I N	Agenc	y Nam		NSTON-SALEN	и Р	POLICE	, IN	CIE	IDENT/INVESTIGATION					OCA 2411488					
C I	ORI									REPORT						Date / Time Reported SMIWTFS Month Day Yr Time			
D E			NC 034							1.5	, [d	M TI	1 11 11 11	04		02 2024			
N	#1	rime i	ncident(s		☐ Att						Last Known Secure SMIWTFS Month Day Yr Time								
T	Crime Incident Date Location of Incident												2:59 Hrs	04	10		13:30 Hrs. Offense Tract		
D A	□ Com 3890 Old Vineyard Rd Apt. 74B, Wi																324		
T A	#3	Crime I	ncident						☐ Att Premise Type ☐ Com						Victim Residence Type ☐ Single Family ☐ Multi Family				
	How A	Attacke	d or Con	nmitted				Forcible					Forcible	Weapon / Tools					
MO	D	ATA C	MITTEI)									☐ Yes ☐ No	X N/A	4				
	# of V	ictims	1 **	☐ Person	_	Business				Injury		_	/linor □	Loss o	f Teet	_	lcohol Use:		
V	1															_			
I		Victim/		Name (Last, First,			aty 🔲 Otak	<i></i>	itilo W	<u>" </u>	Victim o		B / Age	Race	Sex	Relationship	Resident Status		
C T	V1 DATA OMITTED Crime # 19															To Offender			
I M											1,			В	M		Unknown		
	Home Address DATA OMIT									TTED					Home Phone				
	Employer Name/Address DATA OMI									TTED					Business Phone				
	VYR	ake	Model	Color	or Lic/Lis Vin														
О																			
T																			
H E																			
R S																			
	DATA OMITTED																		
I N	DATA OMITTED																		
V	i I																		
O L																			
V E																			
D																			
Status Codes	L = L	ost S	= Stolen	R = Recovered	D=	Damaged	Z = Seized	B =	Burn	ed C = C	Counterfeit /	Forge	F = Found	d					
Coucs	Victim									Proporty Description					Make/Model Serial Number				
	# DCI Status Value OJ QTY 1 07 7							Property Description ION 5						SONY/I			ATA OMITTED		
																	FOR		
Р -																IN	FORMATION		
R O																	SECURITY PURPOSES		
Ρ.																	TORTOBLE		
E ·																	ILY THE FIRST		
Т Ү.																TWEL	VE PROPERTY		
																D	ITEMS ARE ISPLAYED ON		
-																	22C REPORTS		
-																			
	Numb Office		ehicles S	Stolen 0		mber Veh	Officer Sig		<i>0</i>				Supervisor	Signat	ıre				
ID	WASZCZENIUK, L. (15222)								-	Т	G:		WELLS	S, S. S	(15	941)			
	Complainant Signature Case State									Case Disposition: Investigation Unfounded Located Extradition Dec							radition Declined		
Status								ive	ve Cleared by Arrest Refuse to Cooperate										
							☐ Closed			hausted			ender \Box				Page 1		