I N	Agenc	y Name		STON-SALEN	л 1 Р	OLICE] IN	CIDENT/INVESTIGATION						OCA 2411273						
C ·	ORI	NG					REPORT						Date / Time Reported SMTWTFS Month Day Yr Time							
D E			NC 034				۸ 44 ا	At Foun	nd.	l sl.	ปร.	TIFIS	04		01 202	71me 24 10:25 Hrs. SMTWTFS				
N T	#1) Obsenity/ Pornog	ation	ı —	Att Com	Month 04	D			T F S Time D:25 Hrs			n Secure Day Yr 01 2024	Time $10:24$ Hrs.					
D .	#2		ncident	osenity, I ornog	5, cip	Try Trott		\vdash	Att	Location			1 10	7.23 1111	<u> </u>	<u> </u>	01 2024	Offense Tract		
A	Com 4829 S Main St/barnes Rd, Wins																	212		
T A	#3	rime i	ncident						Att Com	Premise	тур	pe				- 1	Victim Resid	ience Type nily ∏Multi Family		
МО			d or Com								Forcible Yes	X N/A	We	apon / Tools	:					
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															Alcohol Use:				
																Yes □ Unknown				
V I		Victim/		igious L.E. Off Name (Last, First,			ity Othe	er/Ur	ıknow	n 🗆	_	ternal Victim of		scious [Other Race					
C T	V1 DATA OMITTED														race	БСА	To Offende	r Resident		
I M			DA	IA OMITTED				1,						☐ Non-Resident						
IVI ·	Home Address DATA OMIT									ГТЕО						Home Phone				
•	Employer Name/Address DATA OMI								 FTED							Business Phone				
•	VYR	M	ake	Model	St	yle	Color		Lie	c/Lis				Vin						
T H E R S I N V O L V E D	DATA OMITTED																			
Status Codes	L = L	ost S k "OJ"	= Stolen	R = Recovered f recovered for other	D = er iur	Damaged risdiction)	Z = Seized	B =	Burn	C = 0	Cou	ınterfeit / F	orged	F = Foun	d					
	Victim # DCI Status Value OJ QT						Property Description							Mak	e/Mo	odel :	Serial Number			
	"								1 7									ATA OMITTED		
- P - R					\dashv													FOR INFORMATION		
					\dashv													SECURITY		
0																		PURPOSES		
Р ⁻ Е -																				
R T					\dashv													NLY THE FIRST LVE PROPERTY		
Y ·																	1 WL	ITEMS ARE		
-					\dashv]	DISPLAYED ON		
																		P2C REPORTS		
-					\Box		1 5	1												
	Numb		ehicles S	tolen 0		mber Vehi	cles Recovere Officer Sig		0 re				ı	Supervisor	Signati	ıre				
ID	VANBUREN, M. A. (15828)								ÀLLE								r Signature N, M. K. (14526)			
	Comp	lainant	Signatur	e	Case Status		estiga	tion		Case Dispos ☐ Unfoun		□ Loc	ated		□ Es	tradition Declined				
Status							☐ Closed	tive /Clea	ared			☐ Cleared	by Ail by Ai	rest by And	Refuse other Ag	gency	ooperate	Page 1		