I N	Agenc	y Name	e WIN	IN	INCIDENT/INVESTIGATION							OCA 2412930							
C	ORI	NC	NC 034	10200												te/Time Reported SMTWTFS onth Day Yr Time			
D E			ncident(s					Att I	At Four	nd	-S M	I T W	T F S	04		14 2024 yn Secure Day Yr	7 Time 4 03:39 Hrs. S M T W T F S		
N T	#1		`	Discharging F	irec	arm		ı —	Com	Month 04	Ι			T F S Time 3:39 Hrs			Day Yr 🖰	Time $03:38$ Hrs.	
D	#2	Crime I	ncident							Location	n of	Incident						Offense Tract	
A T		'rime I	ncident					_	Com	1099 . Premise		•	d/bue	ena Vista	Rd,	1.	Victim Reside	113	
A	#3	Jime 1	neident				☐ Att Premise Type ☐ Com							☐ Single Family ☐ Multi Family					
МО			d or Com MITTEI						•					Forcible Yes	X N/A	We	apon / Tools		
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															lcohol Use:			
	Society															es Unknown			
V I		Victim/		-			ity Othe	er/Un	know	n _		Victim of			Other Race	<u> </u>			
C T	Crime #														Racc	БСА	To Offender	☐ Resident	
I	' -		DA	ΓA OMITTED	1,									☐ Non-Resident					
M	Home Address DATA OMI									TTED						Home Phone			
	T 1 N /A 11								MITTED						Business Phone				
,	VYR	Color Lic/Lis Vin							Vin										
О																			
T H																			
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R S																			
	DATA OMITTED																		
I N	N V																		
V																			
O L																			
V E																			
D																			
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column	R = Recovered for other	D = : r jur	Damaged isdiction)	Z = Seized	B =	Burn	ed C=	Cot	unterfeit / F	orged	F = Foun	d				
	Victim # DCI Status Value OJ C						Property Description								Mak	e/Mo	odel So	erial Number	
													DA	ATA OMITTED					
P -																	TN	FOR	
					-												11	SECURITY	
R O					_													PURPOSES	
P :																			
R																		NLY THE FIRST	
Т Ү.																	TWEL	VE PROPERTY	
																	D	ITEMS ARE ISPLAYED ON	
-					\dashv													2C REPORTS	
			ehicles S			nber Vehi	cles Recovere		0				-	Cumami-	Ciar	180			
ID	Office: LAN		TER, J.	ID R. (16219)	Officer Sig	Officer Signature Supervisor Signature WILLIAMS, K. A. (15631)													
	Complainant Signature Case Sta									tion		Case Dispos			ated		- Evt	radition Declined	
Status										HOII		Cleared	by Aı	rest Loc] Refuse	e to C	Cooperate	adition Declined	
								Closed/Cleared Cleared by Arrest by Another								r Agency			