I N	Agenc	y Name		NSTON-SALEN	CIDENT/INVESTIGATION						OCA 2239883								
I C	ORI	NC	NC 02	40200			1		REPORT						Date / Time Reported SMTWTFS Month Day Yr Time				
D E	10		NC 034		│ │ Att │ At Found │ │ │ │ │						08   17   2022  17:29 Hrs.								
N T	#1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, tion Of City/cou	ı —	Month Day Yr Time Month Day Y									Time				
D.	#2	Crime I	ncident		,			_	Att	Location			2   17	.29	7 00			Offense Tract	
A		~ · · ·	ncident					_	Com				Rd/h	anes Mal	l Bv,		Victim Resider	322	
T A	#3	Jime I	ncident						Att Com	Premise '	тур	ЭС						ice Type y ∏Multi Family	
МО			d or Com								Forcible Yes	X N/A	We	apon / Tools	· <del>-</del>				
																cohol Use:			
V I	$\frac{I}{I}$	7 /		igious L.E. Off			uty   Othe	er/Un	nknow	n _	_	ternal 🔲		scious [	Other	Majo			
Ċ	V1	v ictim/		Name (Last, First,					Victim of Crime #	DOF	3 / Age	Race	Sex	Relationship To Offender	Resident Status Resident				
T I	V 1		DA	ΓA OMITTED						1,						☐ Non-Resident			
М -	Home Address DATA OMIT									 TTFD						Home Phone			
	Employer Name/Address DATA OMI														Business Phone				
	VYR	Color							Vin										
				<u> </u>															
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L																			
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D																			
G	S L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found																		
Status Codes	(Chec	k "OJ"	column	if recovered for other	r ju	risdiction)	Z = Seized	В=	Бигп	ied C=C	Cou	interieit / F	orgea	r = roun	a				
	Victim # DCI Status Value OJ					QTY		Property Description				Mak	e/Mo		rial Number				
- - P - R		<del>                                      </del>											DA	TA OMITTED FOR					
																	IN	FORMATION	
																		SECURITY	
O P -																		PURPOSES	
Р Е -																	ON	LV THE FID OT	
R T																		LY THE FIRST VE PROPERTY	
Y ·																		ITEMS ARE	
-																		SPLAYED ON	
																	P	2C REPORTS	
-	NI1	or of 17	ahiala - C	tolon	NT	mbor V-1.	alas Passess	d	0										
	Office	r	ehicles S	ID		inder Vehi	cles Recovere Officer Sig		0 re				Ī	Supervisor	Signati	ıre			
ID	EVANOFSKI, M. A. (16127)								(0)							. organical			
										Case Disposition:  Unfounded Located						☐ Extr	adition Declined		
Status					ive /Clea	ared			Cleared	by Aı	rest rest by And	Refuse	se to Cooperate						
							Closed			hausted				nder $\Box$				Page 1	