| I N | Agenc | y Nam | | NSTON-SALEN | IN | INCIDENT/INVESTIGATION | | | | | | | OCA 2423103 | | | | | | | |
|---|---|--------------------------------------|------------|---------------|-------------|-------------------------------------|-------------------------------|--|--|---------|------|----------------------------|----------------------------|------------------------------------|------------------------------|---------------------|-----------|--------|------------------------|----------|
| C I | ORI | | | | | | - | REPORT | | | | | | | Date / Time Reported SMTWTFS | | | | | |
| D E | | | NC 034 | | | | | | | | | | 06 29 2024 06:29 Hr | | | | | lrs. | | |
| N | #1 | #1 Crime Incident(s) Found Property | | | | | | Att At Found S M T W T F S | | | | | | | | Month Day Yr Time | | | | • |
| T | #2 | Crime I | ncident | Touna Trop | reriy | <u>'</u> | | - | 00 20 2024 00.20 100 20 2024 | | | | | | | | | | Ob:28 Fract | irs. |
| D A | ☐ Com 401 E Sprague St, Winston-salem N | | | | | | | | | | | | | | | | | | 311 | |
| T A | #3 | Crime I | ncident | | | | | | Att Com | Premise | e Ty | pe | | | | | Victim Re | | ce Type y ∏Multi Fa | mily |
| 110 | How A | Attacke | d or Com | nmitted | | | | | Forcible | | | | | Forcible | Weapon / Tools | | | | | |
| МО | DATA OMITTED See St. No. | | | | | | | | | | | | | | | | | | | |
| | # of Victims Type | | | | | | | | | | | | | | | | | | | |
| V | Religious L.E. Officer Line of Duty Other/Unknown Internal Unconscious Other Major No N/A | | | | | | | | | | | | | | | WII | | | | |
| I C | Victim/Business Name (Last, First, Middle) Victim of DOB / Age | | | | | | | | | | | | | | Race | Sex | Relation | ship | Resident Sta | |
| T | V1 | | DA | ΓΑ OMITTED | | | | | | | | Crime # | | | | | To Offer | ider | ☐ Resident ☐ Non-Res | |
| I M | Home | · Addre | •66 | | | | | | | | | | | | | Home Phone | | | | <u>n</u> |
| | DATA OMI | | | | | | | | ГТЕD | | | | | | | | | | | |
| | Emplo | oyer Na | ame/Addi | ATA OMI | ΓA OMITTED | | | | | | | Business Phone | | | | | | | | |
| · | VYR | M | ake | Model | Sty | yle | Color | | Lic | :/Lis | | | | Vin | | | | | | |
| T H E R S I N V O L V E D | DATA OMITTED | | | | | | | | | | | | | | | | | | | |
| Status Codes | | | | | | | | | | | | | | | | | | | | |
| Cours | Victim | | | | | Property Description | | | | | | | Mal | Make/Model Serial Number | | | | | | |
| | # DCI Status Value OJ QTY 75 FOUN 1 CI | | | | | | CELLPHONE | | | | | | | | | OROLLA DATA OMITTED | | | | ED |
| P - R - O | | | | | | | | | | | | | | | | | | | FOR | |
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| Ρ. | | | | | \dashv | | | | | | | | | | | | | | 014 0525 | - |
| E · R | | | | | | | | | | | | | | | | | | ON | LY THE FIR | ST |
| T Y | | | | | | | | | | | | | | | | | TV | | /E PROPER | |
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| - | | | | | \dashv | | | | | | | | | | | | | | - ILLI OICI | _ |
| | Numb | er of V | ehicles S | tolen 0 | Nun | nber Vehi | cles Recovere | d | 0 | | | | | | | | | | | _ |
| ID | Office CR(| | $D F \ell$ | ID (16110) | Officer Sig | Officer Signature Supervisor Signat | | | | | | | | | 5710) | | | \neg | | |
| ID | | | Signature | | | Case Status | Case Status Case Disposition: | | | | | | LLACI | <u>LEACH, J. M. (15710)</u> | | | | | | |
| Status | * | | - | | | | ☐ Further ☐ Inact ☐ Closed | tive l/Clea | ared | | | ☐ Unfour☐ Cleared☐ Cleared | ided I by Ai I by Ai | Loc rrest [rrest by Ander [| Refuse other Ag | gency | Cooperate | _ | Page 1 | ned |