I N	Agenc	e WIM	, IN	INCIDENT/INVESTIGATION							OCA 2424368								
C	ORI	NC	NG 02	40200				REPORT							Date / Time Reported SMIWTFS Month Day Yr Time				
D E	10		NC 034		☐ Att								07 09 2024 15:07 Hrs.						
N	#1	Jime i	neident(s) Discharging F	iraa	ırın		_	Com	Month	Γ						Day Yr	Time	
T	" 0	Crime I	ncident	Discharging F	irea	ırm		_	Att	07 Location	-	9 2024 Incident	4 13	5:07 Hrs	s 07	(09 2024 	Offense Tract	
D A	#2							_	Com	1590	Gr	ay Av, W	insto	n-salem l	NC 27	105		222	
T	#3	Crime I	ncident						Att	Premise	Тур	pe					Victim Resid	• •	
A		1	1 0	*** 1					Com					F 31		_		ily ∏Multi Family	
МО			d or Con MITTEI					Forcible							Weapon / Tools				
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															Alcohol Use:			
3.7	1 Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow Internal Unconscious Other Major															_			
V I		Victim/		Name (Last, First,			uty 🔲 Out	21/ ()1	IKIIOW	11 L		Victim of		3 / Age	Race	<u> </u>			
C T	T/1 Crime #																To Offender	☐ Resident	
I			DA	ΓΑ OMITTED	1,									□ Non-Resident □ Unknown					
M	Home Address DATA OMIT									TTED						Home Phone			
	Employer Name/Address DATA OMI															Business Phone			
,	VYR	Color Lic/Lis Vin							Vin										
				<u> </u>															
О																			
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R S																			
	DATA OMITTED																		
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V																			
E D																			
Status	L = L	ost S	= Stolen	R = Recovered	D = I	Damaged	Z = Seized	B =	Burn	ed C=	Cor	ınterfeit / F	Forged	F = Foun	ıd				
Codes	(Chec	k "OJ"	column	if recovered for other	r juri	isdiction)	E - Scized		Duin				orgeu	- T - T - Gall					
	Victim #	Status		Property Description							Mak	e/Mo	odel S	erial Number					
	13 EVID 2 (9MM) AM														BLAZE.	R	D	ATA OMITTED	
P -		13	EVID		_	4	(9MM) AMMC								A USA		T	FOR NFORMATION	
																	1	SECURITY	
R O																		PURPOSES	
P : E :																			
R																		NLY THE FIRST	
Т Ү.																	TWE	LVE PROPERTY	
					\dashv	-+								+			Γ	ITEMS ARE DISPLAYED ON	
-					\dashv	+								+				P2C REPORTS	
			ehicles S	tolen 0		nber Veh	icles Recovere		0					C	C:				
ID	Office FLA	Officer Sig	natuı	re				_		r Signature OON, J. G. (15435)									
	Complainant Signature Case State									Case Disposition:							THE TO THE		
Status	X Ina									· Investigation ☐ Unfounded ☐ Locat ive ☐ Cleared by Arrest ☐ I						ed Extradition Declined Refuse to Cooperate			
					Closed	Cleared Cleared by Arrest by A						rrest by And	Another Agency Prosecution Declined Page 1						