I N	Agenc	y Name		ERNERSVILI	LE P	OLICE	INCIDENT/INVESTIGATION							OCA 2024-005216					
C I	ORI	NC	034010				I	REPC	DRT			Date Mon	/Time	Reported Day	SM	[W]T]∃			
D E	C	Prime In			Att At Found S M T					T ₹ S	Last		20 20 Secure ay Yr		2:14 н ГМТ				
N T	#1	vanaaiism/aamage 10 Propert						□ Coi	_ M	onth 12			ime :14 Hrs		th D		$4 \mid 00$:		ırs.
D	#2	Crime I	ncident					Att Location of Incident Com 105 E Bodenhamer St, Kerners						rsville NC 27284 Offense Tract					
A T	#3	Crime I	ncident					Att Premise Type					Kerners	Victim Residence Type					
A		ttacke	l or Com	mitted			Com Forcible					Forcible	Single Family ☐ Multi Famil Weapon / Tools					mily	
МО		Graff		iiiiiteu								☐ Yes							
	# of V	ictims		☐ Person		Business								Loss of Teeth Drug/Alcohol Us				l Use:	
v	1		_	ciety 🔲 Governi igious 🔲 L.E. O		_	Financial Instit	1					☐ Severe		itions Major		Yes □ No □	Unknov N/A	wn
I C		Victim/		Name (Last, First			, <u>u</u>						OB / Age Race Sex Relationship				nip Res	ident Sta	
T I	V1	WEB	STER .	& SONS PLUM	MBIN	IG IN										10 Offeno		Resident Von-Res	ident
M	Home Address														Hom	e Phone		Jnknow	<u>n</u>
	Emplo	over Na	me/Add	ress						Business Phone			Mot	Mobile Phone					
	VYR	LM	ake	Model	1 6	tulo	Color	r Lic/Lis					Vin						
	0	C	HEV	W3500	2	tyle 2D	WHI		, N	'C			<i>XJ00</i>)4241					
O T	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																_		
	Code Name (Last, First, Middle)													Vi	ctim of		Age 66	Race	Sex
H E	RP STREEB, TAMMY MARIE																	W	F
R S	Home Address Home Phone																		
	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) Victim of Crime # DOB / Age Race Race Crime # Post Race Ra															Sex			
L V	Home Address Home Phone																		
E D	поше	Addre	SS													Tionic	none		
	Emplo	yer Na	me/Add	ress								E	Business Ph	one		Mobile Phone			
Status				R = Recovered				$\mathbf{B} = \mathbf{B}\mathbf{u}$	rned	C = Cc	ounterfeit / F	orged	F = Foun	ıd					\dashv
Codes	Victim		Status	f recovered for of	QTY)	Property Description							ke/Mod	lal	Serial Number			
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ъ																			
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	Numb	er of V	ehicles S	tolen 0	Nu	mber Vel	nicles Recovere	ed 0											
ID	Officer EMF	r FINGI	ER, J. N	1. (E5240)	D#		Officer Sig	Signature Supervisor Signature MCRAE, C. A. (M5192)											
			Signatur					Case Status Case Disposition:											ned
Status							_ Inact	☐ Further Investigation ☐ Unfounded ☐ Located ☐ Extradition ☐ Inactive ☐ Cleared by Arrest ☐ Refuse to Cooperate ☐ Closed/Cleared ☐ Cleared by Arrest by Another Agency									icu		
							☐ Closed			isted	Death o			Prose	cution	Declined	P	age 1	_