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I N	Agenc	y Name		NSTON-SALE	M P	OLICE	INCIDENT/INVESTIGATION REPORT							OCA 2411908					
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T A	#3													Victim Residence Type ☐ Single Family ☐ Multi Family					
	How A	Attacke	d or Con	mitted				Com					Forcible			ngle Fan n / Tools	, []	liti Family	
MO	DATA OMITTED															1, 1001			
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use															Jse:			
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ID			, <u>M. L</u> .	(16131)	D#		Officer Sig	Officer Signature Supervis							or Signature LINS, B. H. (15079)				
Status	Comp	lainant	Signatur	e			Inact	her Investigation Unfounded Located							tradition	Declined			
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