|                            | Agency Name  Durham Police Department  |  |                             |                    |        |       |              |                | INCIDENT/INVEST<br>REPORT |                   |                      |            |   | IGATION        |   |                                  |                | Case#      |                           |                                |  |
|----------------------------|--|--|-----------------------------|--------------------|--------|-------|--------------|----------------|---------------------------|-------------------|----------------------|------------|---|----------------|---|----------------------------------|----------------|------------|---------------------------|--------------------------------|--|
|                            |  |  |                             |                    |        |       |              |                |                           |                   |                      |            |   |                |   |                                  |                | 19-002700  |                           |                                |  |
| I<br>N                     | ORI NC 0320100   |  |                             |                    |        |       |              | . KLI OKI      |                           |                   |                      |            |   |                | Date / Time Reported 01/20/2019 Last Known Secure |                                  |                | 19:12 Sun  |                           |                                |  |
| C                          | Location of Incident   |  |                             |                    |        |       |              |                | Gang Relat Premise Type   |                   |                      |            |   | N/A/Beat       |   |                                  | 01/20/2019     |            |                           | 19:00 Sun                      |  |
| D<br>D                     |  | 00-B   | LK Dui                      | rham Chape         | l Hill | Blvd, | Durhan       | n NC N         | NO Department Disco       |                   |                      |            | At Found  |                |   |                                  |                | 019        | 19:00 Sun                 |                                |  |
| E<br>N<br>T<br>D<br>A      | #1   | 1 Crime Incident(s) (Com ) Weapon / Tools  Larceny - Shoplifting |                             |                    |        |       |              |                |                           |                   |                      |            |   |                |   |                                  |                |            |                           | Activity                       |  |
|                            |  | LARSHO   |                             |                    |        |       |              |                | Entry                     | ntry              |                      |            | Exit  |                |   |                                  | Security       |            |                           |                                |  |
|                            | #2   | Cri  | me Incid                    | lent               |        |       | ( )          | Weapon / Tools |                           |                   |                      |            |   | •              |   |                                  |                | Activity   |                           |                                |  |
|                            |  |  |                             |                    | Entry  |       |              | Exit           |                           |                   |                      |            | Security  |                | <u> </u>  |                                  |                |            |                           |                                |  |
| A                          | #3   | Crime Incident   |                             |                    |        |       |              |                | Wear                      | eapon / Tools     |                      |            | -1  |                |   |                                  |                |            | Π                         | Activity                       |  |
|                            | πЭ   |  |                             |                    |        |       |              |                | Entry                     |                   |                      | Exit       |   |                |   |                                  |                | Security   |                           |                                |  |
| МО                         |  |  |                             |                    |        |       |              |                |                           |                   |                      |            |   |                |   | <u>!</u>                         |                |            |                           |                                |  |
| V<br>I<br>C                | # of Victims 1 Type: BUSINESS  |  |                             |                    |        |       |              |                |                           |                   | Injury:              |            |   |                |   | Domestic: N                      |                |            |                           |                                |  |
|                            | Victim/Business Name (Last, First, Middle) V1 TARGET   |  |                             |                    |        |       |              |                |                           | Victim of Crime # | DOB                  |            | Race  | Sex            | Relationship<br>To Offender                       |                                  | Resident Statu |            | Military<br>Branch/Status |                                |  |
|                            | 12   |  |                             |                    |        |       |              |                |                           |                   | 1,                   | Ag<br>Emai |   |                |   |                                  |                |            | Home Phone                |                                |  |
| T                          | Home Address   |  |                             |                    |        |       |              |                |                           |                   |                      | 1          |   |                |   |                                  |                | Home       | e Phone                   |                                |  |
| I<br>M                     | En   | nploye   | er Name/                    | Address            |        |       |              |                |                           |                   |                      | Bus        | Business Phone  |                |   |                                  | Mobile Phone   |            |                           |                                |  |
|                            | VYR Make Model Style   |  |                             |                    |        |       |              | Color          |                           | Lie               | c/Lis                |            |   |                | VIN   |                                  |                |            |                           |                                |  |
|                            |  |  |                             | ctim (Denote V     | 2, V3) | O = 0 | Owner (if    | other than vi  | ctim)                     | R =               | = Reporting          | Persor     | ı (if other   | r than v       | ictim   | 1)                               |                |            |                           |                                |  |
| O                          |  |  | INDIVI                      |                    |        |       |              |                |                           |                   | Injury               |            |   |                |   |                                  | 1              |            |                           |                                |  |
| T<br>H<br>E<br>R<br>S      | Code Name (Last, First, Middle) MURRAY, MELESA   |  |                             |                    |        |       |              |                |                           |                   | Victim of<br>Crime # | L          | DOB Race Sex  |                |   | Relationship Residen Fo Offender |                |            | Military<br>Branch/Status |                                |  |
