I N	Agenc	y Name		STON-SALEN	1 PC	OLICE	] IN	INCIDENT/INVESTIGATION							OCA 2409878			
C ·	ORI	NC					REPORT							Date Mor	Date / Time Reported SMTWFS Month Day Yr Time			
D E	NC NC 0340200 Crime Incident(s)								Att At Found SMTWIFS Month Day Yr Time						Day   Time   Oli 28 Hrs.			
N T	#1			, Trespassi	ng			_	Com	Month 03	Day '		Time 01:28   H				Time $01:27$ Hrs.	
D.	#2	Crime I	ncident	1	0				Att	Location	of Incide	ent				•	Offense Tract	
A T	Colors Institute															01 Victim Resid	111	
A	#3	omic i	nerdent					Att Premise Type Com						☐ Single Family ☐ Multi Family				
МО			d or Con MITTEI						•				Forcible Yes	EXIN/A		eapon / Tools		
	No No															Alashal Hasi		
	# of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:    Society   Government   Financial Institute   Broken Bones   Severe Lacerations   Yes   Unknown																	
V	2			igious 🔲 L.E. Off			ity 🔲 Othe	er/Un	know		Internal	Un	conscious	Othe	r Majo	or 🔼 N	lo □N/A	
I C		Victim/	Business	Name (Last, First,	Middl	le)		Victim of Crime #					OB / Age		Sex	Relationshi To Offende		
T I	V1		DA	ΓA OMITTED						1,			W	M	1RU	☐ Non-Resident		
М -	Home	Addre	ss		D.	ATA OMI	MITTED						Home Phone					
	E1 N/A 11							TA OMITTED							Business Phone			
	VYR	M	Model							Vin								
					Sty													
O T H E R S I N V O L V E D		DATA OMITTED																
Status Codes	(Chec	k "OJ"	= Stolen column	R = Recovered frecovered for other	D = D r juris	Damaged sdiction)	Z = Seized	B =	Burn	ed C = C	Counterfe	eit / Forg	ged F = Fo	und				
	Victim # DCI Status Value OJ QTY						Property Description							Ma	ike/Mo		Serial Number	
- - P - R														D	ATA OMITTED FOR			
					+											]	NFORMATION	
					$\top$												SECURITY	
O P -																	PURPOSES	
Ē -					_												NLY THE FIRST	
R T					+	+											LVE PROPERTY	
Y					+												ITEMS ARE	
																I	DISPLAYED ON	
																	P2C REPORTS	
-	Num1	or of V	ehicles S	tolen 0	Nym	ber Vahi	cles Recovere	d	0									
	Office		emeies S	tolen 0		ber venic	Officer Sig		e e				Supervi	or Signa	ture			
ID	PER	RY, A	. T. (16	(206)								STU.	MP, J.	K. (1	4922)			
Status	Compl	lainant	Signatur	2			☐ Further  【X Inact ☐ Closed								tradition Declined			
							☐ Closed	/Lead	is Ext	nansted		eath of O	ttender	Prose	ecutio	n Declined	Page 1	