	Agency Name								INCIDENT/INVEST REPORT					IGATION				Case# 19-002240 Date / Time Reported				
	Durham Police Department																					
I N C I D E N T D A T	ORI NC 0320100							**	** Contains Restricted					7 3 7 stepte				me Reporte 01/17/20 wn Secure	019	12:23 Thu		
	Location of Incident							Gan	Gang Relat Premise Type				N/A/Beat			_		01/17/20		12:23 Thu		
	7000-BLK Fayetteville Rd, Durham NC 2771								NO Department D				Discount 422				At Found 01/17/2019 12:23					
	#1	Crime Incident(s)							Weapon / Tools											Activity		
	"-	Larceny - Shoplifting LARSHO							Entry	y			Exit				Security					
		Cri	me Incid					( )	Weapon / Tools								Activity					
	#2				Entry					Exit			Security									
							·		LAIL				Becurity			Activity						
	#3	Cri	me Incic	( )	Weapon / Tools				In .						$\perp$	Activity						
									Entry	Entry			Exit					rity				
МО		•							•				•									
1110																						
	# of Victims 1 Type: BUSINESS   Victim/Business Name (Last, First, Middle)										Injury:			DOD ID IG ID				Domestic		l ser.		
V	V		ictim/Bu	isiness Name (	ırst, Mı				Victim of Crime #		DOB / /	Race	Sex	Relationship To Offender		Resident Statu		Military Branch/Status				
I			estricte	ed							1,	Age										
C T	Home Address											Email							Home	e Phone		
I M	Employer Name/Address												Bus	Business Phone				Mobi	le Phone			
		r																				
	VY	ľR	Make	Model		St	tyle	Color		Lie	ic/Lis			VIN	ſ							
	CC	DES	V- Vio	ctim (Denote V	72, V3	) O = (	Owner (if	other than v	ictim)	R =	= Reporting	Persor	ı (if othe	r than vi	ctim	)						
O T H E R S			INDIVI								Injury					,						
	Cod	le N	ame (La	st, First, Middl	le)						Victim of Crime #		OOB	Race	Sex	Relations To Offen		Resident	Status	Military Branch/Status		
	RP   *   Restricted												Age Email				Res		ent.	Diancii/Status		
	Home Address																			e Phone		
	Employer Name/Address											Business Phor			Phone	e l		Mohi	le Phone			
	Lii	пртојс	a rvanie,	ridaress										Dus	mes	, i none				ic i none		
	Ту	•	INDIVI								Injury											
ŏ	Code Name (Last, First, Middle)										Victim of Crime #	DOB 1		Race	Sex	Relationship To Offender		Resident	Status	Military Branch/Status		
L V	RP Restricted											Age	e			Res						
E	Но	me A	ddress							E			Email				I		Home	e Phone		
D	En	nploye	r Name/	Address								Business Ph			s Phone	one		Mobi	le Phone			
	1 =	= Non	2 = B	Surned $3 = C_0$				= Damaged / Other Jurisd		lized	5 = Recov	vered	6 = Seiz	zed 7 =	Sto	len $8 = 0$	Jnkn	own				
	VI							Proper	Property Description					Ma	Make/Model					ıl Number		
P R O P E R T Y	1 506 7 \$300				1	1	XBOX1 C		•													
					-																	
	Off	icer/I	<u>.                                    </u>	CARLSON,	M	1 (2337)	<u>(</u>							(	Outsts	anding Stole	en Va	l [Total Stole	enl: \$3	00.00 [\$300.00]		
		est ID		SILLA, G.			<i>' )</i>						Superv									
Status	Cor	omplainant Signature Case Status										• • • •	Supervisor WALKER, A. N. (7329)  Case Disposition: Page 1									
- unus	1		-				10				01/17/	1010							- 1	1 425 1		