I N	Agenc	y Name		NSTON-SALE	CIE	CIDENT/INVESTIGATION						OCA 2412416							
C	ORI	NC	NC 034	40200	1		REPORT							Date / Time Reported SMTWTFS Month Day Yr Time					
D E	10	Att At Found SMTATFS  Month Day Yr Time								Day YF Time   O4   10   2024   11:40 Hrs.   Last Known Secure   S M T W T F S   Month Day Yr Time   Time   Month Day Yr   Time   Time   Month Day Yr   Month									
N T	#1		ncident(s Para	, phernalia- Usin	ıg/ E	Equipme	nt	ı —	Com	Month 04	D			lime  :40  Hrs				Time 4 11:39 Hrs.	
D	#2	Crime I	ncident	-		1 1			Att	Location	of	Incident						Offense Tract	
A T		Trimo I	ncident	Trespassi		_	☐ Att Premise Type							ton-salem NC 222   Victim Residence Type					
A	#3	Jiiiie i	ncident			Com	Tremise	ı yı	pe .						nily				
МО			d or Con MITTEI		Forcible Yes						Weapon / Tools								
	# of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:															Alcohol Use:			
	2 Society Government Financial Institute Broken Bones Severe Lacerations Yes Unl															Yes Unknown			
V I		Victim/		igious ☐ L.E. Of Name (Last, First,			uty   Othe	er/Ur	ıknow	n _		ternal   Victim of		scious [	Other	<del>-</del>			
C T	Crime #																To Offende	Resident	
I M			DA	IA OMITTED					1,						☐ Non-Resident				
IVI ·	Home	Addre	ess		ГТЕ	TTED							Home Phone						
	Employer Name/Address DATA OMI'														Business Phone				
,	VYR Make Model Style Co							Color Lic/Lis Vin						Vin					
O T H E R S I N V O L V E D	DATA OMITTED																		
Status																			
Codes	Victim				Ť	Í		D D						T		Make/Model Serial Number			
	# 1								Property Description  COTICS						Mak	e/Mc		Serial Number OATA OMITTED	
P - R _																		FOR	
																		INFORMATION	
																		SECURITY PURPOSES	
O P				+														PURPUSES	
E ·																	(	ONLY THE FIRST	
T Y																	TWI	ELVE PROPERTY	
																		ITEMS ARE	
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					$\dashv$													P2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Nui	mber Veh	cles Recovere	d	0										
TD.	Office	r		ID		Officer Sig		ture Supervisor Signature											
ID	MAYHEW, N. A. (16160)  Complainant Signature  Case Statu									Case Disposition:							14/03)		
Status	comp		<u></u>	-			☐ Further ☐ Inact ☐ Closed	r Inve tive /Clea	ared			☐ Unfoun☐ Cleared☐ Cleared☐	ded by Ai by Ai	Loc rrest rrest by And	Refuse other Ag	gency	ooperate	ctradition Declined Page 1	