I N	Agenc	y Name		VSTON-SALEN	OLICE	IN	INCIDENT/INVESTIGATION						OCA 2412142					
C	ORI	NC				REPORT							Date / Time Reported SMTWTFS Month Day Yr Time					
D E	10	NC 034			☐ Att At Found							Day IF Time 04 08 2024 II:41 Hrs. Last Known Secure SMTWTFS Month Day Yr Time						
N T	#1			Missing Pe	rson			ı —	Com	Month 04			Time 1:41 Hrs			Day Yr 🗀	Time $11:40$ Hrs.	
D	#2	Crime I	ncident							Location	of Incident		•				Offense Tract	
A T	Crime Institute															Victim Reside	123	
A	#3	Jime 1	nerdent					Com					☐ Single Family ☐ Multi Family					
МО			d or Com MITTEE										Forcible Yes	X N/A	We	apon / Tools		
	# of Victims Type None Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															lcohol Use:		
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow																	
V I		Victim/		igious L.E. Off Name (Last, First,			ity 🔲 Othe	er/Un	know	n 🗆	Internal Victim of		nscious B / Age	Other			□N/A Resident Status	
C T	V1	v ictiii/			viidd	10)		Crime #					29	Kace	Sex	To Offender		
I	DATA OMITTED										1,			В	M		☐ Non-Resident	
M	Home Address DATA ON								IITTED						Home Phone			
	E1 N /A 11							TA OMITTED						Business Phone				
,	VYR	M	Model	Color Lic/Lis Vin						Vin								
									<u> </u>									
О																		
T H																		
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I	DATA OMITTED																	
N																		
V O	V 0																	
L V																		
E D																		
Ъ																		
Status	s L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found																	
Codes	(Chec	k "OJ"	column i	f recovered for other	r juri	sdiction)							1 10000					
	# DCI Status Value OJ QTY					QTY	Property Description							Mal	ce/Mo		rial Number	
- P - R -					+											DA	TA OMITTED FOR	
					1											IN	FORMATION	
																	SECURITY	
O P .					_												PURPOSES	
E ·					+											ON	ILY THE FIRST	
R T					+												VE PROPERTY	
Υ .					\dashv												ITEMS ARE	
																	SPLAYED ON	
					_											P	2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Nun	nber Vehi	cles Recovere	d	0				<u> </u>					
	Office	r		ID		ciii		Officer Signature Supervisor Signature										
ID			J. W. (Signature	(15579) e		Case Status							LLINS, B. H. (15079)					
G4 ·	- Jinp			-		☐ Further	☐ Further Investigation ☐ Unfounded ☐ Located ☐ Extraditi							adition Declined				
Status							Closed	☐ Inactive ☐ Cleared by Arrest ☐ Refuse to Cooperate ☐ Closed/Cleared ☐ Cleared by Arrest by Another Agency ☐ Cleared by Arrest by Another Agency ☐ Death of Offender ☐ Prosecution Declined								Page 1		