| I N | Agency N | | NSTON-SALE | LICE | , IN | NCIDENT/INVESTIGATION | | | | | OCA 2411911 | | | | | | |
|---|---|---|---|------|-------------|-----------------------|---|----------------------|-----------------|----------------|-------------|-----------------------------|---|-------|----------------------------|--|--|
| C I D E N T D A T | ORI | | | | | | | REPORT | | | | | Date / Time Reported S M T W T F S Month Day Yr Time | | | | |
| | NC NC 0340200 | | | | | | | Att At Found SMTWTFS | | | | 04 06 2024 13:04 Hrs. | | | | | |
| | #1 Crime Incident(s) <i>Automobile Theft</i> | | | | | | | At Four Month | Day Yi | r Ti | me | 1 | own Secur Day | Yr 🛏 | SMTWT∄S Time | | |
| | Crit | me Incident | | | ⊠ Com | 04 Location | 06 202 | 24 13: | 04 Hrs | 04 | 05 2 | | 19:57 Hrs. Offense Tract | | | | |
| | $= \pm 2$ | | | | | | | | | | | | | | | | |
| | #3 Crit | me Incident | | | | | Att Premise Type | | | | | Victim Residence Type | | | | | |
| A | | 1 1 0 | * 1 | | | | Com | | | | | Single Family Multi Family | | | | | |
| MO | | acked or Con | | | | | Forcible Yes No | | | | | e Weapon / Tools | | | | | |
| V I C T | 2 Government Financial Institute Broken Bones Severe | | | | | | | | | | | | □ Loss of Teeth Drug/Alcohol Use: e Lacerations □ Yes Unknown □ Other Major ⊠ No □N/A | | | | |
| | 2 □ Religious □ L.E. Officer Line of Duty □ Other/Unknown □ Internal □ Unconscious □ Victim/Business Name (Last, First, Middle) Victim of DOB / Age | | | | | | | | | | | | | nship | | | |
| | V1 | | | | / | | | | Crime # | 202, | 1180 | Race S | To Off | | X Resident | | |
| Ι | | DA | ATA OMITTED | | | | | | 1, | | | | | | □ Non-Residen □ Unknown | | |
| М | Home A | ddress | | | D | | FTED | | | | | H | Iome Phon | e | | | |
| | Indicase DATA OMI Employer Name/Address DATA OMI | | | | | | | | | | | Business Phone | | | | | |
| | | | | | | | | | | | | | | | | | |
| | 2022 | | | | | | | | | 7T2C09NCH62844 | | | | | | | |
| T H E R S I N V O L V E D | DATA OMITTED | | | | | | | | | | | | | | | | |
| Status Codes | | | n $R = Recovered$ if recovered for oth | | | | B = Burr | ied C = | Counterfeit /] | Forged | F = Found | 1 | | | | | |
| P · R | Victim | | | | Ĺ | | | | | | | | | | | | |
| | #DCIStatusValueOJQTY21167DRUGS/ | | | | | | Property Description ARCOTICS EQUIPMENT | | | | | Make/ | wodel | ~ ~ | rial Number | | |
| | 2 11 6 7 DROGS/MILCOTICS EQUIPMENT 2 11 6 6 DRUGS/NARCOTICS EQUIPMENT | | | | | | | | | | | | | FOR | | | |
| | 1 1 | PCA 7,5 | | | 1 | 2022 BLK , | ID17969 | 2 NC | | | E | 3MW 740 | i | IN | FORMATION | | |
| | 1 1 | PCA 5 | | | 1 | 2022 BLK , | ID17969 | 2 NC | | | E | 3MW 740 | i | | SECURITY | | |
| O P | | | | | | | | | | | | | | | PURPOSES | | |
| E | | | | | | | | | | | | | | 0 | ILY THE FIRST | | |
| R T Y | | | | | | | | | | | | |] | | VE PROPERTY | | |
| | | | | | | | | | | | | | | | ITEMS ARE | | |
| | | | | | | | | | | | | | | D | ISPLAYED ON | | |
| | | | | | | | | | | | | | | P | 2C REPORTS | | |
| | Number | Number of Vehicles Stolen I Number Vehicles Recovered I | | | | | | | | | | | | | | | |
| | Officer | | I | D# | vei veill | Officer Sig | - | | | S | Supervisor | Signature | ; | | | | |
| ID | | | | | | | | | | | | RKS, C. M. (15216) | | | | | |
| Status | X Further Investigation □ Unfounded □ Le | | | | | | | | | | | Refuse to Cooperate | | | | | |
| | | | | | | | Leads Ex | hausted | | | | | ion Declin | ed | Page 1 | | |