

I N C I D E N T D A T A	Agency Name CHAPEL HILL POLICE		INCIDENT/INVESTIGATION REPORT				OCA 1506326		
	ORI NC 0680100						Date / Time Reported Month Day Yr Time 05 19 2015 06:07 Hrs.		
	#1	Crime Incident(s) Suspicious Person	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com	At Found Month Day Yr Time 05 19 2015 06:07 Hrs.		Last Known Secure Month Day Yr Time 05 19 2015 06:06 Hrs.			
	#2	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com	Location of Incident 102 Cedar Hills Dr, Chapel Hill NC 27514			Offense Tract		
#3	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com	Premise Type HOME OF VICTIM - SINGLE			Victim Residence Type <input checked="" type="checkbox"/> Single Family <input type="checkbox"/> Multi Family			
MO	How Attacked or Committed By Being On A Premise Unauthorized.					Forcible <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> No	Weapon / Tools Not Applicable/none		
V I C T I M	# of Victims 1	Type <input checked="" type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown		Injury <input checked="" type="checkbox"/> None <input type="checkbox"/> Minor <input type="checkbox"/> Loss of Teeth <input type="checkbox"/> Broken Bones <input type="checkbox"/> Severe Lacerations <input type="checkbox"/> Internal <input type="checkbox"/> Unconscious <input type="checkbox"/> Other Major		Drug/Alcohol Use: <input type="checkbox"/> Yes <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A			
	V1	Victim/Business Name (Last, First, Middle) SPRENGER, MICHAEL		Victim of Crime # 1,	DOB / Age 41	Race M	Sex AQ		
	Home Address 102 CEDAR HILLS DR , Chapel Hill, NC 27514					Home Phone			
	Employer Name/Address					Business Phone	Mobile Phone		
	VYR	Make	Model	Style	Color	Lic/Lis	Vin		
O T H E R 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)								
	Type: <input type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> 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			
	Type: <input type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> 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				
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)								
P R O P E R T Y	Victim #	DCI	Status	Value	OJ	QTY	Property Description	Make/Model	Serial Number
		82	NONE	\$0.00		1	2010 BLK, CBA5513 NC	NISS Xterra	
Number of Vehicles Stolen 0 Number Vehicles Recovered 0									
ID	Officer DANIELS, C. R. (8995)			ID#			Officer Signature FINCH, A. M. (5629)		
Status	Complainant Signature				Case Status <input checked="" type="checkbox"/> Further Investigation <input type="checkbox"/> Inactive <input type="checkbox"/> Closed/Cleared <input type="checkbox"/> Closed/Leads Exhausted		Case Disposition: <input type="checkbox"/> Unfounded <input type="checkbox"/> Located <input type="checkbox"/> Extradition Declined <input type="checkbox"/> Cleared by Arrest <input type="checkbox"/> Refuse to Cooperate <input type="checkbox"/> Cleared by Arrest by Another Agency <input type="checkbox"/> Death of Offender <input type="checkbox"/> Prosecution Declined		
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