I N	Agenc	y Namo		NSTON-SALEN	. IN	NCIDENT/INVESTIGATION						OCA 2413377								
C I	ORI	NC			REPORT						Date / Time Reported SMTMTFS Month Day Yr Time									
D E	NC NC 0340200 Crime Incident(s)									☐ Att At Found SMT필TFS Month Day Yr Time						Day 17 2024 20:11 Hrs. Last Known Secure SM TM TF S Month Day Yr Time T				
N T	#1	Jimic I		, ation Of Auto L	aw-a	all Othe	r	ı —	Com	Month 04				ime :11 Hrs			Day Yr L	Time		
D	#2	Crime I	ncident						-	Location	- /		F 20	7.11	7 04		7 2024	Offense Tract		
A	Com 3699 Bethabara Park Bv/bet														bara I			123		
T A	#3	Jillie I	ncident						☐ Att Premise Type ☐ Com							Victim Residence Type ☐ Single Family ☐ Multi Family				
МО			d or Com					Forcible Yes						☐ Yes [Weapon / Tools					
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug.															th Drug/A	Icohol Use:			
	Society															es Unknown				
V I		Victim/		-			uty Othe	er/Un	know	n _					Other Race					
C T	V1 Victim/Business Name (Last, First, Middle) Victim of Crime # DATA OMITTED														Race	ЗСХ	To Offender	☐ Resident		
I	' -		DA				1	',						☐ Non-Resident						
M	Home Address DATA OMIT									TTED						Home Phone				
	Employer Name/Address DATA OMI														Business Phone					
,	VYR	Model	Color Lic/Lis Vin							Vin										
O T																				
H E																				
R	R																			
S									 .	TOOL	· D									
I	DATA OMITTED																			
N V	N V																			
Ö																				
V																				
E D																				
Status	L = L	ost S	= Stolen	R = Recovered	D = I	Damaged	Z = Seized	B =	Burn	C = C	Counte	erfeit / F	orged	F = Foun	d					
Codes	(Chec Victim			if recovered for other	Ť	Í														
	# DCI Status Value OJ QTY PCA OTHE 1 2016 S							Property Description TL. TBV9189 NC							Mak TOYT C	e/Mo		erial Number ATA OMITTED		
P - R -														FOR						
																	II	NFORMATION		
					_													SECURITY		
O P					\dashv													PURPOSES		
E ·					\dashv												Ol	NLY THE FIRST		
T .																		VE PROPERTY		
Y																		ITEMS ARE		
					\bot	\Box												ISPLAYED ON		
					+									+]	P2C REPORTS		
-	Numb	er of V	ehicles S	tolen 0	Nun	nber Veh	cles Recovere	d	0											
ID	Office	r		ID				fficer Signature Supervisor S												
ID			A, D. W Signatur	<i>7. (16005)</i> e		Case Status							KUKN,	ORN, A. R. (15714)						
a.	_ J.iip					☐ Further	r Inve	Investigation ☐ Unfounded ☐ Located ☐ Extr							radition Declined					
Status							☐ Closed	d/Cleared				Cleared by Arrest Refuse to Cooperate Cleared by Arrest by Another Agency Death of Offender Prosecution Declined Page 1						Page 1		