I N	Agency Name WINSTON-SALEM POLICE	INCIDENT/INVESTIGATION	OCA 2423355
C	ORI	REPORT	Date / Time Reported SMTWTFS Month Day Yr Time
D E	NC NC 0340200  Crime Incident(s)		07   01   2024  11:51 Hrs.
N	#1 Automobile Theft	☐ Att   At Found	Month Day Yr Time
T	#2 Crime Incident	X Com   07   01   2024   11:51   Hrs     Att   Location of Incident	5 06 30 2024 00:00 Hrs. Offense Tract
D A	#4	☐ Com 100 Capitol Lodging Ct, Winste	
T A	#3 Crime Incident	Att Premise Type	Victim Residence Type
	How Attacked or Committed	☐ Com Forcible	☐ Single Family ☐ Multi Family  Weapon / Tools
MO	DATA OMITTED	☐ Yes	
V I C	# of Victims   Type     Person   Business	1	Loss of Teeth Drug/Alcohol Use:
	, Society Government Fin	nancial Institute Broken Bones Severe	Lacerations
	I ☐ Religious ☐ L.E. Officer Line of Dut Victim/Business Name (Last, First, Middle)	y Other/Unknown Internal Unconscious Victim of DOB / Age	Other Major No N/A  Race Sex Relationship Resident Status
	\$71	Crime # 33	To Offender Resident
T I	DATA OMITTED	1,	$W \mid F \mid 1AQ \mid \square$ Non-Resident Unknown
М -	Home Address	ATA OMITTED	Home Phone
	F 1 N /A 11		Business Phone
	DA	ATA OMITTED	business Filone
·	VYR   Make   Model   Style   4S   VENUE SEL   4S	$\begin{array}{c cccc} { m Color} & { m Lic/Lis} & { m Vin} \\ { m } {\it GRY} & {\it KMF8210, NC} & {\it KMF} \end{array}$	HRC8A35MU076183
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О			
T			
H E			
R S			
5	DATA OMITTED		
I	DATA OMITTED		
N V			
Ó			
L V			
E D			
Status	L = Lost S = Stolen R = Recovered D = Damaged	Z = Seized  B = Burned  C = Counterfeit / Forged  F = Foun	nd.
Codes	(Check "OJ" column if recovered for other jurisdiction)	2 Sound 2 Sunda C Counterfelt, Forgon 1 Form	
- - P - R - O	Victim # DCI Status Value OJ QTY	Property Description	Make/Model Serial Number
		RUGS/NARCOTICS EQUIPMENT	DATA OMITTED
		AND TRUCK D21 GRY, KMF8210 NC	FOR  HYUN Venue Sel INFORMATION
			HYUN Venue Sel SECURITY
			PURPOSES
Р <sup>-</sup> Е -			
R T Y			ONLY THE FIRST TWELVE PROPERTY
			ITEMS ARE
-			DISPLAYED ON
			P2C REPORTS
-	Number of Vehicles Stolen / Number Vehicle	les Recovered 1	
	Officer ID#	Officer Signature Supervisor	
ID	BOYETTE, T. J. (16251)  Complainant Signature		UĞHAN, A. M. (14884)
Status	Complainant Signature	☐ Further Investigation ☐ Unfounded ☐ Loc	eated Extradition Declined
			Refuse to Cooperate other Agency
		☐ Closed/Leads Exhausted ☐ Death of Offender ☐	