

|   |  |   |  |   |   |                      |  |                 |                          |                                    |                        |  |
|---|--|---|--|---|---|----------------------|--|-----------------|--------------------------|------------------------------------|------------------------|--|
| I<br>N<br>C<br>I<br>D<br>E<br>N<br>T<br><br>D<br>A<br>T<br>A                                  | Agency Name<br><b>Durham Police Department</b>   |   | <b>INCIDENT/INVESTIGATION<br/>REPORT</b> |   |   |                      | Case#<br><b>19-000107</b>                        |                 |                          |                                    |                        |  |
|   | ORI<br><b>NC 0320100</b>   |   |  |   | Date / Time Reported<br><b>01/01/2019 16:48 Tue</b> |                      |  |                 |                          |                                    |                        |  |
|   | Location of Incident<br><b>1800-BLK Martin Luther King Jr Pkwy, Durham</b>   |   | Gang Relat<br><b>NO</b>                  | Premise Type<br><b>Drug Store/doctors</b> | N/A/Beat<br><b>322, 314</b>                         |                      | Last Known Secure<br><b>01/01/2019 16:48 Tue</b> |                 |                          |                                    |                        |  |
|   |  |   |  |   |   |                      | At Found<br><b>01/01/2019 16:48 Tue</b>          |                 |                          |                                    |                        |  |
| D<br>E<br>T<br>A<br>I<br>L<br>S   | #1   | Crime Incident(s)<br><b>Larceny - Shoplifting<br/>LARSHO</b>  | (Com )                                   | Weapon / Tools<br><b>None</b>             |   |                      | Activity<br><b>N</b>                             |                 |                          |                                    |                        |  |
|   |  |   |  | Entry                                     | Exit  | Security             |  |                 |                          |                                    |                        |  |
|   | #2   | Crime Incident  | ( )                                      | Weapon / Tools                            |   |                      | Activity   |                 |                          |                                    |                        |  |
|   |  |   |  | Entry                                     | Exit  | Security             |  |                 |                          |                                    |                        |  |
|   | #3   | Crime Incident  | ( )                                      | Weapon / Tools                            |   |                      | Activity   |                 |                          |                                    |                        |  |
|   |  |   |  | Entry                                     | Exit  | Security             |  |                 |                          |                                    |                        |  |
| MO  |  |   |  |   |   |                      |  |                 |                          |                                    |                        |  |
| V<br>I<br>C<br>T<br>I<br>M  | # of Victims <b>I</b>  |   | Type: <b>BUSINESS</b>                    |   | Injury:   |                      | Domestic: <b>N</b>                               |                 |                          |                                    |                        |  |
|   | <b>V1</b>  | Victim/Business Name (Last, First, Middle)<br><b>CVS</b>      |  |   | Victim of Crime #<br><b>I,</b>                      | DOB<br><b>Age</b>    | 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)<br>Type: <b>INDIVIDUAL</b> Injury:                   |   |  |   |   |                      |  |                 |                          |                                    |                        |  |
| O<br>T<br>H<br>E<br>R<br><br>I<br>N<br>V<br>O<br>L<br>V<br>E<br>D                             | <b>RP</b>  | Name (Last, First, Middle)<br><b>CARPENTER, JEFFREY RAMEL</b> |  |   | Victim of Crime #                                   | DOB<br><b>Age 26</b> | Race<br><b>B</b>                                 | Sex<br><b>M</b> | Relationship To Offender | Resident Status<br><b>Resident</b> | Military Branch/Status |  |
|   |  | Home Address  |  |   | Email   |                      |  | Home Phone      |                          |                                    |                        |  |
|   | Employer Name/Address  |   |  | Business Phone                            |   |                      | Mobile Phone                                     |                 |                          |                                    |                        |  |
|   | Type:  |   | Injury:                                  |   |   |                      |  |                 |                          |                                    |                        |  |
|   |  | Name (Last, First, Middle)                                    |  |   | Victim of Crime #                                   | DOB<br><b>Age</b>    | Race   | Sex             | Relationship To Offender | Resident Status                    | Military Branch/Status |  |
|   |  | Home Address  |  |   | Email   |                      |  | Home Phone      |                          |                                    |                        |  |
| Employer Name/Address   |  |   | Business Phone                           |   |   | Mobile Phone         |  |                 |                          |                                    |                        |  |
| P<br>R<br>O<br>P<br>E<br>R<br>T<br>Y  | 1 = None 2 = Burned 3 = Counterfeit / Forged 4 = Damaged / Vandalized 5 = Recovered 6 = Seized 7 = Stolen 8 = Unknown<br>("OJ" = Recovered for Other Jurisdiction) |   |  |   |   |                      |  |                 |                          |                                    |                        |  |
|   | VI #   | Code  | Status<br>Frm/To                         | Value                                     | OJ  | QTY                  | Property Description                             |                 | Make/Model               |                                    | Serial Number          |  |
|   | 1  | 45  | 7  | \$4.99                                    |   | 2                    | FABREEZE   |                 |                          |                                    |                        |  |
|   | 1  | 13  | 7  | \$3.19                                    |   | 5                    | FABULOSO   |                 |                          |                                    |                        |  |
|   |  |   |  |   |   |                      |  |                 |                          |                                    |                        |  |
|   |  |   |  |   |   |                      |  |                 |                          |                                    |                        |  |
|   |  |   |  |   |   |                      |  |                 |                          |                                    |                        |  |
|   |  |   |  |   |   |                      |  |                 |                          |                                    |                        |  |
|   |  |   |  |   |   |                      |  |                 |                          |                                    |                        |  |
|   |  |   |  |   |   |                      |  |                 |                          |                                    |                        |  |
|   |  |   |  |   |   |                      |  |                 |                          |                                    |                        |  |
|   |  |   |  |   |   |                      |  |                 |                          |                                    |                        |  |
| Officer/ID# <b>STOKELY, W. (22863)</b> Outstanding Stolen Val [Total Stolen]: \$8.18 [\$8.18] |  |   |  |   |   |                      |  |                 |                          |                                    |                        |  |
| Invest ID# <b>SMITH, D. C. (9105)</b> Supervisor <b>SWARTZ, R. C. (7178)</b>                  |  |   |  |   |   |                      |  |                 |                          |                                    |                        |  |
| Status  | Complainant Signature  |   |  |   | Case Status<br><b>Open</b>                          |                      | <b>01/02/2019</b>                                |                 | Case Disposition:        |                                    | Page 1                 |  |