							-						-					
I N	Agenc	y Name		STON-SALE	M P	OLICE	INCIDENT/INVESTIGATION REPORT							OCA 2412305 Date / Time Reported SM T F S Month Day Yr Time				
C ·	ORI					02102												
I D		NC	NC 034	40200										04	09) 202	$[24] \ 14.11 \text{ Hrs}.$	
E N		Crime I	ncident(s)			-	🗆 Att	At F Mont	ound	Day Yr	ŦW	T F S ime	Last K	nown Sh Day	Secure Yr	SM <u>T</u> WTFS Time	
T .	#1			Assault-non Ag	gra	vated Ass	sault	X Com	04		09 2024		:11 Hrs				14:10 Hrs.	
D	+2 Crime Incident														0.0710		Offense Tract	
A T	Crime Insident Au Dramics Type																114 ence Type	
A	#3	June 1	neruent														nily ⊓Multi Family	
	How A	Attacke	d or Con	mitted					<u> </u>				Forcible		Weapo	on / Tools		
MO	D.	ATA O	MITTEI)									□ Yes □ □ No	X N/A				
	# of Victims Type A Person Business Injury Alcohol Use:															Alcohol Use:		
	1		🗆 So	ciety 🔲 Governn	nent	🗆 Fi	inancial Institu			_	Broken Bones		□ Severe	Lacerati				
V I				igious L.E. Of Name (Last, First,			ity 🗌 Othe	er/Unknov	vn		Internal			Other N				
Ċ		victim/	Business	Name (Last, First,	Mia	die)					Victim of Crime #	DOR	/ Age 30	Race		lationshi Offende	P Resident Status	
T I	V1		DA	ΓΑ OMITTED							1,		50	W	F	INE	Non-Residen	
M ·	Home	Addre									1,				Home I		Unknown	
	Home	Addre	.33			D	ATA OMI	ГTED							110mc I	none		
	Emplo	oyer Na	ume/Add	ress		D	ATA OMI	MITTED						Business Phone				
	VYR	M	ake	Model	S	tyle							Vin					
						<i>,</i>												
H E R S I N V O L V E D	DATA OMITTED																	
Status	L = L	ost S	= Stolen	R = Recovered	D =	Damaged	Z = Seized	B = Bur	ned C	C = C c	ounterfeit / Fo	orged	F = Found	1				
Codes	(Chec Victim	k "OJ"	column	if recovered for oth	er ju	risdiction)												
-	#							Property Description						Make	e/Model		Serial Number	
													D	ATA OMITTED FOR				
																I	NFORMATION	
P- R																-	SECURITY	
0																	PURPOSES	
Р ⁻ Е -																		
R																0	NLY THE FIRST	
T Y -																TWE	LVE PROPERTY	
-																	ITEMS ARE	
-																	DISPLAYED ON P2C REPORTS	
-																	1 2C REI OR I S	
-	Numb	er of V	ehicles S	tolen 0	Nu	mber Vehic	cles Recovere	d 0										
	Office		ע 1	II	D#		Officer Sig	-					Supervisor	Signatu	re	(2)		
ID		,	. <i>B. (16</i> Signatur	/			Case Status	s			Case Disposi	ition [.]	BOGEI	τ, J. C.	(1494	<i>+5)</i>		
	comp	amant	Signatur	~			☐ Further	□ Further Investigation □ Unfounded □ Lo										
Status													□ Refuse to Cooperate					
							Closed		hauste	d	Death of			Prosect		eclined	Page 1	