INCIDENT/INVESTIGATION REPORT

Agency Name: Mt Airy Police Department
ORI: NC0860200
Incident Number: 2610100002
Date / Time Reported: Month 10 | Day 10 | Yr 2026 | Time 16:14 Hrs.

INCIDENT DATA

	Crime / Incident(s)	Attempt / Complete	At Found (Month / Day / Yr / Time)	Last Known Secure (Month / Day / Yr / Time)	Location of Incident	Offense Tract	Victim Residence Type
#1	23H - Misdemeanor Larceny	Complete	10 / 10 / 2026 / 14:43 Hrs.	10 / 08 / 2026 / 14:32 Hrs.	103 COFFEE & CREAMERY - 334 E PINE ST, INT, MOUN	Z3	Single Family / Multi Family
#2	Crime Incident	Attempt					
#3	Crime Incident	Attempt			Location\Premise: 13 - Highway/Road/Alley/Street/Sidewalk		

MO

How Attacked or Committed: BY AN UNKNOWN SUSPECT TAKING A SIGN
Method Of Entry: Force / No Force
Weapon / Tools:

VICTIM

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

	Victim/Business Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex	Relationship To Offender	Resident Status
V1	[redacted]	1	[redacted]				

Home Address: [redacted] | **Home Phone:** [redacted]
Employer Name/Address: | **Business 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

Home Address: | **Home Phone:**
Employer Name/Address: | **Business 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:**

PROPERTY

Status Codes: 1 = None 2 = Burned 3 = Counterfeit / Forged 4 = Damaged 5 = Recovered 6 = Seized 7 = Stolen 8 = Unknown
(Check "OJ" column if recovered for other jurisdiction)

Victim #	DCI	Status	Value	OJ	QTY	Property Description	Make/Model	Serial Number
1	77	7	5.00		1	MISCELLANEOUS SIGN	N/A	

ID

Officer Name: J HILL | **ID#:** 011
Officer Signature:
Supervisor Signature:

STATUS

Complainant Signature:

Case Status: Active / Inactive / Closed by Arrest / Unfounded / Closed by Exception / Located (Missing Person and Runaways only) / Closed by Other Means

Exceptional Clearance: Death of Offender / Juvenile/No Custody / Prosecution Declined / Not Applicable / In Custody of Other Jurisdiction / Victim Refuse to Cooperate

DCI-600F Rev. 3/92

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DRUGS

DCI	Status	Quantity	Type Measure	Suspected Type	Criminal Activity

OFFENDER

Offender Used	Yes	No	N/A
Alcohol	☐	☐	■
Drugs/Narcotics	☐	☐	■
Computer	☐	☐	■

Offender 1		
Age: 00 Race: U Sex: U	Age: Race: Sex:	Age: Race: Sex:
Age: Race: Sex:	Age: Race: Sex:	Age: Race: Sex:

Primary Offender Resident Status
☐ Resident
☐ Non-Resident
■ Unknown

SUSPECT

Name (Last, First, Middle)	Alias or Nickname	Home Address
UNKNOWN		

Occupation	Business Address

DOB / Age	Race	Sex	Height	Weight	Build	Hair Color	Hair Style	Hair Length	Eye Color
00	U	U			UNK	UNK	UNK	UNK	UNK

Scars, Marks, Tattoos, or other distinguishing features (i.e. limp, foreign accent, voice characteristics)

Hat	Jacket	Shirt/Blouse	Tie/Scarf	Coat/Suit	Pants/Dress/Skirt	Socks	Shoes

Was Suspect Armed?	Type of Weapon	Direction of Travel	Mode of Travel

VYR	Make	Model	Style	Color	Lic/Lis	Vin

WITNESS

Name (Last, First, Middle)	DOB / Age	Race	Sex	Incident Number

Home Address	Home Phone	Employer	Phone

Suspect Hate / Bias Motivated: Yes ☐ No ■ 88-None (No Bias)

NARRATIVE

Narrative

BETWEEN THE DATES AND TIMES LISTED ABOVE, AN UNKNOWN SUSPECT STOLE A SIGN THAT STATED "THE SHERIFF'S OFFICE IS SPYING ON YOU" FROM 334 EAST PINE STREET, 103 COFFEE AND CREAMERY.