	Agency Name								I N	JOH	DEI	IT/INI\/I	=CT	IC A TI	UNI	IGATION 🕝						
									INCIDENT/INVEST						IGATION				Case# 19-001174			
	Durham Police Department							_	REPORT							Date / Tir			me Reported	10.20 W. J		
I N C I D E N T D A T	ORI NC 0320100															Las	Last Known Secure			10:29 Wed		
	Location of Incident								Gang Relat Premise					N/A/Beat			At	01/05/2019 13:1 At Found				
	3500-BLK Hillsborough Rd, Durham NC 2770								05 NO Drug Sto (Com) Weapon / Tools			rug Store	/doct	ors	213,	221					10:29 Wed Activity	
	#1 Crime Incident(s) Fraud - False Pretense						((om)	Entry				Exit				C	-:4	\perp	N		
	FRDFAL													EXII				Secui	nty		A .: :.	
	#2	2 Crime Incident)	Weapon / Tools				Exit							Activity	
								Entry									Security					
	#3	3 Crime Incident						(, , , , , , , , , , , , , , , , , , , ,			Tools									Activity	
									Entry					Exit				Security				
МО																						
	# of Victims 2 Type: BUSINESS											Injury					D () N					
V I C T I M	For Victims 2 Type: BUSINESS Victim/Business Name (Last, First, Middle)											Victim of	None DOB 1		Race			nship	Domestic: I Resident Sta		Military	
	V1 CVS PHARMACY											Crime #	Ag				To Offender				Branch/Status	
	Home Address											1,	Ema				1RU	10		ome	Phone	
	Em	.ml.ov.	Momo	Address																	Makila Dhama	
	EII	іріоує	er ivanie/	Address											Bus	Business Phone			IV.	Mobile Phone		
	VYR Make Model Style						Colo	Color Lic/							N		•	-				
	CC	DES	V- Vio	ctim (Denote V	2, V3) O = O	wner (i	f other t	han vi	ctim)	R =	= Reporting	Person	n (if other	than v	ictim	1)					
O T H E R S	Ту		INDIVI									Injury										
	Cod	" ກ		st, First, Middle LL, RALPH		VARD						Victim of Crime #	Ι	DOB Race Sex Relationship Resident Status Bra						Military Branch/Status		
	V2 BURWELL, KALPH EDWARD Home Address											1,	Age 40		В	M	1RU		Non-Resid		Phone	
													Ellia	П					Н	ome	Pnone	
	En	nploye	er Name/	Address											Bus	sines	s Phone		M	lobil	e Phone	
N	Ту	pe:										Injury	:		<u> </u>							
V O L V E D	Code Name (Last, First, Middle)											Victim of Crime #	DOB 1		Race	Sex	Relationship To Offender				Military Branch/Status	
												Crime "	Age			10 0110						
	Но	me A	ddress										Email					Но			Phone	
	En	ploye	er Name/	Address										Busines			s Phone	Phone			Mobile Phone	
	1 = None 2 = Burned 3 = Counterfeit / Forged 4 = Damaged / Vandalized 5 = Recovered 6 = Seized 7 = Stolen 8 = Unknown																					
						= Recov								1								
	VI								Property Description				Make/Mo			Iodel	el			Serial Number		
	1 14 7 \$59.00 90 PRESCRIPTION								TON PILLS					/Clonazepam								
P R O P E R T Y																						
																			_			
		 																				
																				—		
																				_		
	Officer/ID# INTHISANE, R. (23382) Invest ID# IONES B S (7153) Supervisor WHEEL																					
Gt :		Invest ID# JONES, B. S. (7153) Complainant Signature Case Status											Casa Diamonitian									
Status	COI	Complainant Signature Case Status Inactive 01/11/201										2019	Page 1									