I N	Agency	y Name		ERNERSVILI	LE P	OLICI		INCIDENT/INVESTIGATION							OCA 2024-004366					
C I	ORI	NC	034010					REPORT						Date / Time Reported SMTWTES Month Day Yr Time						
D E	С		cident(s				Att At Found S M T Month Day Yr					T ₹ S	10 25 2024 18:01							
N T	#1			Shoplift	ing			X Coi	_ M	onth 10			ime :01 Hrs				vr ⊆ 2024	Time 10:5	7 Hrs.	
D	#2	Crime II	ncident					☐ Att Location of Incident ☐ Com 1105 S Main St, Kernersville NC 27284								(Offense Z2	Tract		
A T	#3	Crime In	ncident					Att Premise Type					ersville iv	Victim Residence Type						
A		ttacker	l or Com	mitted				Com					Forcible	☐ Single Family ☐ Multi Famil Weapon / Tools					ılti Family	
МО				us Items Within	Cvs.							☐ Yes	N/A ∡		ароп / 1	10018				
	# of V	ictims	Type	Person	ZI.	Business		Injury None Minor					Loss	of Tee	th D	Drug/Alcohol Use:				
v	1		_	ciety Governi igious L.E. C		_	Financial Instit	, –					Severe Lacerations				☐ Yes ☐ Unknown ☐ No ☐ N/A			
I C	7	/ictim/		Name (Last, First									3 / Age		Relatio	Relationship To Offender Resident Status Resident				
T I	V1	CVS	PHAR	MACY				1,								10 OII	ender		sident n-Resident	
M	Home	Addre	ss								1,				Hon	ne Phon	Unknown te Phone			
	Emplo	ver Na	me/Add	ress								Business Phone				Mobile Phone				
	•																			
	VYR	Ma	ake	Model	S	tyle	Color		Lic/Li	is			Vin							
	CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim) Type: ☑ Person ☐ Business ☐ Society ☐ Government ☐ Financial Institute ☐ Religious ☐ L.E. Officer Line of Duty ☐ Other/Unknown																			
O T	Code			First, Middle)	cty _	Govern	пен 🗀 т пап	ciai mst	itute	Re	igious 🗀 i	J.L. 01	neer Eme (Race Sex	
H E	RP	JO	RDAN	, CANDACE P	PAIG	E									W				$W \mid F$	
R S	Home	Addres	SS													Ho	me Pho	ne		
5	Employer Name/Address Business Phone Mobile Phone																			
I N	Type: Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown																			
v O	Code Name (Last, First, Middle)														ctim o		B / Age	;	Race Sex	
L V	Home Address Home Phone																			
E D	Home	Addres	SS													1101	ne i noi	ile		
	Emplo	yer Na	me/Add	ress								I	Business Ph	none	Mobile Phone					
Status				R = Recovered				B = Bu	rned	C = Cc	ounterfeit / F	Forged	F = Four	nd						
Codes	Victim			f recovered for of)	Property Description						Mo	lro/Ma	, dol	Serial Number			
							BEAUTY SUPP	EAUTY SUPPLIES							Make/Model			Scriai Ivuilluei		
		PCA SUSP \$0.00 1 2005 SIL , NC										HOND Accord								
P R																				
O P																				
E R																				
T Y																				
•	Numb	er of V	ehicles S	Stolen 0	Nu	mber Vel	nicles Recovere	ed 0												
ID	Officer COL	Officer ID# Officer Signature Supervisor Signature WHITAKER, B. K. (W5103)																		
Status			Signatur					Case Status Case Disposition: ☐ Further Investigation ☐ Unfounded ☐ Located ☐ Extradition Declined											Declined	
							☐ Inact	☐ Inactive ☐ Cleared by Arrest ☐ Refuse to Co☐ Closed/Cleared ☐ Cleared by Arrest by Another Agency							ooperat	perate				
							☐ Closed			isted	Death o			Prose	ecution	n Declin	ed	Pag	ge 1	