I N	Agenc	y Name		VSTON-SALEN	IN	INCIDENT/INVESTIGATION							OCA 2413159							
C	ORI REPORT Date Mc NC 0340200														Date / Mon	te / Time Reported SMIWTFS onth Day Yr Time				
D E			ncident(s		│ ☐ Att │ At Found │ S M 五 W T F S │ Month Day Yr Time							Day IF Time 04 16 2024 01:50 Hrs. Last Known Secure S M T W T F S Month Day Yr Time								
N T	#1		·	Legal Process	ı —										Day Yr Time					
D	#2 Crime Incident																		Offense '	
A T		Crime I	ncident					_	Com	201 N Premise			Win	ston-sale	m NC		<i>V</i> ictim Re	siden	111 ce Type	
A	#3				☐ Att Premise Type ☐ Com						☐ Single Family ☐ Multi Family									
МО			d or Com MITTEI			Forcible Yes														
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															se:				
V	1 Society Government Financial Institute Broken Bones Severe Lacerations Who No NA Religious L.E. Officer Line of Duty Other/Unknown Internal Unconscious Other Major No NA																			
I	Victim/Business Name (Last, First, Middle) Victim of DOB / Age Ra														Race	<u> </u>	Relations	hip	Reside	nt Status
C T	V1 DATA OMITTED																To Offen	der	□ Res	ident 1-Resident
I M		Addre										1,				☐ Unk				
	Home	Addre	SS		ГТЕ	TTED						Home Phone								
	Employer Name/Address DATA OMI									TTED					Business Phone					
1	VYR Make Model Style						Color Lic/Lis Vin							Vin	l					
T H E R S I N V O L V E D	DATA OMITTED																			
Status Codes	L = L	ost S k "OJ"	= Stolen	R = Recovered f recovered for other	D = l r iur	Damaged isdiction)	Z = Seized	B =	Burn	ed C=	Cou	ınterfeit / F	orged	F = Foun	d					
	Victim # DCI Status Value OJ QTY						Property Description								Mak	Iake/Model Serial Number				nber
-														DA	га ом					
- P - R																		INI	FORMA	
					\dashv														SECUR	
O P -]	PURPO	SES
E ·																		ONI	VTIII	FIDOT
R T					\dashv												TV			E FIRST PERTY
Y ·																			TEMS	
																		DIS	SPLAY	ED ON
					\Box													P2	C REP	ORTS
-	Numb	er of V	ehicles S	tolen 0	Nue	nher Vehi	cles Recovere	d	0											
	Officer ID# Officer Signature Supervisor Signature																			
ID			A. T. (1 Signatur			Case Status				Ιc	Case Dispos	rition:	CHUE	E, V. N. (15139)						
Status	Comp	iamant	signatur	_			☐ Further ☐ Inact ☐ Closed	r Inve ive /Clea	ıred			☐ Unfoun☐ Cleared☐ Cleared☐	ded by Ai by Ai	Loc rest rest by And	Refuse other Ag	gency	ooperate		dition I	Declined e 1