I N	Agenc	y Name		VSTON-SALEN	CIE	CIDENT/INVESTIGATION						OCA 2413391							
C I	ORI	NC					REPORT						Date / Time Reported SMTHTFS Month Day Yr Time						
D E	-10		NC 034				Att	At Foun	nd	SM	T ₩	TFS	04		17 202	Time 4 23:19 Hrs. SMTWTFS			
N T	#1		, Assault-non Agg	sault	_	Com	Month 04				T F S Time 1:19 Hrs			n Secure Day Yr 17 2024	Time				
D	#2		ncident			Att	Location	of I	Incident						Offense Tract				
A T		Trima I	ncident					_	Com	400 E			t, Wi	nston-sale	em N		105 Victim Resid	112	
A	#3	Jime I	neident						Att Com	Tremise	тур					- 1		ily ∏Multi Family	
МО			d or Com MITTED								Forcible Yes No	X N/A	We	apon / Tools					
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															Alcohol Use:			
V	4 Society Government Financial Institute Broken Bones Severe Lacerations Who Neligious 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 R														Race		Relationship	Resident Status	
C T	V1 DATA OMITTED												ae# 31				To Offender	□ Non-Residen	
I M							1,			В	M	1RU,2R	Unknown						
	Home Address DATA OMIT									ГТЕD						Home Phone			
,	Employer Name/Address DATA OMI									ГТЕО					Business Phone				
,	VYR	Color Lic/Lis Vin							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 jur	Damaged isdiction)	Z = Seized	B =	Burn	ed C = 0	Cou	nterfeit / F	orged	F = Found	i				
	Victim # DCI Status Value OJ QTY						Property Description								Mak	ce/Mo	del S	erial Number	
- P - R													D	ATA OMITTED					
					_												I	FOR NFORMATION	
																		SECURITY	
O .																		PURPOSES	
E ·																		NLY THE FIRST	
R T					\dashv													LVE PROPERTY	
Υ .																		ITEMS ARE	
																		DISPLAYED ON	
					_													P2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Nur	nber Vebi	cles Recovere	d	0										
	Officer ID# Officer Signature Supervisor Signature																		
ID	ALDERMAN, L. T. (16273) Complainant Signature Case							Case Status Case Disposition:								P. M. (15817)			
Status	Comp	iamalli	Signatul(-			☐ Further ☐ Closed ☐ Closed	r Inve tive /Clea	ared			☐ Unfoun ☐ Cleared ☐ Cleared	ded by Ai by Ai	Locarrest rest by Ano	Refuse ther Ag	gency	ooperate Γ	Page 1	