I N	Agenc	y Namo		NSTON-SALE	<u></u> И Р	OLICE	. IN	INCIDENT/INVESTIGATION							OCA 2304547						
C	C REPORT														Date / Mon	Time	e Reported Day	S ∃ Zr	MTWTF		
D E		rime I				Δ++ I	At Found	d	S 4	1 T W	TFS	01	Knov			Time 16:13 Hrs MTWTF					
N T	#1			Larceny From	Buil	ding		_	Month Day Yr Time Month Day Yr										Time 16:13 Hrs		
D	Crime Incident															•	•		fense Tract		
A T	Crime Incident Crime Incident Att Premise Type															Z 27101 111 Victim Residence Type					
A	#3	Jime i	ncident					☐ Att Premise Type ☐ Com							☐ Single Family ☐ Multi Family						
МО			d or Con MITTEI											Forcible Yes No	X N/A	We	apon / Too	ols			
	# of Victims Type Person X Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															ohol Use:	\exists				
17	1			ciety Governm			inancial Instit		lenov			oken Bone		Severe	Lacera Other				Unknown	1	
V I	Victim/Business Name (Last, First, Middle) Victim of DOB / Age Rac															Sex			□N/A Resident Statu	s	
C T	V1		DA'	ГА ОМІТТЕО								Crime #					To Offen	ler 🛭	X Resident ☐ Non-Reside	ani	
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Status	IS $L = Lost$ $S = Stolen$ $R = Recovered$ $D = Damaged$ $Z = Seized$ $B = Burned$ $C = Counterfeit / Forged$ $F = Found$														\dashv						
Codes	(Chec	k "OJ"	column	if recovered for other	er jur	isdiction)								<u> </u>						4	
	#	Property Description BUSINESS DOCUMENTS								Mak	Take/Model Serial Number				_						
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ID			. <i>O. (15</i> Signatur		Casa States	c				ase Diana	ition	BOWE	RS, K	. S. (14602)			\dashv			
	Comp	ашапі	əigilatur	U			☐ Furthe	Case Status Case Disposition: ☐ Further Investigation ☐ Unfounded ☐ Located ☐ Extrad								lition Declined	t				
Status					Closed	☐ Inactive ☐ Cleared by Arrest ☐ Refuse to Cooperate ☐ Closed/Cleared ☐ Cleared by Arrest by Another Agency								D 1	_						
							☐ Closed	/Lead	ls Evl	hausted	1 7	□ Death o	f Offe	nder 🗆	7 Prosec	cution	Declined	1	Page 1		