										11	VICIT.	ノニル	IT/INI\/	EQT		'IGATION -								
	Agency Name									INCIDENT/INVEST					IGAI	C	Case# 19-002211							
I N C I D E N T D A T	ORI NG 0220100								REPORT										e / Time Reported 01/17/2019 10:06 T					
	NC 0320100								Gang Relat Premise Type						N/A/Beat			Last Known Secure 01/17/2019 09:22 Thu						
	Location of Incident 800-BLK E Main St, Durham NC 27701								UNK Ho			me Of Vio			nulti 513		A	At Found 01/17/2019 1			10:05 Thu			
	#1	Crime Incident(s) Larceny - From Motor Vehicle							(((Com)) Weapon / Tools Unknown			ı							Activity N			
	LARFMV								Entr	Entry			Exit				Security							
	Crime Incident #2 Vandalism								((Com)	Wea	Weapon / Tools None										Activity		
	#2 Vandalism VANOTH							Entry			110		Exit				Security			N				
		Crime Incident)	Weapon / Tools											Activity		
	#3							(Entry				Exit				Secu	rity						
												-												
МО	# of Victims 1 Type: INDIVIDUAL Injury: None Domestic: N																							
	# of Victims 1 Type: INDIVIDUAL Victim/Business Name (Last, First, Middle)																La	ID 1 d	1.		omestic: N Resident Status Military			
V I C	V1 ROCKWELL, JULIA YUKI											Victim of Crime #	DOR		Race	Sex	To Of				Military Branch/Status			
	Home Address												1,2	Age 27		W	F	1RU		Res	<u>ident</u>			
T	но	me A	aaress								Email							Hon	ne Phone					
I M	Employer Name/Address															Bu	sines	s Phone	;		Mob	Mobile Phone		
	VYR Make Model Style (Colo	Color Lic/Lis					VI	VIN									
	CO	DES:	V- Via	tim (Denote V	2. V3	O = 0	Owner	r (if ot	ther t	han vi	ctim)	R:	= Reporting	Perso	n (if other	than y	victin	າ)						
О	CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim) Type: Injury:																							
T H E R S	Cod	e N	ame (La	st, First, Middle	e)								Victim of Crime #		DOB	OOB Race Sex Relationship Resident Status Military To Offender Branch/Stat								
											Crim				ge				Offender			Branch/Status		
	Home Address													Email		I					Hon	ne Phone		
	Employer Name/Address															Business Phone Mobile Phone						oile Phone		
	Tv	Type: Injury:																						
V O	Code Name (Last, First, Middle)										Victim of						Sex				sident Status Military			
L V E D													Crime #	Ag	re .			To Of	o Offender		Branch/Status			
	Но	me A	ddress											Email				l	He			ne Phone		
	Em	nlove	r Name/	Address											Business P			s Phone	none I N			oile Phone		
	1.3																	nie i none						
	1 = None 2 = Burned 3 = Counterfeit / Forged 4 = Damaged / Vandalized 5 = Recovered 6 = Seized 7 = Stolen 8 = Unknown ("OJ" = Recovered for Other Jurisdiction)																							
	VI									Property Description					Make/Mode				l Seri			ial Number		
	1 65 7 \$50.00 1 HAND BAC													KATE SPADE/Unkn										
D	1	1 99 7 \$1.00 20 BUSINESS CA 1 99 7 \$1.00 1 EXPIRED INS								CARDS NSURANCE CARD					UNKN/Unkn BCBS/Unkn									
P R	1	14	7	\$1.00 \$1.00		12	RYTA		11450	MAINCE	CARD	,					BS/Unkn PAX/4 Doses							
O P	1	14	7	\$1.00		5	ZOM	AIG NA	4 <i>SAL</i>	SPRAY	7				IMPAX									
E		82	4	\$300.00		1	2016	G GRY,	, i	EBW1690 NC					FORD Edge Se					2FMPK3G91GBB67017				
R T Y																								
		++++++																						
	\Box																							
	Ote	icer/I	<u> </u> D#	IIIIII GALLAR		C (2)	20.21								Outstanding Stales Vol FTee 1 Stales 2 654 00 F654 00									
		est ID		WHISNANT											Superv	Outstanding Stolen Val [Total Stolen]: \$54.00 [\$54.00] Supervisor FRANCIS R T (10063)								
Status		omplainant Signature Case Status											Case D	Case Disposition:										
Status	501	Complainant Signature Case Status Inactive 02/15/2019										Page 1												