I N	Agenc	y Name		VSTON-SALEN	1 PC	DLICE] IN	INCIDENT/INVESTIGATION						OCA 2413871				
C	ORI	NC	NC 034	10200			-	REPORT							Date / Time Reported SMTWTFS Month Day Yr Time			
D E			ncident(s				Att At Found SMTWTFS Month Day Yr Time						04 21 2024 15:52 Hrs. Last Known Secure S M T W T F S Month Day Yr Time					
N T	#1 c	'ommı	ınicatir	ng Threats -intin	ıidat	ion, No	n Physical		Com	Month 04			ime 5:52 Hrs				Time 15:51 Hrs.	
D	#2	Crime I	ncident] [Att Com		of Incident <i>'arbrough</i>	111/2	ratt Pd W	linsto	a sal	1	Offense Tract 114	
A T	#3	Crime I	ncident						-	Premise T		Av/p	ran Ka, w	insioi		/ictim Resider		
A)	d or Com	*** 1				Com					F 11	☐ Single Family ☐ Multi Family Weapon / Tools				
MO			a or Con MITTEI										Forcible ☐ Yes [☐ No	X N/A	wea	apon / 1001s		
V	# of V	ictims	Туре	☑ Person	_	usiness				Injury	None ∑		_	Loss o		_	cohol Use:	
	I Society Government Financial Institute Broken Bones Severe Lacerations Wes Unknown Religious L.E. Officer Line of Duty Other/Unknown Internal Unconscious Other Major															_		
I C		Victim/	Business	Name (Last, First,	e)			Victim of Crime #	tim of DOB / Age Rac				Relationship To Offender	Resident Status Resident				
T I	V1		DA	ΓA OMITTED					1,		38	$\mid W \mid$	M	1RU	☐ Non-Resident			
M	Home Address													"		ne Phone	Unknown	
	DATA O													Business Phone				
	VYR		ake	Model		Color	TA OMITTED Color Lic/Lis Vin						2 40/116/00 1 110/100					
	VIK	IVI	ake	Wodel	Sty	ie	Coloi		LIC	LIS			V III					
O T H E R S I N V O L V E D		DATA OMITTED																
Status Codes	(Chec	k "OJ"	= Stolen column	R = Recovered frecovered for other	D = D r juris	amaged diction)	Z = Seized	В=	Burn	ed C = C	Counterfeit / I	orged	F = Found	i 				
	Victim # DCI Status Value OJ QTY					QTY	Property Description							Mak	e/Mo		rial Number	
- P - R _					+											DA	TA OMITTED FOR	
																IN	FORMATION	
																	SECURITY	
O P .																	PURPOSES	
E - R																ON	LY THE FIRST	
T.																	VE PROPERTY	
Υ .																	ITEMS ARE	
																	SPLAYED ON	
					_											P.	2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Num	ber Vehic	cles Recovere	d	0									
	Officer ID# Officer Signature Supervisor Signature																	
ID			. <i>O.</i> (1. Signatur			Case Status	W ₁						GONER, K. B. (15655)					
Status	Comp	iuIII	-ignatul(-			☐ Further ☐ Inact ☐ Closed	Inveive /Clea	red		☐ Unfour ☐ Cleared ☐ Cleared	ided l by Ai l by Ai	Locarrest	Refuse ther Ag	gency	ooperate	Page 1	