I N	Agenc	y Name		STON-SALEN	OLICE	IN	ICIDENT/INVESTIGATION						OCA 2410186						
I C	ORI	NC	NC 034	10200				REPORT						Date / Time Reported SMTWTFS Month Day Yr Time					
D E			ncident(s				Δtt	At Foun	nd	SM				 Know	Time 24 12:09 Hrs. SMTWTFs				
N T	#1			, Assault-non Agg	ı —	☐ Att At Found S M T W T F S Last Known Secure S M T Time Last Known Secure S M T Time Month Day Yr Time Time O3 23 2024 12:08									Time				
D.	#2		ncident				Att	Location	ı of	Incident		•			•	Offense Tract			
A T	Crime Incident																	324	
A	#3	Jillie i	neident					☐ Att Premise Type ☐ Com						Victim Residence Type ☐ Single Family ☐ Multi Family					
МО			d or Com		!						Forcible Yes	X N/A	We	apon / Tools	:				
	# of V	ictims	Туре	☐ Person		Rusiness				Injur	v	☐ None	LALV.	□ No	Loss	f Tee	th Drug/	Alcohol Use:	
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow															ldes □ Unknown			
V I		Victim/		igious L.E. Off Name (Last, First,			ity Othe	er/Ur	nknow	n _		ternal Victim of		scious B / Age	Other Race				
C T	V1	v ictiii/							Crime #	DOI	57 Age 57	Race	sex	To Offende	Resident				
I	` -		DA	ΓA OMITTED					1,			A	F	1RU	☐ Non-Resident ☐ Unknown				
М -	Home Address DATA OMIT									TTFD						Home Phone			
	Employer Name/Address DATA OMI														Business Phone				
	VYR	Color Lic/Lis Vin						Vin											
О																			
T H																			
E	E																		
R S																			
	DATA OMITTED																		
I N																			
V																			
O L																			
V E																			
D																			
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column	R = Recovered for other	D = er iur	Damaged risdiction)	Z = Seized	B =	= Burr	C = 0	Cou	ınterfeit / F	orged	F = Found	d				
	Victim		Status		QTY	Property Description								Mal	ce/Mo	odel	Serial Number		
- - P -	#	# DCI Status Value OJ QTY Property Description									11141	10, 1110		OATA OMITTED					
																		FOR	
																		INFORMATION SECURITY	
R O																		PURPOSES	
Р ⁻ Е -																			
R																		NLY THE FIRST	
Т Ү -																	TWE	LVE PROPERTY	
																		ITEMS ARE DISPLAYED ON	
-																		P2C REPORTS	
_																			
	Numb		ehicles S			mber Vehi	cles Recovere Officer Sig		0 re				ī	Supervisor	Sionat	ure			
ID	HARRISON, B. M. (15721)								COX,							or Signature <i>C. M.</i> (15574)			
	Complainant Signature Case State									tion		Case Dispos ☐ Unfoun		□ Loca	ated		□ E:	tradition Declined	
Status					ive		- •		Cleared	by Aı	rest by Ano	Refus	e to C	ooperate					
							☐ Closed			hausted				rest by Ano				Page 1	