INCIDENT/INVESTIGATION REPORT

INCIDENT DATA

Agency Name: CHAPEL HILL POLICE
ORI: NC 0680100
OCA: 1402594
Date / Time Reported: Month 03 | Day 07 | Yr 2014 | Time 08:26 Hrs.

	Crime Incident(s)	Att/Com	At Found (Month / Day / Yr / Time)	Last Known Secure (Month / Day / Yr / Time)
#1	Simple Assault-other	☐ Att ☒ Com	03 / 07 / 2014 / 08:26 Hrs.	03 / 07 / 2014 / 08:26 Hrs.
#2	Crime Incident	☐ Att ☐ Com	Location of Incident: 500 Umstead Dr Apt. 208-B, Chapel Hill NC	Offense Tract:
#3	Crime Incident	☐ Att ☐ Com	Premise Type: HOME OF VICTIM - OTHER	Victim Residence Type: ☐ Single Family ☒ Multi Family

MO

How Attacked or Committed: *Suspect Assaulted Complainant*
Forcible: ☒ Yes ☐ No ☐ N/A
Weapon / Tools: *Personal Weapons (hands, Feet,*

VICTIM

# of Victims: 1
Type: ☒ Person ☐ Business ☐ Society ☐ Government ☐ Financial Institute ☐ Religious ☐ L.E. Officer Line of Duty ☐ Other/Unknown
Injury: ☒ None ☐ Minor ☐ Loss of Teeth ☐ Broken Bones ☐ Severe Lacerations ☐ Internal ☐ Unconscious ☐ Other Major
Drug/Alcohol Use: ☒ Yes ☐ Unknown ☐ No ☐ N/A

	Victim/Business Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex	Relationship To Offender	Resident Status
V1	JUNCO, KIRSTEN ELIZABETH	1,	48		F	PA	☒ Resident ☐ Non-Resident ☐ Unknown

Home Address: 500 UMSTEAD DR - APT B208, Chapel Hill, NC 27516
Home Phone:
Employer Name/Address:
Business Phone:
Mobile Phone:

VYR	Make	Model	Style	Color	Lic/Lis	Vin

OTHERS INVOLVED

CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)
Type: ☒ Person ☐ Business ☐ Society ☐ Government ☐ Financial Institute ☐ Religious ☐ L.E. Officer Line of Duty ☐ Other/Unknown

Code	Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex
OT	JUNCO,		18		M

Home Address: 100 W Rosemary St Chapel Hill, NC 27516
Home Phone:
Employer Name/Address:
Business Phone:
Mobile Phone:

Type: ☐ Person ☐ Business ☐ Society ☐ Government ☐ Financial Institute ☐ Religious ☐ L.E. Officer Line of Duty ☐ Other/Unknown

Code	Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex

Home Address:
Home Phone:
Employer Name/Address:
Business Phone:
Mobile Phone:

PROPERTY

Status Codes: L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found
(Check "OJ" column if recovered for other jurisdiction)

Victim #	DCI	Status	Value	OJ	QTY	Property Description	Make/Model	Serial Number

Number of Vehicles Stolen: 0 Number Vehicles Recovered: 0

ID

Officer: JEFFREYS, A. R. (6864) ID#:
Officer Signature:
Supervisor Signature: SHINN, G. L. (5479)

Status

Complainant Signature:

Case Status: ☐ Further Investigation ☐ Inactive ☒ Closed/Cleared ☐ Closed/Leads Exhausted

Case Disposition: ☐ Unfounded ☐ Located ☐ Extradition Declined ☐ Cleared by Arrest ☒ Refuse to Cooperate ☐ Cleared by Arrest by Another Agency ☐ Death of Offender ☐ Prosecution Declined

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