I N	Agenc	y Namo		NSTON-SALEN	IN	INCIDENT/INVESTIGATION							OCA 2107696							
C .	ORI	NC			REPORT							Date / Time Reported SMTWTFS Month Day Yr Time								
D E	NC NC 0340200 Crime Incident(s)									☐ Att At Found SMTЫTFS Month Day Yr Time							Day Time			
N T	#1	Jimic I		, Larceny From 1	Buil	ding		_	Com	Month 02	D			ime 5:48 Hrs			Day Yr	Time 15:48 Hrs.		
D.	#2	Crime I	ncident			6			\rightarrow	Location	of l	Incident						Offense Tract		
Α .	Crime Incident Com 801 N Martin Luther King Jr Dr, W																	222		
T A	#3	Jillie 1	ncident						Com	Premise	тур	e					Victim Reside Single Fam	ily ∏Multi Family		
МО			d or Con											Forcible Yes	N/A	_	apon / Tools	<u> </u>		
	No No																	1 1 177		
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																			
V	1		☐ Rel	igious 🔲 L.E. Off	icer l	Line of D			know					scious	Other	Majo	r 🛛 🗖 N	o □N/A		
I C		Victim/	Business	Name (Last, First,						Victim of Crime #	DOI	3 / Age 57	Race	Sex	Relationship To Offender					
T I	V1		DA	ΓΑ OMITTED					1,		37	$\mid_{B}\mid$	M	1BG	☐ Non-Resident					
М -	Home	Addre	ess								<i>D</i>		ne Phone	Unknown						
	Employer Name/Address DATA OMI															Business Phone				
	DATA OMI															Dusiness I none				
	VYR	M	ake	Model	St	yle	Color		Lic	c/Lis				Vin						
T H E R S I N V O L V E D	DATA OMITTED																			
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column	R = Recovered if recovered for other	D = 1 er juri	Damaged isdiction)	Z = Seized	B =	Burn	ed $C = 0$	Cou	nterfeit / F	orged	F = Found	1					
	Victim # DCI Status Value OJ QTY								Property Description						Mak	e/Mo	del S	erial Number		
	1	"							CASH							rency	D	ATA OMITTED		
P - R					_												T	FOR NFORMATION		
					_	+											1.	SECURITY		
0					\neg													PURPOSES		
Р ⁻ Е -																				
R					_													NLY THE FIRST		
Т Ү -					\dashv												TWE	LVE PROPERTY ITEMS ARE		
1					\dashv												Г	DISPLAYED ON		
-					\dashv													P2C REPORTS		
_																				
			ehicles S	-		nber Vehi	cles Recovere		0					C	C:					
ID	Office KEL		G, T. N	ID . (16218)	Officer Sig	Officer Signature Supervisor S MCFAD									Signature DDEN, T. T. (15271)					
	Comp	lainant	Signatur	e	Case Status		Case Disposition:								radition Darling 1					
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	ive /Clea	ıred		j 1		by Ai	Test by Ano	Refuse ther Ag	gency	ooperate Г	Page 1		