|  | Agency Name  Durham Police Department   |   |   |               |          |       |      | 7        | INCIDENT/INVEST<br>REPORT |                      |        |                      |                          |  | IGATION           |                             |                     |                               | Case# 19-000832                   |   |                             |                             |                             |  |
|--|---|---|---|---------------|----------|-------|------|----------|---------------------------|----------------------|--------|----------------------|--------------------------|--|-------------------|-----------------------------|---------------------|-------------------------------|-----------------------------------|---|-----------------------------|-----------------------------|-----------------------------|--|
| I  | ORI NG 0220100  |   |   |               |          |       |      | -        |                           |                      |        |                      |                          |  |                   |                             |                     |                               | Date / Time Reported 01/07/2019 1 |   |                             | 10:23 Mon                   |                             |  |
| N<br>C<br>I<br>D<br>E<br>N<br>T<br>D<br>A                          | NC 0320100  Location of Incident 200-BLK Winterberry Ridge Dr, Durham NC  |   |   |               |          |       |      |          | IC                        |                      | ng Rel | lat Pro              | mise Type  Home Of       |  |                   | N/A/Beat<br>313, 322        |                     |                               |                                   | Last Known Secure  01/05/2019 09:00 S  At Found  01/05/2019 10:23 S |                             |                             |                             |  |
|  | #1  | Crime Incident(s)                                 |   |               |          |       |      |          | Com )                     | ) W                  |        | Tools None           |                          |  | 1                 |                             |                     |                               | Security                          |   |                             | Activity N                  |                             |  |
|  |   | LA  | RFMV<br>me Incid  | 7             |          |       |      |          | (                         | ,                    |        | Entry Weapon / Tools |                          |  |                   | Exit                        |                     |                               |                                   | Secu  | rity                        | Activity                    |                             |  |
|  | #2  |   | ine mere  | ciit          |          |       |      |          | `                         | ,                    |        | Entry                |                          |  |                   | Exit                        |                     |                               |                                   | Secu  | rity                        |                             |                             |  |
| A  | #3  | Cri   | Crime Incident  |               |          |       |      |          |                           |                      | ) W    | eapon                | 1 / Tools                |  |                   |                             |                     |                               |                                   |   |                             |                             | Activity                    |  |
|  | #3  |   |   |               |          |       |      |          |                           |                      | En     | ntry                 |                          |  |                   |                             | Exit                |                               |                                   |   | rity                        |                             |                             |  |
| МО   |   |   |   |               |          |       |      |          |                           |                      |        |                      |                          |  |                   |                             |                     |                               |                                   |   |                             |                             |                             |  |
| V<br>I<br>C<br>T<br>I<br>M   | # of Victims 1 Type: INDIVIDUAL Victim/Business Name (Last, First, Middle)  |   |   |               |          |       |      |          |                           |                      |        |                      |                          | Injury: None   |                   |                             |                     |                               |                                   |   | Domes                       |                             | 1 200                       |  |
|  | V1 O'NEAL, FRANK DULA   |   |   |               |          |       |      |          |                           |                      |        |                      | Victim of Crime #        |  | ов<br>• <i>71</i> |                             |                     |                               | ionship<br>ffender                |   | nt Statu<br>ident           | s Military<br>Branch/Status |                             |  |
|  |   |   |   |               |          |       |      |          |                           |                      |        |                      |                          |  | Email             |                             |                     |                               |                                   |   |                             |                             | ne Phone                    |  |
|  | I Hmplover Name/Address   |   |   |               |          |       |      |          |                           |                      |        |                      |                          | _  |                   |                             | Bu                  | sines                         | s Phon                            | ne  |                             |                             | oile Phone                  |  |
|  | VYR Make Model Style Cole 2017 SUBA OUTBACK MP G  |   |   |               |          |       |      |          |                           | or<br>FRY            | L      | ic/Lis<br>FAA95      | 510, NC                  |  |                   | VI                          | VIN<br>4S4BSANC0H34 |                               |                                   |   | 32                          |                             |                             |  |
| O<br>T<br>H<br>E<br>R<br>S<br>I<br>N<br>V<br>O<br>L<br>V<br>E<br>D |   |   | V- Vic  | tim (Denote V | 72, V3   | ) O=0 | Owne | er (if o | other                     | than v               | ictim  | ) R                  | = Reporti                | _  |                   | (if othe                    | r than v            |                               |                                   |   |                             |                             |                             |  |
|  | Code Name (Last, First, Middle)   |   |   |               |          |       |      |          |                           |                      |        |                      | Victim                   | Injury:  Victim of DOB Crime #                             |                   |                             | Race                | Sex                           |                                   | ionship<br>ffender  | Reside                      | nt Statu                    | s Military<br>Branch/Status |  |
