I N	Agenc	y Nam		NSTON-SALEN	OLICE	IN	INCIDENT/INVESTIGATION							OCA 2224253					
C I	ORI	NC					1	REPORT							Date / Time Reported SMTWIFS Month Day Yr Time				
D E	NC NC 0340200 Crime Incident(s)									☐ Att At Found						Day 17 Time 14:29 Hrs. Last Known Secure SMTMFFS Month Day Yr Time Time SMTMFFS Time Tim			
N T	#1			All Other F	_	☐ Att At Found S M T W F F S Last I Month Day Yr Time Last I Month Day Com 05 19 2022 14:29 Hrs 05								th Day Yr Time					
D	#2	Crime I	ncident						Att	Location	of l	Incident					, , _ , _ ,	Offense Tract	
A T	Crime Incident																	124	
A	#3	JIIIIC I	ncident					Com							Victim Residence Type ☐ Single Family ☐ Multi Family				
МО			d or Com								Forcible Yes				Weapon / Tools				
	No No															lachal Usar			
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use: Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown																		
V I	$\frac{I}{I}$			igious L.E. Off			uty 🔲 Othe	er/Un	know	n 🗆	_			nscious	Other	Majo	r 🛛 🗓 N	N/A	
Ċ	V1	V ictim/		Name (Last, First,					Victim of Crime #	DOI	3 / Age 66	Race		Relationship To Offender					
T I	DATA OMITTED											1,			$\mid w \mid$	$_F$	1RU	☐ Non-Resident	
M	Home Address DATA OMIT															Home Phone			
	Employer Name/Address DATA OM														Business Phone				
	VYR	Color																	
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 $C = 0$	Cou	nterfeit / F	orged	F = Found	i 				
	Victim #	DCI	Status	Value		Pro	perty	Description	on				Mak	e/Mo	del S	erial Number			
- P - R	1	1 77 7 1 MONEY												DA	ATA OMITTED				
																	I	FOR NFORMATION	
																		SECURITY	
ο .																		PURPOSES	
Р ⁻ Е -																			
R.					_													VE PROPERTY	
Т Ү.						-											1 WEI	ITEMS ARE	
•					\dashv												D	ISPLAYED ON	
•																	I	P2C REPORTS	
-					\Box														
	Numb		ehicles S	tolen 0		nber Vehi	Cles Recovere		<i>0</i>				ı	Supervisor	Signati	ıre			
ID	RIC.	HARI		S. G. (15580)	Officer Sig									r Signature JOY, G. W. (14392)					
	Comp	lainant	Signatur	e		Case Status	s Case Disposition:						☐ Loca	cated					
Status							☐ Closed	ive /Clea	red		j 1	☐ Cleared ☐ Cleared	by A	rrest Drest by Ano	Refuse ther Ag	gency	ooperate	Page 1	