I N	Agenc	y Name		NSTON-SALEN	IN	INCIDENT/INVESTIGATION							OCA 2411786						
C .	ORI	NC				REPORT							Date / Time Reported SMTWTES Month Day Yr Time						
D E			NC 034			☐ Att At Found SMTWTFS Month Day Yr Time							Day Time 12.45 Hrs.						
N T	#1			, Trespassi	ng			_	Com	Month 04	D			ime 2:45 Hrs			Day Yr 🗀	Time 12:44 Hrs.	
D.	#2	Crime I	ncident						- 1	Location	of	Incident						Offense Tract	
A T		rime I	ncident						Com	Nb 42 Premise			s Stro	tford Rd	Ra, W		on-salem Victim Residen	321	
A	#3								Com	110111100	-71							ly □Multi Family	
МО			d or Con MITTEI					-						Forcible Yes	X N/A	We	apon / Tools		
	# of Victims Type Person X Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															lcohol Use:			
3.7	2 Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown Internal Unconscious Other Major															_			
V I		Victim/		Name (Last, First,			uty 🔲 Ouk	21/ (31)	KIIOW	<u>" </u>		Victim of		B / Age	Race	-	Relationship	Resident Status	
C T	V1 DATA OMITTED Crime #																To Offender	☐ Resident ☐ Non-Residen	
I M ·												1,						☐ Unknown	
	Home Address DATA OMI									TTED						Home Phone			
	Emplo	me/Add	ATA OMI	OMITTED							Business Phone								
•	VYR	M	Model	Color		Lic	c/Lis				Vin								
T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes	L = L	ost S	= Stolen	R = Recovered	D =	Damaged isdiction)	Z = Seized	B =	Burn	ed C = 0	Cou	ınterfeit / F	orged	F = Foun	d				
	Victim #			Property Description								Mak	e/Mo	odel Se	rial Number				
- - P - R	π	# DCI Status Value OJ QTY Property Description									11141	.0,1110		TA OMITTED					
																	IN	FOR FORMATION	
																		SECURITY	
0																		PURPOSES	
Р ⁻ Е -																			
R T					-													LY THE FIRST VE PROPERTY	
Y					\dashv	+												ITEMS ARE	
-																		SPLAYED ON	
																	P	2C REPORTS	
-	NT .		-1-: 1 ~	4-1) , ,		-1 P	1	0										
	Numb Office:		ehicles S	tolen 0		mber Vehi	cles Recovere Officer Sig		e e				I	Supervisor	Signati	ıre			
ID	PHI.		MCKAUĞHAN, A. M. (14884)									34)							
a. ·	Comp	lainant	Signatur	e		☐ Furthe	Case Status ☐ Further Investigation ☐ Inactive Case Disposition: ☐ Unfounded ☐ Located ☐ Cleared by Arrest ☐ Refuse to Coopera							Extr	adition Declined				
Status								/Clea		hausted		Cleared	l by Aı	rest by And	other Ag	gency		Page 1	