|  | Home Address  |   |   |               |          |       |      |          |                           |                      |        | Crime                | "                        | Age<br>Emai  |                   |                             |                     |                               | Trender                           |   | 1 11                        | ne Phone                    |                             |  |
|  |   |   |   |               |          |       |      |          |                           |                      |        |                      |                          | Lillai   | 1                 | l Ru                        | Business Phone      |                               |                                   |   |                             | oile Phone                  |                             |  |
|  |   |   |   |               |          |       |      |          |                           |                      |        |                      |                          |  |                   |                             | 14100               | me i none                     |                                   |   |                             |                             |                             |  |
|  | Type:  Code Name (Last, First, Middle)  |   |   |               |          |       |      |          |                           |                      | Victim | Crime #              |                          |  |                   | Sex                         |                     | Relationship R<br>To Offender |                                   | nt Statu  | s Military<br>Branch/Status |                             |                             |  |
|  | Но  | ome A   | ddress  |               |          |       |      |          |                           |                      |        |                      | Age<br>Emai              |  |                   |                             |                     |                               |                                   |   | Hon                         | ne Phone                    |                             |  |
|  | En  | nploye  | r Name/   | Address       |          |       |      |          |                           |                      |        |                      |                          |  | Busines           |                             |                     | s Phon                        | e                                 |   | Mob                         | oile Phone                  |                             |  |
|  | Employer Name/Address  Business Phone  Mobile Phone  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/To Value OJ QTY  |   |   |               |          |       |      |          |                           | Property Description |        |                      |                          |  | Make/Mod          |                             |                     |                               | Model                             | el  |                             |                             | ial Number                  |  |
|  | 1   | <i>51</i>   | 51         7         \$600.00         1         PRESCRIPTION SUNGLASSES           82         OTHR         \$15,000.00         1         2017 GRY/GRY FAA9510 NC |               |          |       |      |          |                           |                      |        |                      |                          |  |                   | AY-BANS<br>UBA Outback 2.5i |                     |                               |                                   | 4S4BSANC0H340163  |                             |                             |                             |  |
| P<br>R   |   | 02 011IN \$13,000,00 1 2017 0N1 PAA9310 NC        |   |               |          |       |      |          |                           |                      |        |                      |                          |  |                   |                             |                     |                               |                                   |   |                             |                             |                             |  |
| O<br>P<br>E<br>R<br>T<br>Y   |   |   |   |               |          |       |      |          |                           |                      |        |                      |                          |  |                   |                             |                     |                               |                                   |   |                             |                             |                             |  |
|  |   |   |   |               |          |       |      |          |                           |                      |        |                      |                          |  |                   |                             |                     |                               |                                   |   |                             |                             |                             |  |
|  |   |   |   |               | $\vdash$ |       |      |          |                           |                      |        |                      |                          |  |                   |                             |                     |                               |                                   |   |                             |                             |                             |  |
|  |   |   |   |               |          |       |      |          |                           |                      |        |                      |                          |  |                   |                             |                     |                               |                                   |   |                             |                             |                             |  |
|  |   |   |   |               |          |       |      |          |                           |                      |        |                      |                          |  |                   |                             |                     |                               |                                   |   |                             |                             |                             |  |
|  |   |   |   |               |          |       |      |          |                           |                      |        |                      |                          |  |                   |                             |                     |                               |                                   |   |                             |                             |                             |  |
|  | Officer/ID# ROBERTS, A. (22882)   |   |   |               |          |       |      |          |                           |                      |        |                      |                          | Outstanding Stolen Val [Total Stolen]: \$600.00 [\$600.00] |                   |                             |                     |                               |                                   |   |                             |                             |                             |  |
|  | Invest ID# D3 NO INVESTIGATOR (13)  |   |   |               |          |       |      |          |                           |                      |        |                      |                          | Supervisor DMEZA, A. G. (864)                              |                   |                             |                     |                               |                                   |   | 4)                          |                             |                             |  |
| Status   | Coı   | Complainant Signature Case Status Onen 01/07/2019 |   |               |          |       |      |          |                           |                      |        |                      | Case Disposition: Page 1 |  |                   |                             |                     |                               |                                   |   |                             |                             |                             |  |