|                            | RP MORKAT, MELESA Home Address   |  |                             |                    |        |       |              |                |                           |                   |                      | Age 25     |   | В              | $B \mid F \mid$                                   |                                  | Resid          |            |                           | Dhone                          |  |
|                            |  |  |                             |                    |        |       |              |                |                           |                   |                      | Eman       |   |                |   |                                  |                |            | Home Phone                |                                |  |
|                            | Employer Name/Address  |  |                             |                    |        |       |              |                |                           |                   |                      |            |   | Business Phone |   |                                  |                |            |                           | Mobile Phone                   |  |
| N                          | Ту   | pe:  |                             |                    |        |       |              |                |                           |                   | Injury               | :          |   |                |   |                                  |                |            |                           |                                |  |
| V<br>O                     | Code Name (Last, First, Middle)  |  |                             |                    |        |       |              |                |                           |                   | Victim of<br>Crime # | DOB 1      |   | Race           | Sex   | Relationship<br>To Offender      |                | Resident S | Status                    | atus Military<br>Branch/Status |  |
| L<br>V                     |  | Д,   |                             |                    |        |       |              |                |                           |                   |                      | Age        |   |                |   |                                  |                |            |                           |                                |  |
| E<br>D                     | Ho   | me A   | ddress                      |                    |        |       |              |                |                           |                   |                      | Email      |   |                |   |                                  |                |            | Home                      | e Phone                        |  |
| 2                          | En   | nploye   | er Name/                    | Address            |        |       |              |                |                           |                   |                      |            | Business P  |                |   | s Phone                          | one Mo         |            |                           | le 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 Status  |  |                             |                    |        |       |              |                | rty Description           |                   |                      |            | Make/Mode   |                |   |                                  | Se             |            |                           | al Number                      |  |
|                            | 1  | 99   | 99 7,5 \$39.99 1 PHONE CASE |                    |        |       |              |                |                           |                   |                      |            | CASEMATE  |                |   |                                  |                |            |                           |                                |  |
| ъ                          | 1  | 99<br>99   | 5                           | \$39.99            |        | 1     | PHONE LANYAR |                |                           |                   |                      | CASEMATE   |   |                |   |                                  |                |            |                           |                                |  |
| P<br>R                     | 1  | 99   | 7,5<br>5                    | \$11.98<br>\$11.98 |        | 2     | LANYAR       |                |                           |                   |                      |            |   | VG<br>VG       |   |                                  |                |            |                           |                                |  |
| O<br>P<br>E<br>R<br>T<br>Y |  |  |                             | ,,,,,              |        | _     |              |                |                           |                   |                      |            |   |                |   |                                  |                |            |                           |                                |  |
|                            |  |  |                             |                    |        |       |              |                |                           |                   |                      |            |   |                |   |                                  |                |            |                           |                                |  |
|                            |  |  |                             |                    |        |       |              |                |                           |                   |                      |            |   |                |   |                                  |                |            |                           |                                |  |
|                            |  |  |                             |                    |        |       |              |                |                           |                   |                      |            |   |                |   |                                  |                |            |                           |                                |  |
|                            |  |  |                             |                    |        |       |              |                |                           |                   |                      |            |   |                |   |                                  |                |            |                           |                                |  |
|                            |  |  | -                           |                    |        |       |              |                |                           |                   |                      |            |   |                |   |                                  |                |            |                           |                                |  |
|                            | Officer/ID# BATTLE, C. M. (17634)  |  |                             |                    |        |       |              |                |                           |                   |                      |            | Outstanding Stolen Val [Total Stolen]: \$0.00 [\$51.97], Tot Rec Val: \$51.97 |                |   |                                  |                |            |                           |                                |  |
|                            |  | est ID   |                             | BATTLE, C          |        |       |              |                |                           |                   |                      |            | Supervisor <i>FIGUEROA</i> , A. L. (18594)                                    |                |   |                                  |                |            |                           |                                |  |
| Status                     | Cor  | Complainant Signature Case Status                                |                             |                    |        |       |              |                |                           |                   |                      |            | Case Disposition: Page 1  |                |   |                                  |                |            |                           |                                |  |