| I<br>N   | Agenc                               | y Name   |                      | VSTON-SALEN             | ] IN            | INCIDENT/INVESTIGATION             |                                     |              |  |  |     |               | OCA 2422906 |   |                    |                    |   |                        |  |  |
|--|-------------------------------------|----------|----------------------|-------------------------|-----------------|------------------------------------|-------------------------------------|--------------|--|--|-----|---------------|-------------|---|--------------------|--------------------|---|------------------------|--|--|
| C ·  | ORI                                 | NC       |                      |                         |                 | 1                                  | REPORT                              |              |  |  |     |               |             | Date / Time Reported SMTWTFS<br>Month Day Yr Time |                    |                    |   |                        |  |  |
| D<br>E   | NC NC 0340200 Crime Incident(s)     |          |                      |                         |                 |                                    |                                     |              |  | Att At Found SMTWIFS Month Day Yr Time |     |               |             |   |                    |                    | Day   Time   18:39 Hrs.   Last Known Secure   SMTWIFS   SMTWIFS |                        |  |  |
| N<br>T   | #1                                  |          |                      | ,<br>Driving While I    | mpa             | uired                              |                                     | ı —          | Com                                    | Month 06                               | D   |               |             | ime<br>3:39  Hrs                                  |                    |                    |   | Time<br>  18:38  Hrs.  |  |  |
| D.   | #2                                  | Crime I  | ncident              |                         |                 |                                    |                                     |              | $\rightarrow$                          |  |     | Incident      | +   10      | ). ] /  | 7 00               |                    | .7   2024   | Offense Tract          |  |  |
| A  |                                     | 7 T      | : 1                  |                         |                 |                                    |                                     | _            | ☐ Com 399 E Thirtieth St/n Glenn Av, W |  |     |               |             |   | Winste             |                    | alem NC Victim Resid  | 121                    |  |  |
| T<br>A   | #3                                  | Jillie I | ncident              |                         |                 |                                    |                                     |              | Att<br>Com                             | Pieiiise                               | туļ | pe            |             |   |                    |                    |   | ence Type<br>iily      |  |  |
| МО   |                                     |          | d or Com             |                         |                 |                                    |                                     |              |  |  |     |               |             | Forcible Yes                                      | X N/A              | We                 | apon / Tools  | · <del>-</del>         |  |  |
|  |                                     |          |                      |                         |                 |                                    |                                     |              |  |  |     |               |             |   |                    | Machal Haar        |   |                        |  |  |
|  | # of Victims   Type                 |          |                      |                         |                 |                                    |                                     |              |  |  |     |               |             |   |                    |                    |   |                        |  |  |
| V  | 1                                   |          |                      | igious 🔲 L.E. Off       |                 |                                    | ity 🔲 Othe                          | er/Un        | know                                   |  | -   | ternal 🔲      | Unco        | scious [  | Other              |                    | r 🛛 🗖 N   | N/A                    |  |  |
| I<br>C   |                                     | Victim/  | Business             | Name (Last, First,      | Midd            | lle)                               |                                     |              | Victim of Crime #                      |  |     |               |             | 3 / Age   | Race               | Sex                | Relationship<br>To Offender   |                        |  |  |
| T<br>I   | V1                                  |          | DA                   | ΓA OMITTED              |                 |                                    |                                     |              | 1,                                     |  |     |               |             |   | ☐ Non-Residen      |                    |   |                        |  |  |
| М -  | Home Address                        |          |                      |                         |                 |                                    |                                     |              |  |  |     |               |             |   |                    | Home Phone Unknown |   |                        |  |  |
|  | Employer Name/Address DATA OMI      |          |                      |                         |                 |                                    |                                     |              |  |  |     |               |             |   | Business Phone     |                    |   |                        |  |  |
|  | VYR                                 | ake      | Color                |                         |                 |                                    |                                     |              |  | Vin                                    |     |               |             |   |                    |                    |   |                        |  |  |
|  |                                     |          |                      | Model                   |                 | yle                                |                                     |              |  |  |     |               |             |   |                    |                    |   |                        |  |  |
| O<br>T<br>H<br>E<br>R<br>S<br>I<br>N<br>V<br>O<br>L<br>V<br>E<br>D | DATA OMITTED                        |          |                      |                         |                 |                                    |                                     |              |  |  |     |               |             |   |                    |                    |   |                        |  |  |
| Status<br>Codes  | (Chec                               | k "OJ"   | = Stolen<br>column i | R = Recovered for other | D = l<br>r juri | Damaged isdiction)                 | Z = Seized                          | В=           | Burn                                   | ed C=                                  | Cot | ınterfeit / F | orged       | F = Foun  | d                  |                    |   |                        |  |  |
|  | Victim<br># DCI Status Value OJ QTY |          |                      |                         |                 |                                    | Property Description                |              |  |  |     |               |             |   | Mak                | e/Mo               | del S   | erial Number           |  |  |
| -<br>P -<br>R  |                                     |          |                      |                         |                 |                                    |                                     |              |  |  |     |               | D           | ATA OMITTED                                       |                    |                    |   |                        |  |  |
|  |                                     |          |                      |                         | -               |                                    |                                     |              |  |  |     |               |             |   |                    |                    | Ī   | FOR<br>NFORMATION      |  |  |
|  |                                     |          |                      |                         | $\dashv$        |                                    |                                     |              |  |  |     |               |             |   |                    |                    |   | SECURITY               |  |  |
| 0  |                                     |          |                      |                         |                 |                                    |                                     |              |  |  |     |               |             |   |                    |                    |   | PURPOSES               |  |  |
| Р <sup>-</sup><br>Е -  |                                     |          |                      |                         |                 |                                    |                                     |              |  |  |     |               |             |   |                    |                    |   |                        |  |  |
| R.   |                                     |          |                      |                         | _               |                                    |                                     |              |  |  |     |               |             |   |                    |                    |   | NLY THE FIRST          |  |  |
| Т<br>Ү   |                                     |          |                      |                         | _               |                                    |                                     |              |  |  |     |               |             |   |                    |                    | IWE   | LVE PROPERTY ITEMS ARE |  |  |
| -  |                                     |          |                      |                         | $\dashv$        |                                    |                                     |              |  |  |     |               |             |   |                    |                    | I   | DISPLAYED ON           |  |  |
| -  |                                     |          |                      |                         | _               |                                    |                                     |              |  |  |     |               |             |   |                    |                    |   | P2C REPORTS            |  |  |
| -  |                                     |          |                      |                         |                 |                                    |                                     |              |  |  |     |               |             |   |                    |                    |   |                        |  |  |
|  | Numb                                |          | ehicles S            | tolen 0                 |                 | nber Vehi                          | cles Recovere                       |              | 0                                      |  |     |               | -           | Cupomica  | Cionat             | ırc                |   |                        |  |  |
| ID   |                                     |          | <u> A, D. W</u>      | 7. (16005)              | Officer Sig     | Officer Signature Supervisor HILL, |                                     |              |  |  |     |               |             | r Signature <i>P. M.</i> (15817)                  |                    |                    |   |                        |  |  |
|  | Complainant Signature Case State    |          |                      |                         |                 |                                    |                                     |              |  | tion                                   |     | Case Dispos   |             |   | ntad               |                    |   | tradition Darling 1    |  |  |
| Status   |                                     |          |                      |                         |                 |                                    | ☐ Further ☐ Inact ☐ Closed ☐ Closed | ive<br>/Clea | ared                                   |  |     |               | by A        | Test by Ander                                     | Refuse<br>other Ag | gency              | ooperate  | Page 1                 |  |  |