I N	Agenc	y Nam		NSTON-SALEN	л Ро	OLICE	IN	INCIDENT/INVESTIGATION REPORT						OCA 2411462					
C	ORI					OLICE	1							Date / Time Reported SM WTFS Month Day Yr Time					
D E	NC NC 0340200 Crime Incident(s)															04   02   2024  19:21 Hrs.			
N	#1 Vandalism									TT: C							Day Yr Time		
T	#2	Crime I	ncident	ranaans	111				-	04   Location	02   2024 of Incident	4   15	9:21 HIS	04	<u> </u>		19:20 Hrs. Offense Tract		
D A	□ Com 839 Camel Av, Winston-salem NC 2																222		
T A	#3	Jrime I	ncident					☐ Att Premise Type ☐ Com						Victim Residence Type  ☐ Single Family ☐ Multi Family					
МО			d or Con						Forcible Yes					Weapon / Tools					
WIO	□ No																		
V	# of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:   Broken Bones   Severe Lacerations   Yes   Unknow																		
	1		Rel	igious 🔲 L.E. Of	icer I	Line of D			know	. –	Internal 🔲		nscious	Other	Majo	r 🛛 No	N/A		
I C		Victim/	Business	Name (Last, First,					Victim of Crime #	DOI	3 / Age 49	Race	Sex	Relationship To Offender	Resident Status Resident				
T I	V1		DA	TA OMITTED							1,		77	$\mid_{B}\mid$	M	1RU	☐ Non-Resident		
M	Home	Addre	ess		ATA OMI	PTD							Home Phone Unknown						
	Employer Name/Address  DATA OMI													Business Phone					
	VYR	ake	Model	yle	Color	'A OMITTED  olor   Lic/Lis   Vin						Submission 1 mone							
	VIK	IVI	ake	Wiodei	Si	yie	Color		Lic	/LIS			V III						
O T H E R S I N V O L V E D		DATA OMITTED																	
Status Codes	(Chec	k "OJ"	= Stolen column	R = Recovered if recovered for other	D = I er juri	Damaged sdiction)	Z = Seized	B =	Burn	ed C = C	ounterfeit / F	Forged	F = Found	1					
	Victim #		Property Description							ke/Mo	del Se	rial Number							
- - P - R							CAMERA/OPTICAL EQUIPMENT									DA	TA OMITTED		
				+	+											IN	FOR FORMATION		
					+												SECURITY		
ο .																	PURPOSES		
P .					_											0)	I WELLE EID CE		
R T					_												ILY THE FIRST VE PROPERTY		
Y ·					$\dashv$												ITEMS ARE		
					_												ISPLAYED ON		
																P	2C REPORTS		
		-			Ţ		1 5	,											
	Numb		ehicles S	tolen 0		nber Vehi	cles Recovere		0 e			1	Supervisor	Signati	ure				
ID	SLO	AN, C	6301)								WHITE	E, R. D. (15708)							
	1 6								Status Case Disposition:  □ Unfounded □ Located □ Ex						□ Extr	adition Declined			
Status							☐ Closed	tive /Clea	red		☐ Cleared	l by Ai	rrest Dece	Refuse ther Ag	gency	ooperate	Page 1		