I N	Agenc	y Nam		NSTON-SALEN	OLICE	IN	INCIDENT/INVESTIGATION								OCA 2220025					
C	ORI	NC	NC 02	40200			1	REPORT								Date / Time Reported SMIWTFS Month Day Yr Time				
D E	10		NC 034		│ Att │ At Found │ SM王WTFS Month Day Yr Time								04 26 2022 08.57 Hrs. Last Known Secure S M T W T F S Month Day Yr Time							
N T	#1	Jimie I	nerdeni(s	, Counterfeiting	2-us	ing		_	Com	Month 04	Ι			ime 3:57 Hrs				r 🗀	Time 08:57 Hrs	
D	#2	Crime I	ncident		,	6			-			Incident	2 00	5.37	7 04		20 20		Offense Tract	
Α		7 I	! 4 4					_	Com				insto	n-salem 1	VC 27		(7: -4: D		122	
T A	#3	Jime i	ncident						Com	Premise	ТУJ	pe					Victim Re ☐ Single l		ce Type y	
МО	DATA OMITTED													Forcible Yes No						
	# of Victims Type Person X Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															cohol Use:				
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow															_				
V I	 ,	Victim/		Name (Last, First,			иту 🔲 Опто	21/ U11	KIIOW	п		Victim of		S / Age	- -	Sex Relationship Resident Status				
C T	V1			ΓΑ OMITTED		,						Crime #		. 8			To Offer	nder	■ Resident	
I M			DA	IA OMITIED								1,							☐ Non-Residen	
IVI	Home	e Addre		ATA OMI	ITTED								Home Phone							
	Employer Name/Address DATA ON															Business Phone				
	VYR	M	ake	Model	Color Lic/Lis Vin							Vin								
O T H E R																				
I N V O L V E D							DATA	A C	ЭM	ITTI	ΞΙ)								
Status Codes																				
	Victim #	DCI	Value	Property Description								Mak	ake/Model Serial Number							
	"							EGOTIABLE INSTRUMETS								DATA OMITTED				
P · R · O · P · ·																		TAT	FOR	
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			ehicles S	-		mber Veh	cles Recovere		0											
ID	Office MO		, M. D.	(15484) ID		Officer Sig	Officer Signature Supervisor									Signature <i>OSKI</i> , <i>S. A.</i> (14460)				
11/			Signatur				Case Statu					Case Dispos				~· 11	·			
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	tive /Clea	ıred				by Ai	Test by Ander] Refuse other Ag	gency	cooperate	Г	Page 1	