I N	Agenc	y Nam		NSTON-SALE	<u></u> И Р	OLICE	, IN	CIE	CIDENT/INVESTIGATION					OCA 2424554					
C	ORI	NG						REPORT					Date / Time Reported SMTWTFS Month Day Yr Time						
D E	10		NC 034					I — A A4E (Імітіт	ा ना हा वा	07		10 2024	 		
N	#1) Assault-non Ag	aras	rated As	sault		Att Com	At Found Month			TFS Time			Day Yr	Time		
T	#2		ncident	nssuut-non Ag	grai	инеи Аз	Saut		-	07 Location	10 20 of Inciden		9:39 Hrs	s <i>07</i>			19:38 Hrs. Offense Tract		
D A				ia- Possessing/o	conc	cealing I	Equipment		600 N Liberty St, Winston-salem NC 27105 222										
T A	#3 Crime Incident Indecent Exposure									Att Premise Type CX Com					Victim Residence Type ☐ Single Family ☐ Multi Family				
МО			d or Con MITTEI					Forcible Yes					☐ Yes [Weapon / Tools					
	# of Victims Type None N															cohol Use:			
	3		□ So	ciety 🔲 Governm	ent	□F	inancial Instit				Broken Bo	ones	☐ Severe	Lacera	tions	□ Ye	s Unknown		
V I		Viotim		igious L.E. Of Name (Last, First,			uty Oth	er/Un	know	n _	Internal			Other			□N/A Resident Status		
C T	V1	v ictiiii/							Victim (B / Age 26	Race	Sex	To Offender	☐ Resident				
I	1		DA	ΓA OMITTED						1			A	M	1RU	Non-Resident Unknown			
M	Home Address DATA OMIT									 ITED					Home Phone				
	Employer Name/Address DATA OMI													Business Phone					
,	VYR	M	Model	Color Lic/Lis Vin						Vin									
				•			•												
O																			
T H																			
E R																			
S																			
I	DATA OMITTED																		
N																			
V O	V O																		
L V																			
E																			
D																			
G	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 if recovered for oth	D = er ju	Damaged risdiction)	Z = Seized	В=	Burn	ied C=C	ounterfeit	/ Forgeo	F = Foun	d 					
	Victim # DCI Status Value OJ QTY						Property Description							Mal	ce/Mo	odel Se	rial Number		
								PRUGS/NARCOTICS EQUIPMENT								DA	TA OMITTED		
- P - R																IN	FOR FORMATION		
																	SECURITY		
ο .																	PURPOSES		
P :																			
R																	LY THE FIRST		
Y ·																	VE PROPERTY ITEMS ARE		
																	SPLAYED ON		
																P	2C REPORTS		
-	NT .		1.1.0	1 0		1 17.1		1											
	Numb Office		ehicles S	tolen 0		mber Vehi	Officer Sig		e re				Supervisor	Signat	ure				
ID	SLOAN, C. C. (16301)								ČROK							E, B. K. (15602)			
	Complainant Signature Case State									r Investigation Unfounded Located Extradition Decli							adition Declined		
Status										tive Cleared by Arrest					Refuse to Cooperate				
							☐ Closed			hausted			ender \Box				Page 1		