

| | | INCIDENT/INVESTIGATION REPORT | | | | | | | | | | Case# 19-001726 | |
|---|--|---|-------------------|---------|---|------------------------------------|-------------------------|-------------------------------------|-------------------|---------------|--|-----------------------------|------------------------|
| I N C I D E N T D A T A | Agency Name Durham Police Department | | ORI NC 0320100 | | Location of Incident 3000-BLK Fayetteville St, Durham NC 27707 | | Gang Relat NO | Premise Type Grocery/supermarket | N/A/Beat 412 | | Date / Time Reported 01/13/2019 17:04 Sun | | |
| | | | | | | | | | | | Last Known Secure 01/13/2019 17:02 Sun | | |
| | | | | | | | | | | | At Found 01/13/2019 17:03 Sun | | |
| | | | | | | | | | | | | | |
| M O | #1 | Crime Incident(s) Larceny - Shoplifting LARSHO | | | | | (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 | |
| V I C T I M | # of Victims 1 | | Type: BUSINESS | | | Injury: | | | Domestic: N | | | | |
| | V1 | Victim/Business Name (Last, First, Middle) FOOD LION | | | | | Victim of Crime # 1, | DOB Age | Race | Sex | Relationship To Offender | Resident Status | 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) Type: INDIVIDUAL Injury: | | | | | | | | | | | | |
| O T H E R I N V O L V E D | Code IO | Name (Last, First, Middle) BARKSDALE, JEFFREY | | | | | Victim of Crime # | DOB Age 57 | Race B | Sex M | Relationship To Offender | Resident Status Resident | Military Branch/Status |
| | Home Address | | | | | | Email | | | | Home Phone | | |
| | Employer Name/Address | | | | | | Business Phone | | | | Mobile Phone | | |
| | Type: INDIVIDUAL Injury: | | | | | | | | | | | | |
| | Code IO | Name (Last, First, Middle) PINK, LISA | | | | | Victim of Crime # | DOB Age 51 | Race B | Sex F | Relationship To Offender | Resident Status Resident | Military Branch/Status |
| | Home Address | | | | | | Email | | | | Home 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/To | Value | OJ | QTY | Property Description | | | Make/Model | | Serial Number | |
| | 1 | 12 | 7 | \$18.99 | | 3 | BUDWEISER BEER | | | BUDWEISER/Red | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| Officer/ID# MAGLIOCCO, P. A. (21380) Outstanding Stolen Val [Total Stolen]: \$18.99 [\$18.99] | | | | | | | | | | | | | |
| Invest ID# STEPHENS, K. E. (6119) Supervisor FENNELL, C. A. (12411) | | | | | | | | | | | | | |
| Status | Complainant Signature | | | | | Case Status Inactive 01/17/2019 | | | Case Disposition: | | | Page 1 | |
| R_CS11BR Sys#: 692862 05/31/2022 15:22 | | | | | | | | | | | | | |