I N	Agenc	y Name		NSTON-SALEN	. IN	NCIDENT/INVESTIGATION						OCA 2422949								
C ·	ORI	NG				02.02	-	REPORT							Date / Time Reported SMTWTFS Month Day Yr Time					
D E	10		NC 034											TH FH CI	06   28   2024  06:03 Hrs.					
N	#1	Jillie I	ncident(s	) Vandalis	ı —	☐ Att   At Found   SMTWTFS   Month Day Yr Time   X Com   06   28   2024   06:03   Hrs							Last Known Secure Nonth Day Yr Time  06   28   2024   06:02   Hrs.							
Т.	#2	Crime I	ncident	vanaans	<i>III</i>				-	06 Location			4   00	):03   Hrs	s} 06			06:02 Hrs. Offense Tract		
D A									Com				Or, W	inston-sa	lem N			124		
T A	π (1												Гуре				Victim Residence Type ☐ Single Family ☐ Multi Family			
МО	How Attacked or Committed											Forcible Yes				Weapon / Tools				
	# of Victims   Type   Person   X Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:															lcohol Use:				
**	1 Society Government Financial Institute Broken Bones Severe Lacerations Religious L.E. Officer Line of Duty Other/Unknown Internal Unconscious Other Major																es Unknown			
V I		Victim/		Name (Last, First,			uty   Otno	er/Un	Know	n   _		ternal   Victim of		scious [	Other Race	<u> </u>		N/A Resident Status		
C T	VI DATA OMITTED														11440	50.1	To Offender	☐ Resident		
I			DA	IA OMITTED								1,						☐ Non-Resident		
М -	Home Address DATA OMIT									ГТЕО						Home Phone				
	Employer Name/Address DATA OM								TTED						Business Phone					
	VYR	M	Model	Color Lic/Lis Vin							Vin									
					<u> </u>															
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I N	DATA OMITTED																			
V	N V O																			
O L																				
V E																				
E D																				
Status																				
Codes	Victim				Ť	Í										Make/Model Serial Number				
	# DCI Status Value OJ QTY 1 31 4						Property Description  WINDOW								Mal	ce/Mc		rial Number TA OMITTED		
- P -			·		_													FOR		
																	IN	FORMATION		
R					_													SECURITY		
O P -					_	+												PURPOSES		
E - R					_												ON	ILY THE FIRST		
Т																	TWEL	VE PROPERTY		
Y																		ITEMS ARE		
-																		SPLAYED ON 2C REPORTS		
-						+											P	2C REFURIS		
	Numb	er of V	ehicles S	tolen 0	Nur	mber Vehi	cles Recovere	d	0											
ID	Office HO		P. M. I.	(16131) ID	Officer Sig	Officer Signature Supervisor Signature JACOBS, A. P. (14962)														
ענ			Signatur		Case Statu							J/1001								
Status	1							Further Investigation Unfounded Lo						rest Loc	cated Extradition Declined Refuse to Cooperate					
Status												Cleared	red by Arrest by Another Agency							