I N	Agenc	y Name		STON-SALEN	OLICE	] IN	INCIDENT/INVESTIGATION							OCA 2410748					
C ·	ORI	NC				REPORT							Date / Time Reported SMTWTFS Month Day Yr Time						
D E			NC 034			☐ Att At Found SMTW되FS Month Day Yr Time							Day   Time   O3   28   2024   O8:14 Hrs.						
N T	#1			, Trespassi	ng			LX (	- 1	Month 03	Day			ime :14  Hrs				Time   08:13   Hrs.	
D.	#2	Crime I	ncident							Location	of Incid	ent		•				Offense Tract	
A T	Colors Institute														salem .		27106 Victim Resid	123	
A	#3	Jime 1	nerdent					Com							☐ Single Family ☐ Multi Family				
МО			d or Com MITTEE											Forcible Yes [	X N/A	We	Weapon / Tools		
	# of Victims   Type   Person   Main   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:															Alcohol Use:			
	2 Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown															es Unknown			
V I		Victim/		igious  L.E. Off Name (Last, First,			ity   Othe	er/Unl	know	n	Internal Victir			/ Age	Other				
C T	V1							Crime		DOD	, rigo	race	BUA	To Offender	Resident				
I M ·			DA.	ΓA OMITTED							1,							☐ Non-Resident	
IVI ·	Home Address DATA O								OMITTED							Home Phone			
	Emplo	ATA OMITTED								Business Phone									
•	VYR	M	ake	Model	Sty	/le	Color		Lic	/Lis				Vin					
T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes	L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found (Check "OJ" column if recovered for other jurisdiction)																		
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo	del S	erial Number	
- - P - R	п	π 201 Saatus Value 03 Q11						corporation and the second										ATA OMITTED	
					_												Т	FOR NFORMATION	
																	1	SECURITY	
0																		PURPOSES	
Р <sup>-</sup> Е -																			
R T																		NLY THE FIRST LVE PROPERTY	
Y -																	I WE	ITEMS ARE	
																	Г	DISPLAYED ON	
_																		P2C REPORTS	
-					$\prod$														
	Numb		ehicles S	tolen 0		nber Vehic	cles Recovere Officer Sig		<u>0</u> е				Т	Supervisor	Signati	ıre			
ID	TAY	LOR,	(6205)			BOIS							SEY, S. G. (15475)						
	Comp	lainant	Signatur	e		1	Case Status Case Disposition:  ☐ Further Investigation ☐ Unfounded ☐ Lo							ated		□ Ex	tradition Declined		
Status							☐ Closed	tive /Clea	red		Clo	eared b eared b	y Arı y Arı	rest December	Refuse other Ag	ency	ooperate Γ	Page 1	