I N	Agenc	y Nam		NSTON-SALEN	OLICE	IN	INCIDENT/INVESTIGATION							OCA 2484391					
C .	ORI	NC					1	REPORT							Date / Time Reported SMTWIFS Month Day Yr Time				
D E	10		NC 034				│ □ Att │ At Found │ S M ff W ff F S │ Month Day Yr Time							미미미	12   26   2024  17:19 Hrs.				
N	#1	Jimic I	neident(s	) Shopliftii	10				Com	Month	Γ						Day Yr	Time	
Т.	#2	Crime I	ncident	Shopiijiii	18				$\rightarrow$			Incident	4   10	5:36  Hrs	12		24   2024	16:36  Hrs. Offense Tract	
D A									Com			•	mmo	ns Ct, Wi	nston-			322	
T A	#3	Crime I	ncident						Att Com	Premise	Тур	pe					Victim Resid	ence Type ily ∏Multi Family	
МО			d or Com											Forcible Yes	X N/A		apon / Tools	,	
	# of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:															Alcohol Use:			
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow																		
V I		Viotim		-			uty Othe	er/Un	know	n [		ternal   Vistim of			Other	<del>-</del>			
Ċ	Crime #														Race	Sex	To Offender	☐ Resident	
T I	* 1		DA	ΓA OMITTED								1						□ Non-Resident □ Unknown	
М -	Home Address DATA OMI'									ll PTFD						Home Phone			
	Employer Name/Address DATA OM  DATA OM														Business Phone				
	VYR	M	Color   Lic/Lis   Vin							Vin									
O T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes	(Chec	k "OJ"	= Stolen column	R = Recovered if recovered for other	D = 1 er jur	Damaged isdiction)	Z = Seized	B =	Burn	ed C=	Cou	ınterfeit / F	orged	F = Foun	d				
	Victim #	Property Description								Mak	e/Mo	odel S	erial Number						
- P -	1							CLOTHES/FURS							Carhari	t/Sup	per D	ATA OMITTED	
					$\dashv$												T	FOR NFORMATION	
					_												1.	SECURITY	
R O																		PURPOSES	
Р <sup>-</sup> Е -																			
R																		NLY THE FIRST	
Т Ү -					_												TWE	LVE PROPERTY	
٠.																	Т	ITEMS ARE DISPLAYED ON	
-					-													P2C REPORTS	
-																			
•			ehicles S	-		nber Vehi	cles Recovere		0										
ID	Office ALE		DER. I	C. (15741)		Officer Sig	Officer Signature Supervisor Signature ALEXANDER, J. C. (15741)												
ii)		lainant		Case Status															
Status							☐ Further ☐ Inact ☐ Closed	tive l/Clea	red				by A	Loc rrest rrest by And	Refuse other Ag	gency	ooperate Г	radition Declined Page 1	