										- 11		IDE	N	IT/INI\/I	=CT				_					
	Agency Name									INCIDENT/INVEST						IGATION				Case# 19-001696				
I N C I D E N T D A T	Durham Police Department							REPORT											me Repor	10.05.0				
	ORI NC 0320100									** Contains Restricted					l Names **				Last Known Secure			10:05 Sun		
	Location of Incident									Gang Relat Premise				nise Type				N/A/Beat			01/13/2019 At Found			
	300-BLK Bridgefield Pl, Durham NC 27705											ome Of Victim-1			multi	3	13		01/13/20			10:01 Sun		
	#1	1 Crime Incident(s) Vandalism											n / Tools			Te :							N	
	VANOTH								Entry						Exit	Security			rity					
	#2	2 Crime Incident)	W	Weapon / Tools											Activity	
									Entry							Exit					Security			
	#3	3 Crime Incident							() Weapon				/]	Tools								Activity		
										Entry						Exit				Secu	rity	•		
МО		•									•					•				•				
											Injury: Non													
V I C T I M	# of Victims I Type: INDIVIDUAL Victim/Business Name (Last, First, Middle)													Victim of		None DOB F		Sex	Relati	onship	Domest Residen		s Military	
	V1 PERRY, TRAVIS TREMAIN													Crime # 1,	Age 27		D	14		fender			Branch/Status	
	Home Address														Ema		В	B M 11		IE Ke		dent Hom	le Phone	
	Employer Name/Address																D		s Phone			N/-1	:1. Db	
	Employer Name/Address																Ви	sines	s Pnone	•		Mobile Phone		
	VYR Make Model Style							Color				ic	:/Lis				VIN							
	CC	DES:	V- Vio	ctim (Denote V	2, V3)) O = O	wner	(if ot	her t	han vi	ictim) R	? =	Reporting	Perso	n (if other	than v	ictin	1)					
О	CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim) Type: INDIVIDUAL Injury: Code Name (Last, First, Middle) Victim of DOB Race Sex Relationship Resident Status Military															_								
T H E R S	Code Name (Last, First, Middle)															DOB //	Race	Sex		onship fender			Military Branch/Status	
	IO Restricted														Ag	;e					Resid			
	Home Address														Email							Hom	ne Phone	
	Employer Name/Address															Business Phone					Mob	ile Phone		
N	Ту	pe:												Injury	:							1		
V O L V E D	Code Name (Last, First, Middle)													Victim of Crime #			Race			tionship Resi		t Status	Military Branch/Status	
														Crime #	Ag	ge ge			1001	render				
	Home Address														Email						Home		ne Phone	
	Employer Name/Address																	Business Phone				Mobile Phone		
	1 =	None	e 2 = B	Surned $3 = Cc$	unterl	feit / For	ged	4 = I	Dama	aged /	' Van	dalize	d	5 = Recov	vered	6 = Seize	ed 7	= Sto	olen 8	= Unkr	iown			
P R O P E R T Y										er Jurisdiction)					1									
	VI Code Status Frm/To Value OJ QTY								Property Description							Make/Mode				<u>l</u>			Serial Number	
	1 72 4 \$150.00 1 WINDOW															GLASS/Unk								
		icer/I		BOLICK, C												C	60**		*	m	** ~	/100		
a.		Invest ID# BOLICK, C. R. (20626) Complainant Signature Case Status												<u> </u>	Supervisor KIMBALL, S. (10066) Case Disposition:									
Status	Complainant Signature Case Status Open										01/13/.	01/13/2019 Case Disposition:								Page 1				