I N	Agenc	y Name		STON-SALEN	1 P	OLICE	] IN	CIDENT/INVESTIGATION					OCA 2304499						
C .	ORI	NG					1	REPORT						Date / Time Reported SMTWTFS Month Day Yr Time					
D E	10		NC 034				│ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │						TFS	01   30   2023  09:37 Hrs.					
N T	#1 Police Service-non Criminal Call For Service									I TO Com							t Known Secure S센TWTFS nth Day Yr Time 1   30   2023  09:37  Hrs.		
D.	#2	Crime I	ncident						- 1	Location	of Incider	nt					Offense Tract		
A T	Crime Incident Com 100 Hanes Mall Cr, Winston-saler															7103 Victim Resid	ance Type		
Ā	#3							Com						☐ Single Family ☐ Multi Family					
МО			d or Com MITTEL						-				Forcible Yes	X N/A	We	apon / Tools			
	# of V	ictims	Туре	☐ Person		Business				Injury	□ No	ne □1	∏ No Minor ┌	Loss o	f Tee	th Drug/A	Alcohol Use:		
	O Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow															_			
V I		/ictim/		Name (Last, First,			ity 🗌 Othe	er/Un	iknow	n   _	Internal Victim		nscious E	Other	<u> </u>				
C T	VI DATA OMITTED														~	To Offender			
I M ·			DA.	IA OMITTED													☐ Unknown		
171	Home	Addre	SS		D.	ATA OMIT	A OMITTED							Home Phone					
	Emplo	yer Na	me/Addı	ress	D.	ATA OMI	ra omitted						Business Phone						
•	VYR	M	ake	Model	St	yle	Color		Lic	c/Lis			Vin						
T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes	L = L	ost S k "OJ"	= Stolen column i	R = Recovered f recovered for other	D = l er iuri	Damaged isdiction)	Z = Seized	B =	Burn	ed $C = C$	Counterfeit	t / Forge	f F = Four	ıd					
	Victim # DCI Status Value OJ QTY					QTY	Property Description							Mak	e/Mo	odel S	erial Number		
- - P - R								1 7 1								D	ATA OMITTED		
					$\dashv$											T	FOR NFORMATION		
					$\dashv$												SECURITY		
O P -																	PURPOSES		
Р Е -					_												AL VEHE EIDOE		
R T					_								+				NLY THE FIRST LVE PROPERTY		
Y -					$\dashv$											1 ** 1.	ITEMS ARE		
-					$\neg$											Γ	DISPLAYED ON		
_					$\Box$												P2C REPORTS		
-	Numi	or of V	ahialaa C	tolon 0	None	nhor Wak!	alas Dassvar-	d	0										
	Office		ehicles S	ID		noer venio	Officer Sig		e e				Supervisor						
ID	COC				-	C B:	•.•	WALS	H, D. W. (14646)										
Status	Compl	ainant	Signatur	e		☐ Further☐ Inact☐ Closed	☐ Inactive ☐ Cleared by Arrest ☐ Refuse to Cooperate ☐ Closed/Cleared ☐ Cleared by Arrest by Another Agency							tradition Declined					
							□ Closed	/Lead	ds Exl	nausted	□ Deat	th of Off	ender 🗆	Prosec	cution	Declined	Page 1		