I N	Agenc	y Namo		NSTON-SALEN	OLICE	. IN	INCIDENT/INVESTIGATION								OCA 2507913				
I C	ORI	NC	NC 034	10200			1	REPORT							Date / Time Reported SMTWTFS Month Day Yr Time				
D E	10		ncident(s		Att At Found SMTWTFS Month Day Yr Time								Day   17 Time   19.54 Hrs.   19.54 Hrs.						
N T	#1			Discharging F		_	Com	Month 03	D			lime 1:54   Hrs				Time	Hrs.		
D.	#2	Crime I	ncident	0 0					Att	Location	ı of	Incident					, ,	Offense Trac	
A T		Trimo I	ncident					_	Com	2050 Premise			v, Wi	nston-sal	em N			dence Type	
A	#3	JIIIIC I	ncident				Att Com	1 Tellilise	ı yı	DC .						mily □Multi F	amily		
МО			d or Con MITTEI						•					Forcible  Yes  No	X N/A	We	apon / Too	ls	
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																		
V	1 Society Government Financial Institute Broken Bones Severe Lacerations Unknow Internal Unconscious Other Major No N/A															own			
I		Victim/		Name (Last, First,						<u>"   Ц</u>	T	Victim of		3 / Age	Race	<u> </u>	Relationsl	ip Resident St	
C T	V1 DATA OMITTED																To Offeno	er Residen	
I M ·		A 11				1,								DI	Unknov				
	Home Address DATA OMI									TTED						Home Phone			
	Emplo	oyer Na	ame/Add	ress	ATA OMI	MITTED							Business Phone						
•	VYR	M	Model	Color Lic/Lis Vin						Vin									
O T																			
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I	DATA OMITTED																		
N V																			
Ö																			
V																			
E D																			
Status	L = L	ost S	= Stolen	R = Recovered	D = 1	Damaged	Z = Seized	B =	Burn	ed C = 0	Cou	ınterfeit / F	orged	F = Foun	ıd				
Codes	Victim			if recovered for other	Ť	Í	D 1 D 12								Make/Model Serial Number				
	# DCI Status Value OJ QTY  1 13 EVID 1 (9MM)								Property Description  () HANDGUN							e/Mo IS/G3		Serial Number DATA OMITT	
	1	59 EVID 3 (40) SHELL CASING												FOR					
P · R · O					_													INFORMATIO	
					$\dashv$													SECURITY PURPOSES	
Р -					_														
E - R <sub>-</sub>																		ONLY THE FII	
Т Ү -					_												TW	ELVE PROPER	
					$\dashv$													DISPLAYED	
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_																			
	Numb		ehicles S	tolen 0		nber Veh	Officer Sig		0 re				ī	Supervisor	Signati	ure			
ID	ALD	PERM.		T. (16273)						:		HILL,	P. M.	(158	317)				
										Investigation Unfounded Located Extr							xtradition Decl	ined	
Status												☐ Cleared		rest rest by And	] Refuse	e to C gency	ooperate		
							☐ Closed			hausted				nder 🗆				Page 1	