

|   |  | INCIDENT/INVESTIGATION<br>REPORT   |                          |                    |  |                               |                                 |   |  |                         |   | Case#<br>19-000314                                       |                        |                         |  |
|---|--|--|--------------------------|--------------------|--|-------------------------------|---------------------------------|---|--|-------------------------|---|--|------------------------|-------------------------|--|
| 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><i>Durham Police Department</i>   |  | ORI<br><i>NC 0320100</i> |                    | Location of Incident<br><i>2300-BLK Lednum St, Durham NC 27705</i> |                               | Gang Relat<br>NO                | Premise Type<br><i>Home Of Victim-multi</i> | N/A/Beat<br>213                        |                         | Date / Time Reported<br><i>01/03/2019 07:28 Thu</i> |  |                        |                         |  |
|   |  |  |                          |                    |  |                               |                                 |   |  |                         | Last Known Secure<br><i>01/03/2019 01:00 Thu</i>    |  |                        |                         |  |
|   |  |  |                          |                    |  |                               |                                 |   |  |                         | At Found<br><i>01/03/2019 07:20 Thu</i>             |  |                        |                         |  |
|   |  |  |                          |                    |  |                               |                                 |   |  |                         |   |  |                        |                         |  |
| M<br>O  | #1   | Crime Incident(s) (Com)<br><i>Larceny - Automobile Parts Or Accessories - LARACC</i> |                          |                    |  |                               | Weapon / Tools                  |   |  |                         |   | Activity<br>N  |                        |                         |  |
|   |  |  |                          |                    |  |                               | Entry                           |   | Exit                                   |                         | Security  |  |                        |                         |  |
|   | #2   | Crime Incident ( )   |                          |                    |  |                               | Weapon / Tools                  |   |  |                         |   | Activity   |                        |                         |  |
|   |  |  |                          |                    |  |                               | Entry                           |   | Exit                                   |                         | Security  |  |                        |                         |  |
|   | #3   | Crime Incident ( )   |                          |                    |  |                               | Weapon / Tools                  |   |  |                         |   | Activity   |                        |                         |  |
|   |  |  |                          |                    |  |                               | Entry                           |   | Exit                                   |                         | Security  |  |                        |                         |  |
| V<br>I<br>C<br>T<br>I<br>M  | # of Victims <i>1</i>  |  | Type: <i>INDIVIDUAL</i>  |                    |  | Injury: <i>None</i>           |                                 |   | Domestic: <i>N</i>                     |                         |   |  |                        |                         |  |
|   | V1   | Victim/Business Name (Last, First, Middle)<br><i>YOUNG, ERIC EDISON</i>              |                          |                    |  |                               | Victim of Crime #<br><i>1</i>   | DOB<br>Age <i>27</i>                        | Race<br><i>B</i>                       | Sex<br><i>M</i>         | Relationship To Offender<br><i>IRU</i>              | Resident Status<br><i>Resident</i>                       | Military Branch/Status |                         |  |
|   | Home Address   |  |                          |                    |  |                               | Email                           |   |  |                         | Home Phone  |  |                        |                         |  |
|   | Employer Name/Address  |  |                          |                    |  |                               | Business Phone                  |   |  |                         | Mobile Phone  |  |                        |                         |  |
|   | VYR<br><i>1997</i>   | Make<br><i>TOYT</i>  | Model<br><i>AVALON</i>   | Style<br><i>4S</i> | Color<br><i>GRN</i>  | Lic/Lis<br><i>TPY8110, NC</i> | VIN<br><i>4T1BF12B0VU167353</i> |   |  |                         |   |  |                        |                         |  |
|   | CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)  |  |                          |                    |  |                               |                                 |   |  |                         |   |  |                        |                         |  |
|   | Type: 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 | Code   | Name (Last, First, Middle)   |                          |                    |  |                               | Victim of Crime #               | DOB<br>Age                                  | Race                                   | Sex                     | Relationship To Offender                            | Resident Status  | Military Branch/Status |                         |  |
|   | Home Address   |  |                          |                    |  |                               | Email                           |   |  |                         | Home Phone  |  |                        |                         |  |
|   | Employer Name/Address  |  |                          |                    |  |                               | Business Phone                  |   |  |                         | Mobile Phone  |  |                        |                         |  |
|   | Type: Injury:  |  |                          |                    |  |                               |                                 |   |  |                         |   |  |                        |                         |  |
|   | Code   | Name (Last, First, Middle)   |                          |                    |  |                               | Victim of Crime #               | DOB<br>Age                                  | 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  |                        |                         |  |
|   | <i>1</i>   | <i>TAG</i>   | <i>7</i>                 | <i>\$28.00</i>     |  | <i>1</i>                      | <i>LICENSE PLATE</i>            |   |  |                         |   |  |                        |                         |  |
|   | <i>1</i>   | <i>82</i>  | <i>OTHR</i>              | <i>\$0.00</i>      |  | <i>1</i>                      | <i>1997 GRN, TPY8110 NC</i>     |   |  | <i>TOYT Avalon U.s.</i> |   | <i>4T1BF12B0VU167353</i>                                 |                        |                         |  |
|   |  |  |                          |                    |  |                               |                                 |   |  |                         |   |  |                        |                         |  |
|   |  |  |                          |                    |  |                               |                                 |   |  |                         |   |  |                        |                         |  |
|   |  |  |                          |                    |  |                               |                                 |   |  |                         |   |  |                        |                         |  |
|   |  |  |                          |                    |  |                               |                                 |   |  |                         |   |  |                        |                         |  |
|   |  |  |                          |                    |  |                               |                                 |   |  |                         |   |  |                        |                         |  |
|   |  |  |                          |                    |  |                               |                                 |   |  |                         |   |  |                        |                         |  |
|   |  |  |                          |                    |  |                               |                                 |   |  |                         |   |  |                        |                         |  |
|   |  |  |                          |                    |  |                               |                                 |   |  |                         |   |  |                        |                         |  |
| Officer/ID# <i>SEIGLER, A. M. (22168)</i>                         |  |  |                          |                    |  |                               |                                 |   |  |                         |   | Outstanding Stolen Val [Total Stolen]: \$28.00 [\$28.00] |                        |                         |  |
| Invest ID# <i>D2 NO INVESTIGATOR (14)</i>                         |  |  |                          |                    |  |                               |                                 |   |  |                         |   | Supervisor <i>HONEYCUTT, J. L. (7179)</i>                |                        |                         |  |
| Status  | Complainant Signature  |  |                          |                    |  | Case Status<br><i>Open</i>    |                                 |   | Case Disposition:<br><i>01/03/2019</i> |                         |   | Page 1   |                        |                         |  |
| <i>R_CS11BR</i>   |  |  |                          |                    |  |                               |                                 |   |  |                         |   | <i>Sys#: 691776</i>                                      |                        | <i>05/31/2022 15:38</i> |  |