I N	Agenc	y Name		STON-SALEN	CIDENT/INVESTIGATION						OCA 2422705									
I C	ORI	NC	NC 02	10200	1		REPORT						Date / Time Reported SMTMTFS Month Day Yr Time							
D E	NC NC 0340200 Crime Incident(s)									☐ Att At Found							06 26 2024 08:52 Hrs. Last Known Secure S M T ₩ T F S			
N T	#1			, Assault-non Agg	_	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$														
D.	#2		ncident				Att	Location	of I	Incident						Offense Tract				
A T	Crime Incident Com 1499 New Walkertown Rd, Winston H 3 Crime Incident Att Premise Type																<i>i NC</i> Victim Resid	222		
A	#3	Jiiiie i	neident					Com						☐ Single Family ☐ Multi Family						
МО			d or Com		Forcible Yes						☐ Yes [Weapon / Tools								
	# of Victims Type None N															Alcohol Use:				
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown															es Unknown				
V I		Victim/		igious L.E. Off Name (Last, First,			ity Othe	er/Un	know	n 🗆		ernal Victim of		scious B / Age	Other Race					
C T	V1	v ictiii/		ΓA OMITTED					Crime #	DOL	35	Race	Sex	To Offende	Resident					
I	,]	DA					1,			$\mid w \mid$	M	1RU	☐ Non-Resident ☐ Unknown							
М -	Home	Addre	ess		ГТЕ	TED							Home Phone							
	Employer Name/Address DATA OMI														Business Phone					
•	VYR	Color Lic/Lis Vin						Vin												
O T H E R S I N V O L V E D	DATA OMITTED																			
Status Codes																				
Coucs	Victim			Property Description								Mal	e/Mo	dal 9	Serial Number					
	#	# DCI Status Value OJ QTY Property Description								IVIAN	C/ IVIO		ATA OMITTED							
- P -																		FOR		
					_													NFORMATION SECURITY		
R O																		PURPOSES		
Р ⁻ Е -																				
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Т Ү -					_												TWE	LVE PROPERTY ITEMS ARE		
•					\dashv												1	DISPLAYED ON		
-					\dashv													P2C REPORTS		
_																				
			ehicles S			nber Vehi	cles Recovere		0					C	C:					
ID	Officer ID# Office MONJARAS, J. C. (16324)								Officer Signature Supervisor S MULLII								Signature <i>NS</i> , <i>B. H.</i> (15079)			
	Complainant Signature Case Statu											ase Dispos						. 10. 5. 1		
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	ive /Clea	ared				by Ar	Locatest Locatest Trest by Ander	Refuse ther Ag	gency	ooperate	Page 1		