I N	Agenc	y Name		VSTON-SALEN	OLICE	IN	INCIDENT/INVESTIGATION							OCA 2423469							
C I	ORI	NC	NC 02	10200				REPORT							Date / Time Reported SMTWTFS Month Day Yr Time						
D E			NC 034					I A# A# Found - I SIM 파데 메디								07 02 2024 09:09 Hrs.					
N T	#1	inne n	nerdent(3	, Disorderly Co	ı —	☐ Att At Found SM								Month Day Yr Time							
	#2	Crime I	ncident	Disorderly Co		\rightarrow	Location	_		1 05	7.09 1118	s 07		12 202		ense Tract	-				
D A	Com 275 Nita Cr, Winston-salem NC 27																		124		
T A	#3	Crime I	ncident					☐ Att Premise Type ☐ Com							Victim Residence Type ☐ Single Family ☐ Multi Family						
МО			d or Com MITTEI										Forcible Yes No	X N/A	We	apon / Too	ls		1		
	# of Victims Type Person Business Injury None Minor Loss of															of Teeth Drug/Alcohol Use:					
	1		IX So	ciety Governm	ent	□ F:	inancial Instit			. –	Bro	oken Bone	es	☐ Severe	Lacera	tions			□Unknown		
V I		Victim/		igious L.E. Off			ity Othe	er/Un	know	n 🗆		ernal			Other	<u> </u>			□N/A esident Status	_	
C T	T/1													o / Age	Race	SCA	To Offeno	ler 🗀	Resident		
I	` 1		DA	ΓA OMITTED			1,										Non-Reside Unknown	nt			
M	Home	Addre		ATA OMI	ITTED								Home Phone								
	F1 N/A 11							A OMITTED A OMITTED							Business Phone					-	
	VYR	M							Vin												
																				-	
O T H E R S I N V O L V E D	DATA OMITTED S L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found																				
Status Codes	(Chec	k "OJ"	= Stolen column	R = Recovered f recovered for other	D = 1 r jur	Damaged isdiction)	Z = Seized	B =	Burn	ed $C = C$	Cour	nterfeit / F	orged	F = Foun	d						
	Victim # DCI Status Value			OJ	QTY		Property Description					Make/Model Serial				Number					
P - R - O														OMITTED	_						
					_														FOR RMATION	-	
					\dashv														CURITY	-	
					\dashv														RPOSES	-	
P : E :																				-	
R - T - Y -																			THE FIRST	_	
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1 .																			EMS ARE	_	
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					\dashv													120	KLI OK IS	-	
-	Numb	er of V	ehicles S	tolen 0	Nur	nber Vehic	cles Recovere	d	0											-	
TD.	Office		Z C 4	(14990) ID		Officer Sig	Officer Signature Supervise								or Signature						
ID			Y, S. A. Signatur	(14880)	Case Status				C	ase Dispos	ition	ROISS	SSEY, S. G. (15475)								
Status	Comp	amall	oignatuf	-											Page 1						