	Agency Name							٦	** Contains Restricted  Gang Relat   Premise Type					<b>IGAT</b>		Ca	Case#						
	Durham Police Department																		19-003021 Date / Time Reported				
I N C I D E N T	ORI													01/23/2019 13:2					13:23 Wed				
	NC 0320100  Location of Incident													Last Known Secure 01/21/2019 19:30 M									
	3000-BLK E Weaver St, Durham NC 27707							-			me Of Vio		ıulti 412			At Found 01/23/20			13:23 Wed				
	#1	Vandalism					((	JOIII /	Entry Entry			ndgun	Exit				Security			N			
		VANOTH Crime Incident						(	,	Weapon / Tools											Activity		
	#2	Came include							(	,	Entry				Exit				Security			ricuvity	
T A			Crime Incident												EXIL				Security			Activity	
	#3	Crime Incident						(	)	Weapon / Tools				Evit				-			Activity		
											Entry	У			Exit				Security				
МО																							
V I	# of Victims I Type: INDIVIDUAL									Injury: No					one								
	Victim/Business Name (Last, First, Middle)											Victim of Crime #	1		Race	Sex	Relationship To Offender		Residen	t Status	Military Branch/Status		
	V1   *   Restricted												1,	Age Age				10 011	R			Dianen/Status	
C T	Home Address													Ema	Email							e Phone	
I M	Employer Name/Address													Busi			siness	s Phone	Phone			Mobile Phone	
	VYR Make Model Style							Colo	or		Lic	c/Lis	VI			1							
O T H E R S I N V O L V E D	CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)																						
			INDIVI		N 4° 1 11	`							Injury		OD	LD	с I	D 1 d	1.	D 11		N. 4717	
	Code Name (Last, First, Middle) *  **  **  **  **  **  **  **  **  **												Victim of Crime #	DOB Ra		Race	Sex	Relatio To Off		Residen	t Status	Military Branch/Status	
	RP Restricted Home Address													Age Email						Resid		e Phone	
														Business P				s Phone	ione			ile Phone	
	Type: Injury:																						
	Code Name (Last, First, Middle)											Victim of Crime #	DOB		Race	Sex	Relatio To Off		Residen	t Status	Military Branch/Status		
	Home Address													Age Email						Hom		e Phone	
										Eine				Lilla									
	Employer Name/Address Business Phone															Mobi	ile 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 # Code Frm/To Value OJ QTY									Property Description				Make/Mode				Serial Nu			al Number		
								SINGLE OCCUPANCY					Wake, Woo			10401							
	Off	icer/I	D#	GRILL	ASC/	1, R.	A. (19	154)							l								
		est ID	#	NO IN										Supervisor ANDRZEJEWSKI, R. (867)							867)		
Status	Cor	Complainant Signature Case Status											Case Disposition: Page 1										