu         | mber Vehi               | icles Recovere                              | d 0   |      |                 |                           |         |                 |   |                           |             |                            |          |  |
|   | Office   | r  |                     | I                                   | D#         | moer velli              | Officer Sig                                 | -   |      |                 |                           |         | Supervisor      | Signat  | ure                       |             |                            |          |  |
| ID  |  |  | DER, J.<br>Signatur | <u>C. (15741)</u>                   |            |                         | Case Statu                                  | ĀLEX  |      |                 |                           |         |                 |   | XANDER, J. C. (15741)     |             |                            |          |  |
| Status  | comp   | umant  | Jignatul            | ~                                   |            |                         | Further<br>Inact                            | er Investigation Unfounded Lc<br>etive Cleared by Arrest<br>d/Cleared Cleared by Arrest by Ar |      |                 |                           |         | rrest by Ano    | Refuse to Cooperate nother Agency                         |                           |             |                            |          |  |
|   |  |  |                     |                                     |            |                         | □ Closed                                    | /Leads E  | xhau | sted            | $\square$ Death of        | of Offe | nder 🗆          | Prose   | cution D                  | eclined     | Page 1                     | Ĺ        |  |