

I N C I D E N T D A T A	Agency Name <i>KERNERSVILLE POLICE</i>		INCIDENT/INVESTIGATION REPORT										OCA <i>2024-001415</i>					
	ORI <i>NC 0340100</i>												Date / Time Reported Month Day Yr Time <i>04 12 2024 06:46</i> Hrs.					
	#1	Crime Incident(s) <i>Larceny Of Automobile</i>				<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com		At Found Month Day Yr Time <i>04 12 2024 06:46</i> Hrs				Last Known Secure Month Day Yr Time <i>04 11 2024 20:00</i> Hrs.						
	#2	Crime Incident				<input type="checkbox"/> Att <input type="checkbox"/> Com		Location of Incident <i>549 Arbor Hill Rd Apt. 25C, Kernersville NC</i>								Offense Tract <i>Z2</i>		
#3	Crime Incident				<input type="checkbox"/> Att <input type="checkbox"/> Com		Premise Type						Victim Residence Type <input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family					
MO	How Attacked or Committed <i>Kia Stolen Overnight</i>										Forcible <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> No		Weapon / Tools					
V I C T I M	# of Victims <i>1</i>	Type <input checked="" type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown				Injury <input type="checkbox"/> None <input type="checkbox"/> Minor <input type="checkbox"/> Loss of Teeth <input type="checkbox"/> Broken Bones <input type="checkbox"/> Severe Lacerations <input type="checkbox"/> Internal <input type="checkbox"/> Unconscious <input type="checkbox"/> Other Major				Drug/Alcohol Use: <input type="checkbox"/> Yes <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A								
	V1	Victim/Business Name (Last, First, Middle) <i>PARHAM, MISTY DAWN</i>				Victim of Crime # <i>I,</i>		DOB / Age <i>38</i>		Race <i>W</i>	Sex <i>F</i>	Relationship To Offender	Resident Status <input type="checkbox"/> Resident <input checked="" type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown					
	Home Address										Home Phone							
	Employer Name/Address										Business Phone		Mobile Phone					
	VYR <i>2016</i>	Make <i>KIA</i>	Model <i>SOUL</i>	Style <i>SW</i>	Color <i>BRO</i>	Lic/Lis <i>JMX7697, NC</i>		Vin <i>KNDJN2A23G7250335</i>										
O T H E R S I N V O L V E D	CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)																	
	Type: <input type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown																	
	Code	Name (Last, First, Middle)										Victim of Crime #	DOB / Age		Race	Sex		
	Home Address										Home Phone							
	Employer Name/Address										Business Phone		Mobile Phone					
	Type: <input type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown																	
	Code	Name (Last, First, Middle)										Victim of Crime #	DOB / Age		Race	Sex		
Home Address										Home Phone								
Employer Name/Address										Business Phone		Mobile Phone						
Status Codes	L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found (Check "OJ" column if recovered for other jurisdiction)																	
P R O P E R T Y	Victim #	DCI	Status	Value	OJ	QTY	Property Description				Make/Model		Serial Number					
	<i>1</i>	<i>SUV</i>	<i>7,5</i>	<i>\$16,000.00</i>		<i>1</i>	<i>2016 BRO , JMX7697 NC</i>				<i>KIA Soul</i>		<i>KNDJN2A23G7250335</i>					
	<i>1</i>	<i>SUV</i>	<i>5</i>	<i>\$16,000.00</i>		<i>1</i>	<i>2016 BRO , JMX7697 NC</i>				<i>KIA Soul</i>		<i>KNDJN2A23G7250335</i>					
	Number of Vehicles Stolen <i>1</i>				Number Vehicles Recovered <i>1</i>													
ID	Officer <i>INMAN, C. T. (I5199)</i>				ID#		Officer Signature				Supervisor Signature <i>MCRAE, C. A. (M5192)</i>							
Status	Complainant Signature					Case Status <input type="checkbox"/> Further Investigation <input type="checkbox"/> Inactive <input type="checkbox"/> Closed/Cleared <input checked="" type="checkbox"/> Closed/Leads Exhausted				Case Disposition: <input type="checkbox"/> Unfounded <input type="checkbox"/> Located <input type="checkbox"/> Extradition Declined <input type="checkbox"/> Cleared by Arrest <input type="checkbox"/> Refuse to Cooperate <input type="checkbox"/> Cleared by Arrest by Another Agency <input type="checkbox"/> Death of Offender <input type="checkbox"/> Prosecution Declined				Page 1				