I N	Agenc		ISTON-SALEN	CIDENT/INVESTIGATION						OCA 2409859									
C	ORI	NC	NC 03/	10200		1			REF	<b>2</b> 0	RT					Reported Day Yr	SMT₩TFS Time		
D E	NC NC 0340200 Crime Incident(s)									☐ Att						$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
N T	#1	5	Simple 1	Assault-non Agg	grav	ated Ass	sault	_	Com	Month 03				lime  :05  Hrs			Day Yr 5 20   2024	Time $21:04$ Hrs.	
D	#2	Crime I	ncident						- 1			Incident				•		Offense Tract	
A T	#3	Crime I	ncident					_	Com Att	Premise			insta	n-salem l	VC 27		Victim Resid	111 ence Type	
A								Com						☐ Single Family ☐ Multi Family					
МО			d or Com											Forcible Yes No	<b>X</b> N/A	We	apon / Tools		
	# of V	ictims	Type	□ Person	_	Business				Inju	•	None None			Loss o		.   -	Alcohol Use:	
V	I ☐ Society ☐ Government ☐ Financial Institute ☐ Broken Bones ☐ Severe Lacerations ☐ Yes ☐ Unknow ☐ Religious ☐ L.E. Officer Line of Duty ☐ Other/Unknown ☐ Internal ☐ Unconscious ☐ Other Major ☐ NO ☐ N/A															_			
I C		Victim/	Business	Name (Last, First,					Victim of		3 / Age	Race			Resident Status				
T I	V1		DA	ΓΑ OMITTED					Crime #		35	117	,		Non-Resident				
M	Home Address											1,			W	Hon	1OK ne Phone	Unknown	
	DATA OMIT									<u> </u>									
	Employer Name/Address DATA OMI									ГТЕD					Business Phone				
1	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	(Chec	k "OJ"	= Stolen column i	R = Recovered for other	D = l r juri	Damaged isdiction)	Z = Seized	B =	Burn	ied C=	: Coı	unterfeit / F	orged	F = Found	d				
	Victim # DCI Status Value OJ QTY						Property Description						Mal	ce/Mo	odel S	erial Number			
- - P - R													D.	ATA OMITTED FOR					
					$\dashv$												I	NFORMATION	
																		SECURITY	
O P .																		PURPOSES	
E ·					_												0	NLY THE FIRST	
R T					_													LVE PROPERTY	
Υ .					$\neg$													ITEMS ARE	
																	Γ	DISPLAYED ON	
					_													P2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Nun	nber Vebi	cles Recovere	d	0										
	Office	r		ID			Officer Sig		_					Supervisor			(15721)		
ID			E <i>LD, J.</i> Signatur	S. (15016)	2	WILLIAMS, K. A. (15631)  Case Disposition:							. (13631)						
Status	Comp	iamalli	Signatul(	_			Case Statu:  Further  Inact  Closed	Inve ive /Clea	ared			☐ Unfoun☐ Cleared☐ Cleared☐	ded by Ai by Ai	Locarrest	Refuse ther Ag	gency	ooperate Г	Page 1	