I N	Agenc	y Namo	e WIM	E IN	INCIDENT/INVESTIGATION								OCA 2484250						
C	ORI						REPORT								Date / Time Reported S M T W T F S Month Day Yr Time				
D			NC 034											12 14 2024 14:34 Hrs.					
E N	#1	irime I	ncident(s		_	Att At Found SMTWTFS Last Known Secure Month Day Yr Time Last Known Secure Month Day Yr Time 10 19 2024								Day Yr	M T W T F S Time				
T		Crime I	ncident	Larceny- All	Oth	<u>ier</u>		_	_	10 Locatio	_	<u>19 202</u> f Incident	4 19	0:00 Hrs	s} 10			19:00 Hrs. Offense Tract	
D A	#2 Crime Incident															NC	I	412	
T	#3	Crime I	ncident						Att	Premise						T,	Victim Resider	• •	
A									Com								<u> </u>	ly □Multi Family	
МО			d or Com MITTEI					Forcible ☐ Yes ☐ No							Weapon / Tools				
V	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															cohol Use:			
	I Society Government Financial Institute Broken Bones Severe Lacerations Unknown Internal Unconscious Other Major No NA															_			
V I		Victim/		Name (Last, First,			outy 🔲 Out	21/ UII	IKIIOW	11 L] In	Victim of		3 / Age	Race	<u> </u>		□N/A Resident Status	
C T	V1 Crime #															~	To Offender	☐ Resident	
I	DATA OMITTED											1						☐ Non-Resident ☐ Unknown	
M	Home Address DATA OMI'															Home Phone			
	Employer Name/Address DATA OMI															Business Phone			
	VYR	Color	Color Lic/Lis Vin																
							1												
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Status Codes																			
Codes	Victim		Status	Value	OJ	QTY)												
- - P - R	# 1	VFHICI F PA	Property Description EHICLE PARTS/ACCESSORIES							Mak Tfu174/	ke/Mo		rial Number TA OMITTED						
	1	1 92 7 4 VEHICLE PARTS/ACCESSORIES 1 99 7 1 OTHER									/Amo18		DA	FOR					
	1	99	7			1	OTHER								/Amo05		IN	FORMATION	
	1	99	7			1	OTHER								/Amo18	924		SECURITY	
O p	1	99	7			1	OTHER								/Amo16	619		PURPOSES	
E ·																	ON	I V THE EIDET	
R T																		LY THE FIRST VE PROPERTY	
Y ·																		ITEMS ARE	
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																	P	2C REPORTS	
-	NT -		1111 ~	1 2	3.7	1 77.5	· 1 - 5												
	Numb Office:		ehicles S	tolen 0		mber Veh	Officer Sig		e e				ı	Supervisor	Signati	ure			
ID	WAI	DDEL		(15882)								WADL	DELL,	J. A.	(15882)				
	Comp	lainant	Signatur	e		Case Statu		S Case Disposition:							adition Declined				
Status							Inact	tive	-			Cleared	by A	rrest _] Refuse	e to C	Cooperate	adiaon Decimed	
		☐ Closed/Cleared ☐ Cleared by Arrest by Ano											other Agency Prosecution Declined Page 1						