I N	Agenc	y Name		VSTON-SALEN	1 PC	OLICE] IN	CIDENT/INVESTIGATION						OCA 2412651							
I C	ORI	NC	NC 034	10200	1	REP	EPORT					Date / Time Reported SMTWTFS Month Day Yr Time									
D E			ncident(s		Att At Found SMTWTFS Month Day Yr Time								Day 11 Time O4 12 2024 O2:26 Hrs. Last Known Secure S M T W T F S Month Day Yr Time								
N T	#1	S	Simple 1	Assault-non Agg	grave	ated Ass	sault	ı —	Com	Month 04				ime 2:26 Hrs				<u> </u>	Time 02:25 Hrs.		
D	#2	Crime I	ncident							Location		Incident				2710		Of	fense Tract		
A T	πэ (Crime I	ncident					_	Com Att	Premise 7		-	wins	ston-salen	n NC.		Victim Res	idenc	312 e Type		
A	#3								Com							_			☐Multi Family		
МО			d or Com MITTEI											Forcible Yes No	X N/A	We	apon / Too	ols			
	# of V	ictims	Туре	Ŋ Person	_	Business				Injury		None	ΣM		Loss o			-	ohol Use:		
V	1 Society Government Financial Institute Broken Bones Severe Lacerations Unknown Internal Unconscious Other Major															_					
I C	Victim/Business Name (Last, First, Middle) Victim of DOI														Race		Relations To Offen	hip F	Resident Status Resident		
T I	V1		DA	ΓA OMITTED			1	Crime #		41	117	_			☑ Non-Residen						
M ·	Home	Addre	\$5					1,			W	F Hon	1BG		Unknown						
	DATA OMIT									ΓΤΕD											
	Employer Name/Address DATA OMI									TTED								Business Phone			
•	VYR	M	ake	Model	Sty	yle	Color		Lic	c/Lis				Vin							
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 column i	R = Recovered for other	D = I r juri	Damaged sdiction)	Z = Seized	B =	Burn	C = 0	Cou	nterfeit / F	orged	F = Found	d						
	Victim # DCI Status Value OJ Q					QTY		Property Description				Mak	e/Mo	del	Seria	al Number					
- - P - R -														DAT	A OMITTED						
					_													INF	FOR ORMATION		
																		S	ECURITY		
O P -																		P	URPOSES		
Ē -					_													ONL	Y THE FIRST		
R T					\dashv												TW		E PROPERTY		
Y																		ΙΊ	ΓEMS ARE		
																			PLAYED ON		
-					\dashv													P20	CREPORTS		
-	Numb	er of V	ehicles S	tolen 0	Num	nber Vehi	cles Recovere	d	0												
75	Office	r		ID			Officer Sig		-			Supervisor Signature GRIFFIN R K (15/120)									
ID			3. <i>D. (1</i> Signatur			Case Status							GKIFF	FIN, B. K. (15429)							
Status	P		G				☐ Further ☐ Inact ☐ Closed	r Inve ive /Clea	ared]	☐ Unfoun ☐ Cleared ☐ Cleared	ded by Aı by Aı	Locarest Locarest by Ander	Refuse other Ag	gency	ooperate		Page 1		