I N	Agenc	y Name		NSTON-SALEN	OLICE] IN	INCIDENT/INVESTIGATION							OCA 2412013					
C ·	ORI	NG			02102	REPORT								Date / Time Reported S M T W T F S Month Day Yr Time					
D E	10		NC 034			I								04 07 2024 09:13 Hrs.					
N T	#1	Time ii	icident(s) Drug Violai	Att At Found S M T W T F S M T W T F								Last Known Secure SMTWTFS Month Day Yr Time 04 07 2024 09:12 Hrs.						
D .	#2	Crime I	ncident	Drug roun		,			\rightarrow	Location	<u> </u>		<i>F</i> 09	7.13	<u> </u>	<u> </u>		Offense Tract	
A	A ☐ Com 3171 Peters Creek F														ı-saler			313	
T A	#3	rime I	ncident					☐ Att Premise Type ☐ Com							Victim Residence Type ☐ Single Family ☐ Multi Family				
МО			d or Con MITTEI		Forcible ☐ Yes ☐ No						Weapon / Tools								
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															lcohol Use:			
3.7	1			ciety Governm	ent	☐ Fi	inancial Institu		len over	. –		en Bone		□ Severe				s Unknown	
V I	1	Victim/		Name (Last, First,			nternal Unconscious Unconscious Unconscious				Majo Sex		□N/A Resident Status						
C T	V1			ΓA OMITTED	Crime #					. 8			To Offender	☐ Resident ☐ Non-Resident					
I M				IA OMITIED	1,									Unknown					
141	Home Address DATA OMI									TTED						Home Phone			
	Employer Name/Address DATA ON															Business Phone			
	VYR	Model	Color Lic/Lis Vin							Vin									
				1	<u> </u>				<u> </u>										
O																			
T H																			
E																			
R S																			
	DATA OMITTED																		
I N	DATA OMITTED																		
V	V																		
O L																			
V E																			
D																			
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column	R = Recovered	D = l er iuri	Damaged isdiction)	Z = Seized	B =	Burn	c = C	Counte	erfeit / F	orged	F = Foun	d				
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo	odel Se	rial Number	
- - P -	π														11111	.0, 1,10		TA OMITTED	
					_												n	FOR	
					\dashv												IN	FORMATION SECURITY	
R O					_													PURPOSES	
Р ⁻ Е -																			
R					_													LY THE FIRST	
T Y					_													VE PROPERTY ITEMS ARE	
					\dashv													SPLAYED ON	
-																	P	2C REPORTS	
-	NI '	on -£ 77	abiata C	tolon	N:	nhog W 1	alaa D :	a	0										
	Office	r	ehicles S	ID		nber vehic	cles Recovere Officer Sig		e e				ı	Supervisor					
ID	COX	K, C. 1	1. (155	74)			<i>MEADOWS, C. E.</i> (15570)									E. (15570)			
	Comp	aınant	Signatur	e	☐ Further	ase Status Case Disposition: ☐ Further Investigation ☐ Unfounded ☐ Lo						Loc	cated Extradition Declined						
Status					☐ Inact	ctive Cleared by Arrest Refuse to Coopera							ooperate						
							☐ Closed			hausted				nder \Box				Page 1	