I N	Agenc	y Name		ISTON-SALEN	OLICE	] IN	INCIDENT/INVESTIGATION							OCA 2410454						
I C	ORI	NC	NC 02	10200	1	REP	REPORT						Date/Time Reported SMTWTFS Month Day Yr Time 03   25   2024   16:44 Hrs.							
D E			NC 034				Λ++ I	At Found	d	I sl-M	l Tl W	TIFIS	03		25   20	024	<i>16:4</i> 4 н: МТМТГ			
N T	#1							Att   At Found   SM TWTFS   Month Day Yr Time   Time   25   2024   16:44   F								Month Day Yr Time				ırs.
D.	#2	Crime I	ncident						Att Location of Incident Offense										ffense Tract	
A		7 T						_	Com			-	ıb Ra	l/old Vine	eyard I		Listing Des		324	
T A	#3	Jillie 1	ncident					☐ Att Premise Type ☐ Com							Victim Residence Type  ☐ Single Family ☐ Multi Family					
МО			d or Com MITTED						•					Forcible  Yes  No	X N/A	We	apon / Too	ols		
	# of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:															ohol Use:				
V	1			ciety Governm			inancial Institu		know			oken Bone		Severe	Lacerat Other			Yes No	Unknov	иn
I	Victim/Business Name (Last, First, Middle)  Victim of DOB / Age Ra														Race	<u> </u>	Relations	hip 1	□N/A Resident Sta	
C T	V1		DA	ΓΑ OMITTED							C	Crime #					To Offen		☐ Resident ☐ Non-Resi ☐ Non-Resi ☐ Resident ☐ Non-Resident ☐	
I M ·												1,							Unknowr	
	Home	Addre	SS		ATA OMI	ITTED								Home Phone						
•	Emplo	yer Na	me/Addı	ATA OMI	ГА ОМІТТЕО							Business Phone								
•	VYR Make Model Style						Color Lic/Lis Vin						Vin							
O T H E R S I N V O L V E	DATA OMITTED																			
Ь																				
Status Codes	(Chec	k "OJ"	= Stolen column i	R = Recovered for other	D = [ r juri:	Damaged sdiction)	Z = Seized	B =	Burn	C = C	Cour	nterfeit / F	orged	F = Foun	d					
	Victim # DCI Status Value OJ QTY					QTY	Property Description								Mak	ake/Model Serial Number				
-														DAT	A OMITTE	D				
P - R - O																		INF	FOR ORMATION	
																			ECURITY	_
																		P	URPOSES	
Р <sup>-</sup> Е -																				
R																			Y THE FIR	
Т Ү -					_												TW		E PROPERT	
-					-														PLAYED O	
-																			CREPORTS	
-																				
	Numb		ehicles S	tolen 0		ber Vehic	cles Recovere		0				- 1	Supervisor	Signat	ıre				_
ID	STA.	RKE,	M. J. (	15935)	Officer Sig									or Signature AUGHAN, A. M. (14884)						
	Comp	lainant	Signatur	e	Case Status	Status Case Disposition:						□ Loc								
Status							☐ Closed	ive /Clea	ıred			Cleared Cleared	by Ar	rest by And	Refuse other Ag	gency	ooperate		Page 1	<u> </u>