I N	Agenc	y Nam		NSTON-SALEN	OLICE	IN	INCIDENT/INVESTIGATION							OCA 2484206					
C ·	ORI	NC					1	REPORT								Date / Time Reported SMTWTFS Month Day Yr Time			
D E	NC NC 0340200  Crime Incident(s)									Att At Found S M T W T F S Month Day Yr Time						12			
N T	#1			All Other F	ı —										Time				
D	#2	Crime I	ncident					_	Att Location of Incident Offense									Offense Tract 323	
A T	#3	Crime I	ncident						Com Att	Premise 7			. Squ	are Ct Ap	<i>t.</i> 300		Victim Reside		
A									Com						☐ Single Family ☐ Multi Family				
МО			d or Com		Forcible						☐ Yes [	Weapon / Tools							
V	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																		
	1 Society Government Financial Institute Broken Bones Severe Lacerations Who Major No No No															_			
I C		Victim/	Business	Name (Last, First,	ile)			Victim of DOB Crime #			3 / Age	Race		Relationship To Offender	Resident Status Resident				
T I	V1		DA	ΓΑ OMITTED					1		53	$\mid w \mid$	$_{F}$	RU	☐ Non-Resident				
M ·	Home	e Addre	ess											ne Phone	Unknown				
	Employer Name/Address  DATA OMI  DATA OMI									<u> </u>						D ' D			
					ATA OMI									Business Phone					
	VYR	M	ake	Model	St	yle	Color		Lic	:/Lis				Vin					
T H E R S I N O L V E D	DATA OMITTED																		
Status Codes	(Chec	k "OJ"	= Stolen column	R = Recovered if recovered for other	D = i er jur	Damaged isdiction)	Z = Seized	B =	Burn	ed C = 0	Cour	nterfeit / F	orged	F = Found	i				
	Victim #	DCI	Value	Property Description								Mak	e/Mo	del Se	rial Number				
- P - R	1 20 7 1 MONEY/CASH															DA	TA OMITTED FOR		
					_												IN	FORMATION	
																		SECURITY	
O P -																		PURPOSES	
E -																	ON	LY THE FIRST	
R T					$\dashv$													VE PROPERTY	
Y																		ITEMS ARE	
																		ISPLAYED ON	
-					$\dashv$												P	2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Nur	nber Vehi	cles Recovere	d	0										
ID	Office	r		ID			Officer Sig		-					Supervisor	Signatu	ire	(15697)		
ID			, K. D. Signatur	( <i>15687)</i> e	Case Status							KAILII	LIFF, K. D. (15687)						
Status	r		<i>5</i>				☐ Further ☐ Inact ☐ Closed ☐ Closed	r Inve tive I/Clea	red			Unfoun Cleared Cleared	ded by Aı by Aı	Locarrest rest by Ano	Refuse ther Ag	ency	ooperate	Page 1	