I N	Agenc	y Name		STON-SALEN] IN	INCIDENT/INVESTIGATION							OCA 2239914							
I C	ORI	NC	NC 034	10200			1	REPORT								Date / Time Reported SMTWTFS Month Day Yr Time				
D E			ncident(s		<u> </u>	Att At Found SMTWTFS Month Day Yr Time							$\begin{array}{c ccccccccccccccccccccccccccccccccccc$							
N T	#1			Death Investi	ı —	Month Day Yr Time Month Day Yr										Time 19:09 Hr	ſs.			
D	#2	Crime I	ncident			- 1			Incident					7102	T	Offense Tract				
A T	ша (Crime I	ncident			_	☐ Com 2339 Westover Dr, Winston-sa. ☐ Att Premise Type						lem N	NC 27103 312 Victim Residence Type						
A	#3							Com							☐ Single Family ☐ Multi Family					
МО			d or Com										Forcible Yes No							
	# of Victims Type																			
V	0			ciety Governme igious L.E. Off					know	- 1	_	roken Bon iternal 🔲		Severe	Lacera Other			∃ Yes ∃ No	Unknow □N/A	n
I C		Victim/		Name (Last, First,		Victim of DOB / Age				Race		Relation	ship	Resident State	us					
T	V1		DA	ΓA OMITTED						Crime #					To Offer	naer	☐ Resident ☐ Non-Resid	len		
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T H E R S I N O L V E D	DATA OMITTED																			
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column i	R = Recovered f recovered for other	D = E r juris	Damaged sdiction)	Z = Seized	B =	Burn	ed C=	: Coı	unterfeit / I	Forged	F = Four	ıd					
	Victim # DCI Status Value OJ QTY						Property Description								Mal	ake/Model Serial Number				
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ID	HUNTLEY, J. D. (16087) Complainant Signature Case														TNER, J. B. (15331)					
Status	r		Ç				☐ Further 【X Inact ☐ Closed									Page 1	ed —			