I N	Agency	y Name		ERNERSVILI	LE P	OLICI	E IN	INCIDENT/INVESTIGATION							OCA 2024-004838					
C I	ORI	NC	024016	200			REPORT						Date / Time Reported SMTWTFS Month Day Yr Time							
D E	Ic		034010 ncident(s				1	Att   At Found SMTHTFS Month Day Yr Time						In   27   2024   06.15 Hrs.  Last Known Secure   S M T W T F S Month Day Yr Time						
N T	#1		`	Larceny Of Ai	utom	obile		☐ Att	Mo	nth 1			ime $:00 $ Hrs			_	Yr —	Time 23:30		
D	#2	Crime I	ncident					Att Location of Incident						Offense Tract						
A T	#3	Crime I	ncident					☐ Com 452 Lindsay St - D, Kernersvi. ☐ Att Premise Type					ernersvill	Victim Residence Type						
Α								Com						☐ Single Family ☐ Multi Family						
МО	How A	ttacked	l or Com	mitted									Forcible Yes No	Weapon / Tools						
V I C	# of V	ictims	Type	□ Person		Business								Loss	of Teet	th D	Drug/Alcohol Use:			
	1		_	ciety □ Governi igious □ L.E. C		_	Financial Instite  Outy   Other	nancial Institute Broken Bones Sevency Other/Unknown Internal Unconscious					Severe	Lacera 1 Other	itions · Maio		☐ Yes	_	Jnknown I/A	
	1	/ictim/		Name (Last, First			<u>, u</u>						3 / Age			Relatio	Relationship Resident Status To Offender Resident			
T I	V1	SUR	RATT,	EMILY SHEY								39	W	F	10 011	ender		n-Resident		
M	Home	Addre	ss								1,			"		ne Phon	ie	□ Un	known	
	Emplo	ver Na	me/Add	ess				Rusina						ess Phone Mobile Phone				Phone		
		,												Thone			Woode I hole			
	VYR 2007		ake <i>ORD</i>	Model   EXPEDITIO		tyle <i>1P</i>	Color  DBL/GL		ic/Lis <i>VEE</i>	E7498,	NC		Vin 1FM	FU17	5X71	LA851	02			
	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																			
О	Code			First, Middle)	ety L	Govern	ment L Finan	iciai Instit	ute	☐ Kei	igious 🗀 L	J.E. OI	licer Line o	Victim of   DOB / Age 34   Race S					Race Sex	
T H	ΙΟ	MI	NOR,	LENA DANIEI	LLE									Crime #				$B \mid F \mid$		
E R	Home	Addre	SS													Hoi	me Pho	ne	<b>.</b>	
S	Employer Name/Address Business Phone Mobile Phone																			
I N	Type: \( \text{Type: } \text{Person } \) Business \( \text{Society } \) Government \( \text{Financial Institute} \) Religious \( \text{L.E. Officer Line of Duty} \) \( \text{Other/Unknown} \)																			
V O	Code Name (Last, First, Middle)														Victim of Crime # DOB / Age 32			e 32	Race Sex	
L V	IO			TASHEOINA	LAS	HAY 									Home Phone			$B \mid F$		
E D	Home	Addres	ss													Hor	ne Pho	ne		
D	Emplo	yer Na	me/Add	ress								F	Business Ph	one		Mobile Phone				
Status Codes				R = Recovered for other				B = Bur	ned	C = Co	unterfeit / F	Forged	F = Foun	d						
	Victim #	DCI	Status	Value	<u>,                                      </u>	Property Description							Make/Model			Serial Number				
P R		27	EVID	\$1.00	THUMB DRIVE															
	1	25 SUV	<i>7 7,5</i>	\$1.00 \$15,000.00		1	WALLET	WALLET 2007 DBL/GLD VEE7498 NC								on E	1FMFU175X7LA85102			
	1	SUV	5	\$8,000.00		1	2007 DBL/GLD								FORD Expedition E			1FMFU175X7LA85102		
O P																				
E R																				
T Y																				
ł	Numb	er of V	ehicles S	Stolen 1	Nu	mber Vel	nicles Recovere	ed 1												
	Officer			I	D#	111001 VE	Officer Sig						Supervisor	Signat	ture	45 102	١			
ID			. <i>(L52</i> Signatur					Case Status Case Disposition:												
Status	-						Inact	☐ Further Investigation ☐ Unfounded ☐ Located ☐ Extradition Document ☐ Inactive ☐ Cleared by Arrest ☐ Refuse to Cooperate									Declined			
			_					☐ Closed/Cleared ☐ Cleared by Arrest by Another Agency ☐ Closed/Leads Exhausted ☐ Death of Offender ☐ Prosecution Declined								Pag	ge 1			