

I N C I D E N T D A T A	Agency Name <i>Durham Police Department</i>						INCIDENT/INVESTIGATION REPORT								Case# <i>19-002653</i>										
	ORI <i>NC 0320100</i>						** Contains Restricted Names **																		
	Location of Incident <i>6700-BLK Fayetteville Rd, Durham NC 27713</i>						Gang Relat <i>NO</i>		Premise Type <i>Restaurant</i>				N/A/Beat <i>422</i>		Date / Time Reported <i>01/20/2019 14:12 Sun</i>										
											Last Known Secure <i>01/19/2019 14:40 Sat</i>														
											At Found <i>01/20/2019 14:12 Sun</i>														
	#1	Crime Incident(s) <i>Fraud - Credit Card/atm FRDCRC</i>						(Com)	Weapon / Tools						Activity										
									Entry				Exit				Security								
#2	Crime Incident						()	Weapon / Tools						Activity											
								Entry				Exit				Security									
#3	Crime Incident						()	Weapon / Tools						Activity											
								Entry				Exit				Security									
MO																									
V I C T I M	# of Victims <i>1</i>				Type: INDIVIDUAL						Injury: None						Domestic: N								
	V1	Victim/Business Name (Last, First, Middle) * <i>Restricted</i>						Victim of Crime # <i>1,</i>		DOB // Age		Race	Sex	Relationship To Offender	Resident Status <i>N</i>		Military Branch/Status								
	Home Address								Email								Home Phone								
	Employer Name/Address								Business Phone								Mobile Phone								
	VYR	Make	Model	Style	Color	Lic/Lis	VIN																		
	CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)																								
O T H E R I N V O L V E D	Type: INDIVIDUAL						Injury:																		
	Code <i>IO</i>	Name (Last, First, Middle) <i>STANFORD, MATT</i>						Victim of Crime #		DOB Age <i>41</i>		Race <i>W</i>	Sex <i>M</i>	Relationship To Offender	Resident Status <i>Non-Resident</i>		Military Branch/Status								
	Home Address								Email								Home Phone								
	Employer Name/Address								Business Phone								Mobile Phone								
	Type:						Injury:																		
	Code	Name (Last, First, Middle)						Victim of Crime #		DOB Age		Race	Sex	Relationship To Offender	Resident Status		Military Branch/Status								
	Home Address								Email								Home Phone								
Employer Name/Address								Business Phone								Mobile Phone									
P R O P E R T Y	1 = None 2 = Burned 3 = Counterfeit / Forged 4 = Damaged / Vandalized 5 = Recovered 6 = Seized 7 = Stolen 8 = Unknown ("OJ" = Recovered for Other Jurisdiction)																								
	VI #	Code	Status Frm/Tc	Value	OJ	QTY	Property Description					Make/Model					Serial Number								
	<i>1</i>	<i>61</i>	<i>7</i>	<i>\$120.00</i>		<i>1</i>	<i>MONEY</i>																		
Officer/ID# <i>HOPKINS, K. A. (9298)</i> Outstanding Stolen Val [Total Stolen]: \$120.00 [\$120.00]																									
Invest ID# <i>HALL, D. N. (14776)</i>											Supervisor <i>WALKER, A. N. (7329)</i>														
Status	Complainant Signature					Case Status <i>Inactive</i>					02/01/2019					Case Disposition:					Page 1				
R CS1IBR Sys#: 693537 05/31/2022 15:14																									