I N	Agenc	y Name		NSTON-SALE	M P	OLICE	. IN	CID	CIDENT/INVESTIGATION					OCA 2239842					
C	ORI	NC					1	REPORT						Date / Mon	Date / Time Reported SMTWTFS Month Day Yr Time				
D E	<u> </u>		NC 034					Att At Found SMTNTFS Month Day Yr Time							O8   17   2022   13:24 Hrs.  Last Known Secure SMTHTFS Month Day Yr Time				
N T	#1			, Drug Viola	tion	s		IX (	- 1	Month 08			Time 3:24  Hrs			Day Yr 🗀	Time $13:24$ Hrs.		
D	#21		ncident						Att	Location of	of Incident		•	•			Offense Tract		
A T	Paraphernalia- Possessing/concealing Equipment \( \t \times \) Com \( Nb \) 52/nb 52_s Research Pw Ra,															-salem Victim Residen	311		
A	#3	Jillie I	ncident						☐ Att Premise Type ☐ Com						☐ Single Family ☐ Multi Family				
МО			d or Com										Forcible  Yes	X N/A	We	apon / Tools			
																laahal Haar			
	# 01 V	ıctıms	""	☐ Person ☐ Governm		Business	inancial Instit	ute		Injury	☐ None Broken Bone	□ M es	Iinor □ □ Severe	Loss o		· I -	s  Unknown		
V			☐ Rel	igious 🔲 L.E. Of	ficer		uty 🔲 Othe	er/Unk	cnow	. –	nternal 🔲	Uncor	iscious [	Other	r Major				
C	Victim/Business Name (Last, First, Middle)  Victim of DOB / Age Crime #													Race	Sex	Relationship To Offender	Resident Status Resident		
T I	V1 DATA OMITTED											1,2					☐ Non-Resident		
M	Home Address DATA OMIT														Home Phone Unknown				
	Employer Name/Address DATA OMI													Business Phone					
	VYR   Make   Model   Style   Color												Vin						
	, 110		unc .	Wiodel	50	.,10	Color		Біс				<b>, 111</b>						
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 oth	D = er jur	Damaged isdiction)	Z = Seized	$\mathbf{B} = \mathbf{I}$	Burn	ed C = C	ounterfeit / F	orged	F = Foun	d					
	Victim #	DCI	Status	Value	Property Description							Mak	e/Mo	del Se	rial Number				
								LASTIC TEAR OFF BAG								DA	TA OMITTED		
- P - R																IN	FOR FORMATION		
					_												SECURITY		
ο .					$\neg$												PURPOSES		
Р <sup>.</sup> Е .																			
R																	LY THE FIRST		
Т Ү.					_												VE PROPERTY ITEMS ARE		
					$\dashv$												ISPLAYED ON		
-					$\dashv$												2C REPORTS		
			ehicles S	-		nber Vehi	cles Recovere		0				C	C:					
ID	Officer ID# Office JARVIS, M. F. (16215)								Officer Signature Supervisor ARND							Signature <i>T</i> , <i>V</i> . <i>A</i> . (15514)			
	Complainant Signature Case Statu										Case Dispos		<b>—</b> T -	eto-d		_ P	adition Destined		
Status							☐ Further ☐ Inact ☐ Closed	tive /Clear	red			by Ai	Loc rrest rrest by And	] Refuse other Ag	gency	ooperate	Page 1		