I N	Agenc	y Name	NSTON-SALEN	IN	NCIDENT/INVESTIGATION						OCA 2424417								
I C	ORI	NC	NC 02	10200				REPORT							Date / Time Reported SMIWTFS Month Day Yr Time				
D E	NC NC 0340200 Crime Incident(s)									Att At Found SMIWIFS Month Day Yr Time						$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
N T	#1			, Trespassi	ng			ı —	Com	Month 07	1]			lime :41 Hrs			Day 2024	Time	
D.	#2	Crime I	ncident	1					Att	Location	on o	f Incident						Offense Tract	
A T		Trima I	ncident					_	☐ Com 1427 W First St, Winston-salen ☐ Att Premise Type						ı NC 2		I Victim Reside	321	
A	#3	Jillie I	neident						Com	Tienns	гту	pe						ily □Multi Family	
МО			d or Com MITTEI								Forcible Yes No	X N/A	We	apon / Tools					
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															Icohol Use:			
3.7	2 Society Government Financial Institute Broken Bones Severe Lacerations Unknown Internal Unconscious Other Major															_			
V I		Victim/		Name (Last, First,			пу 🔲 Опи	21/ () 1	IKHOW	^{/11} [lr	Victim of		S / Age	Race	-			
C T	V1			ΓA OMITTED				Crime #						To Offender					
I M			DA	IA OMITTED					1,						☐ Non-Resident				
141	Home Address DATA OMI'									ГТЕО						Home Phone			
	Employer Name/Address DATA ON								 ITTED							Business Phone			
	VYR	Color Lic/Lis Vin						Vin											
				<u> </u>	<u> </u>														
О																			
T H																			
E R S																			
	DATA OMITTED																		
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V	v																		
O L																			
V E																			
D																			
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column	R = Recovered if recovered for other	D = er jur	Damaged isdiction)	Z = Seized	B =	= Burr	ned C=	- Co	unterfeit / F	orged	F = Foun	d				
	Victim # DCI Status Value OJ QTY							Pro	perty	Descrip	tion				Mak	e/Mo	odel S	erial Number	
- - P -																	D	ATA OMITTED	
																	17	FOR NFORMATION	
					\dashv												- 11	SECURITY	
R O					_													PURPOSES	
Р ⁻ Е -																			
R																		NLY THE FIRST	
T Y					\dashv												TWEI	ITEMS ARE	
					-									-			D	ISPLAYED ON	
-																		P2C REPORTS	
-																			
	Numb		ehicles S	tolen 0		nber Vehi	cles Recovere Officer Sig		o re				Ī	Supervisor	Signati	ıre			
ID	WIT	CHE		(3343)									WELL	LS, S. S. (15941)					
	Complainant Signature Case St									Case Disposition: [Investigation						□ Ext	radition Declined		
Status					Inact	Inactive ☐ Cleared by Arrest ☐ Refuse to Cooperate Closed/Cleared ☐ Cleared by Arrest by Another Agency						ooperate							
							☐ Closed			hausted				nder ⊏				Page 1	