| I | Agenc | y Name | | STON-SALE | | INCIDENT/INVESTIGATION | | | | | | | OCA 2412552 | | | | | | |
|--|---|---------------------------|--------------------|------------------|----------------------|------------------------|--|-------------------------------------|-----------------|-----------------|---|---------------------|---------------------------------|--|---|---------------------------------|-----------------------------|--|--|
| N C | ORI | | WII | REPORT | | | | | | | Date / Time Reported S M T W F S Month Day Yr Time | | | | | | | | |
| I D | | | NC 034 | | | | | | | | 04 11 2024 11:11 Hrs. | | | | | | | | |
| E N | #1 | Crime I | ncident(s | · | | | Att | Mo | t Found onth | Day Yr | I | <u></u> F S Time | | | v Yr' | S M T W I F S Time | | | |
| Т | | Crime I | ncident | Missing Po | ersoi | n | | ⊠ Con □ Att | | 04 ocation | <u>11 2024</u> of Incident | 1 11 | :11 Hrs | 04 | 11 | 2024 | 11:10 Hrs Offense Tract | | |
| D A |) #2 | | | | | | | | | | | | | | n NC | 27105 | 223 | | |
| T A | #3 | Crime I | ncident | | | | | Att Premise Type | | | | | | Victim Residence Type □ Single Family □Multi Family | | | | | |
| МО | | | d or Con MITTEI | | | | | - | - | | | | Forcible □ Yes [□ No | X N/A | Weapo | on / Tools | | | |
| v | # of Victims Type A Person Business Injury None Minor | | | | | | | | | | | | | | | Loss of Teeth Drug/Alcohol Use: | | | |
| | I Society Government Financial Institute Broken Bones Seven I Religious L.E. Officer Line of Duty Other/Unknown Internal Unconscious | | | | | | | | | | | | | | $\begin{array}{c c} & \Box & Yes & \Box & Unknown \\ \hline & Other & Major & & & & & \\ \hline & & No & & & & N/A \end{array}$ | | | | |
| V I | Image: | | | | | | | | | | | | | | <u> </u> | lationshi | | | |
| C T | V1 | | | TA OMITTED | | | | | | | Crime # | | <i>41</i> | | | Offende | r 🛛 Resident | | |
| I M | | | DA | | | | | | | | 1, | | | | M | | □ Non-Residen □ Unknown | | |
| 111 | Home | Addre | SS | | | D. | ATA OMI | TA OMITTED | | | | | | Home Phone | | | | | |
| | Emplo | oyer Na | me/Add | ress | ATA OMITTED | | | | | | | Business Phone | | | | | | | |
| | VYR | M | ake | Color | I | lic/Li | is | | | Vin | | | | | | | | | |
| O T H E R S I N V O L V E D | | DATA OMITTED | | | | | | | | | | | | | | | | | |
| Status Codes | L = L (Chec | ost S k "OJ" | = Stolen | R = Recovered | D = er iu | Damaged risdiction) | Z = Seized | $\mathbf{B} = \mathbf{B}\mathbf{u}$ | rned | C = C | ounterfeit / F | orged | F = Found | 1 | | | | | |
| - - - P - | Victim | | | Value | Property Description | | | | | | | Make | /Model | | Serial Number | | | | |
| | # | # DCI Status Value OJ QTY | | | | | | Topoty Description | | | | | | | | | ATA OMITTED | | |
| | | | | | | | | | | | | | | | | | FOR | | |
| | | | | | | | | | | | | | | | | I | NFORMATION SECURITY | | |
| R. O | | | | | | | | | | | | | | | | | PURPOSES | | |
| P · | | | | | | | | | | | | | | | | | | | |
| E · R | | | | | | | | | | | | | | | | 0 | NLY THE FIRST | | |
| T Y | | | | | | | | | | | | | | | | TWE | LVE PROPERTY | | |
| ı | | | | | | | | | | | | | | | | | ITEMS ARE | | |
| - | | | | | | | | | | | | | | | | | DISPLAYED ON P2C REPORTS | | |
| - | | | | | | | | | | | | | | | | | | | |
| • | Numb | er of V | ehicles S | tolen 0 | Nu | mber Vehio | cles Recovere | d 0 | | | | | | | | | | | |
| ID | Office MA | r /HEW | NA | (<i>16160</i>) | D# | | Officer Signature Supervisor | | | | | | | | r Signature DON, J. G. (15435) | | | | |
| ID. | | | Signatur | | | | | Case Status Case Disposition: | | | | | | | | | | | |
| Status | - | | | | | | ▼ Further Investigation □ Unfounded □ Lo □ Inactive □ Cleared by Arrest □ □ Closed/Cleared □ Cleared by Arrest by Arrest □ | | | | | | Loca Trest □ Trest by Ano | Refuse to Cooperate | | | | | |
| | | | | | | | Closed | | | sted | Death o | | | Prosecu | | eclined | Page 1 | | |