| | | | | | | | | | I I N | | | | -ст | | | | | | | | | | |
|---|--|--|---------|------------------|----|---------|-----|-------|--|----------------|---------|----------------------|--|---|----------------|----------|----------------------|-------------|---------------------------------|------------|-------------------------|----------|--|
| | Agency Name | | | | | | | | INCIDENT/INVEST | | | | | | IGATION | | | | Case# 19-004142 | | | | |
| I N C I D E N T D A T A | Durham Police Department | | | | | | | 4 | REPORT | | | | | | | | | | Date / Time Reported 02/01/2019 | | | | |
| | ORI NC 0320100 | | | | | | | | | | | | | | | Las | Last Known Secure | | | | | | |
| | Location of Incident | | | | | | | | | | 1 | mise Type | | N/A/Be | | | At | Found | 1 | | 11:40 Tu | | |
| | 1500-BLK N Gregson St, Durham NC 27701 Crime Incident(s) | | | | | | | | NO Bank/sa (Com) Weapon / Tools Entry | | | Bank/savir | ngs And | | | 2 | | 01/29/2019 | | <u>019</u> | 17:00 Tu | <u>e</u> | |
| | Fraud - Credit Card/atm | | | | | | (C | 10018 | | | | | Exit | | | Security | | | N | _ | | | |
| | FRDCRC Crime Incident | | | | | | | |) | Weapon / Tools | | | | LAIL | | | | Security | | | Activity | _ | |
| | #2 | 2 Crime medent | | | | | | | Entry () Weapon / Entry | | | 10018 | | Exit | | | | 0 | •, | | ———— | | |
| | | Crima Institute | | | | | | | | | | /m 1 | | | | | | Security | | | Activity | | |
| | #3 | 3 Crime Incident | | | | | | | | | | Tools | | | | | | 0 | •, | \perp | Activity | _ | |
| | | | | | | | | | | Entry | | | EXIL | | | | | | Security | | | _ | |
| MO | | | | | | | | | | | | | | | | | | | | | | | |
| V I C T I | # of Victims 1 Type: INDIVIDUAL | | | | | | | | | Injury: No | | | | ne | | | | Domestic: N | | | | _ | |
| | Victim/Business Name (Last, First, Middle) | | | | | | | | | | | Victim of Crime # | DOB | | Race Sex | | Relatio | | Resident | | Military Branch/Stat | | |
| | V1 SMILEY, EMMA JEAN | | | | | | | | | | | 1, | Ag | e 30 | W | F | 1RU | iluci | Reside | ent | Dianen/Stat | us | |
| | Но | me A | ddress | | | | | | | | | • | Emai | il | | | | | Hom | | Phone | | |
| | Employer Name/Address | | | | | | | | | | | | | | Business Phone | | | | | le Phone | _ | | |
| | 3.73 | /D | 1 3 4 1 | 136.11 | | La | . 1 | Colo | Color Lic/Lis | | | | | 1 7/13 | I roma | | | | | | | | |
| | VYR Make Model Style C | | | | | | | | r | | | :/L1S | | VIN | | | | | | | | | |
| O T H E R S I N O L V E D | CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim) | | | | | | | | | | | | | | | | _ | | | | | | |
| | Type: Injury: Code Name (Last, First, Middle) Victim of | | | | | | | | | | | | | DOB Race Sex Relationship Resident Status Militar | | | | | | | | | |
| | | | | | | | | | | | Crime # | | Age | | | | To Offe | ender | | | Branch/Stat | us | |
| | Home Address | | | | | | | | | | | | Email | | | | | | | Home | Phone | _ | |
| | Employer Name/Address | | | | | | | | | | | | | Business Pho | | | | e Mob | | | le Phone | _ | |
| | | | | | | | | | | | | | | | | | _ | | | | | | |
| | Ty Cod | 1 27 | ame (La | st, First, Middl | e) | | | | | | | Injury Victim of | | | | Relatio | Relationship Resider | | | Military | _ | | |
| | Code (,,,, | | | | | | | | | | | Crime # | Age | | | To C | | ender | | Branch/St | | us | |
| | Home Address | | | | | | | | | | | | | Email | | | | | | | Home Phone | | |
| | Employer Name/Address | | | | | | | | | | | | | Business P | | | | none Mo | | | le Phone | _ | |
| | | | | | | C : / E | 1 4 | | 1 / | T 7 1 | 1. 1 | 5 B | 1 | | | | | | | | _ | | |
| 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 | | | | | | | P | Property Description | | | | | Make/Mode | | | | <u>1</u> Se | | | ıl Number | | |
| | 1 61 7 \$1,270.00 1 MONEY | | | | | | | | | | | | | | | | | | | | | _ | |
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| | | icer/I | | DAVIS, A. | | | | | | | | | | C,,,,,,,,, | | stand | | | | | 0.00 [\$1,270.00 | 0] | |
| G | Complement Construe | | | | | | | | | | | | Supervisor ELLERMAN, E. R. (17689) Case Disposition: | | | | | | | | | | |
| Status | | Complainant Signature Case Status $Except. Clear$ 02/15/2019 | | | | | | | | | | | Case Disposition: In Custody Other Jurisd. 02/15/2019 Page 1 | | | | | | | | | | |