I N	Agenc	y Nam		NSTON-SALEN	OLICE	. IN	INCIDENT/INVESTIGATION								OCA 2414013						
C	ORI						-	REPORT								Date / Time Reported SMTWTFS Month Day Yr Time					
D E	10		NC 034			_	I	A 4 E	1	I di v	al ml w	TH FI CI	04		22	2024					
N	#1	Jillie I	ncident(s) Larceny- All	Oth	or	☐ Att							Last Known Secure SMJWTFS Month Day Yr Time s 02 06 2024 15:13 Hrs.							
T															s} <u>02</u>	(06 2		<u> 15:13 </u> Offense Tr		
D A								_	Com				'enter	Dr, Win	ston-se				323		
T A	#3	Crime I	ncident		Att Com	Premise	Premise Type					Victim Residence Type ☐ Single Family ☐ Multi Family									
МО			d or Com											Forcible Yes	TX N/A	_	eapon / T				
	# of Victims Type															- 1					
V	Religious L.E. Officer Line of Duty Other/Unknown Internal Unconscious Other Major No N/A																				
I C	Victim/Business Name (Last, First, Middle) Victim of DOB / Age Crime #														Race	Sex	Relation To Off	onship fender	Resident Resid		
T I	V1		DA	ΓΑ OMITTED								1,	//						□ Non-F	Residen	
M	Home	Addre	ess				ATA OME	rrr:								Home Phone Unknown					
	Employer Name/Address DATA ON Employer Name/Address														Business Phone						
	VYR		ake	Model	yle	ATA OMITTED Color Lic/Lis Vin						Vin	Business Thone								
	VIK	IVI	ake	Wiodei	اد ا	yie	Color		Lic	/Lis				VIII							
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	R = Recovered if recovered for other	D = l er juri	Damaged isdiction)	Z = Seized	B =	Burn	ed C=	Cot	unterfeit / F	Forged	F = Foun	ıd						
	Victim #	Status		Property Description								ake/Model Serial Number									
	1 77 7 1 LOTTERY T																	DA	ГА ОМІТ	TED	
P -	1	20	7		_	1	MONEY/CASH											INT	FOR	TON	
					\dashv														FORMAT SECURIT		
R O					_														PURPOSI		
P :																					
R																			LY THE I		
T v					_														VE PROP		
Y					_														ITEMS A		
					\dashv														SPLAYEI 2C REPOI		
-					\dashv									+				1 2	. C. KLI OI		
•	Numb	er of V	ehicles S	tolen 0	Nun	nber Vehi	cles Recovere	d	0											-	
ID	Office	r <i>MED</i>	T. J. (.	ID 15078)		Officer Sig	natur	e					Supervisor	Signat	ire 1547	78)					
ID			Signatur				Case Statu							DAI, I	AY, T. Ă. (15478)						
Status	r -		<i>5</i>				☐ Furthe: ☐ X Inact ☐ Closed	r Inve tive /Clea	ıred			☐ Unfoun☐ Cleared☐ Cleared	ided l by Ai l by Ai	Loc rrest rrest by Ander] Refuse other Ag	gency	Cooperat	te	Page		