I N	Agency	y Name		ERNERSVILI	LE P	OLICI	E IN	INCIDENT/INVESTIGATION							OCA 2024-001389							
C I	ORI	NC	034010	00		REPORT							Date / Time Reported SMT HTFS Month Day Yr Time 04   10   2024   14:13 Hrs.									
D E		#1 Crime Incident(s)  **Theft From Building**						Att At Found SMT:    Att At Found SMT:   Month Day Yr							04   1 T F S   Last Known Month Da				Secure SMT₩TFS			
N T	#1								Com	04	<u> </u>	10   2024		1:13  Hrs			_	2024		2  Hrs.		
D A	#2	iiiie ii	icidein					☐ Att Location of Incident ☐ Com 1750 Kernersville Medical Pk						dical Pkw								
T A	#3	Crime I	ncident					Att Premise Type							Victim Residence Type ☐ Single Family ☐ Multi Family							
МО	How A	Attacked	l or Con	mitted								Forcible Yes	X N/A	We	eapon /							
	# of V	ictims	Туре	▼ Person		Business		Injury □ None □ Minor						Loss	of Tee	eth I	Drug/Alcohol Use:					
v	1		_	ciety Govern		_	Financial Instit	nancial Institute ☐ Broken Bones ty ☐ Other/Unknown ☐ Internal ☐ Uncons					Severe	Lacera 1 Other	ations r Majo	or	☐ Yes ☐ Unknown ☐ No ☐ N/A					
I C		Victim/		Name (Last, First							OB / Age Race Sex			Relati	Relationship Resident Status To Offender Resident							
T I	V1	RAM	IREZ,	VANESSA GU		1,					W			1001	1011001	ĭ No	on-Residen nknown					
M																Hor	ne Phoi	ne		KIIOWII		
	Employer Name/Address													Business Phone				Mobile Phone				
	VYR	M	ake	Model	S	tyle	Color		Lic	:/Lis				Vin								
				(Denote V2, V3)								Person (if o										
0	Type Code			Business  Soci	ety [	] Govern	ment  Finar	icial I	nstitu	ite 🗆	Rel	igious 🔲 I	E. O	fficer Line o	Vi	Victim of DOB / Age 32 Race Sex						
T H	Ю	PA	RKER,	DEANNA LE	IGH									C	rime #	ŧ			$W \mid F$			
E R S	Home Address Home Phone																					
S	Employer Name/Address Business P																Mo	bile Pho	one			
I N	Type: Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown																					
V O	<u>,                                     </u>															Race Sex						
L V E	Home	Addre	SS												Home Phone							
D	Emplo	over Na	me/Add	ress				Business I						Business Ph	Phone Mobile Pho				one			
g		Employer Name/Address Business Phone Mobile Phone $L = Lost  S = Stolen  R = Recovered  D = Damaged  Z = Seized  B = Burned  C = Counterfeit / Forged  F = Found$																				
Status Codes		k "OJ"		f recovered for ot				В=	Burn	ea C=	= Co	unterreit / F	orgea	F = Foun	a 							
	# 1	DCI 20	Status 7	MONEY (CASH	Property Description  ONEY (CASH)								ke/Mo	odel	Serial Number							
P R	1	20	7	\$930.90		1	ELECTRONIC FUNDS															
O P																						
E R																						
T Y																						
+	Numb	er of V	ehicles S	tolen 0	Nıı	mber Vel	hicles Recovere	ed.	0													
ID	Officer	-																				
ID	Complainant Signature Case Status Case Disposition:												alie!	Doction 1								
Status							☐ Inac	☐ Inactive ☐ Closed/Cleared ☐ Unfounded ☐ Located ☐ Cleared by Arrest ☐ Re							Refus	Refuse to Cooperate						
							☐ Closed			nausted		☐ Cleared		nder	nner A Prose	gency ecution	, n Declii	ned	Pa	ge 1		