I N	Agenc	y Nam	e WIN	, IN	INCIDENT/INVESTIGATION								OCA 2424986						
C	ORI	NC	NC 034	40200			REPORT								Date / Time Reported SMTWTFS Month Day Yr Time				
D E	10		ncident(s					Att At Found SMTWTFS Month Day Yr Time								Day 17 Time 07 13 2024 21:40 Hrs. Last Known Secure S M T W T F S Month Day Yr Time			
N T	#1			Discharging H	- irec	arm		ı —	Com	Month 07	D			lime :40 Hrs			Day Yr L	Time	
D	#2	Crime I	ncident	0 0					Att	Location	of	Incident						Offense Tract	
A T	Colors Insident														-salem		27107 Victim Reside	213	
A	#3	JIIIIC I	ncident						Com	1 Tellise	тур					- 1		ly □Multi Family	
МО			d or Con MITTEI						•					Forcible Yes	X N/A	We	apon / Tools		
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															lcohol Use:			
**	1 Society Government Financial Institute Broken Bones Severe Lacerations Yes Unit Religious L.E. Officer Line of Duty Other/Unknown Internal Unconscious Other Major															_			
V I		Victim/		Name (Last, First,			uty Otne	er/Un	ıknow	'n 📗 🔲		ternal Victim of		scious [Other Race	<u> </u>		N/A Resident Status	
C T	V1															~	To Offender	☐ Resident	
I M			DA	ΓΑ OMITTED	1,									☐ Non-Resident☐ Unknown					
171	Home	Addre	ess		ATA OMI	TTED								Home Phone					
	Employer Name/Address DATA ON								ITTED							Business Phone			
	VYR	M	Model	Color Lic/Lis Vin							Vin								
0																			
T H																			
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S																			
	DATA OMITTED																		
N	I N V																		
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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	f recovered for other	er jur	isdiction)	Z = Seized	В=	Burn	ied C=C	Cou	interteit / F	orgea	F = Four	ıa				
	Victim #	DCI	Value	Property Description								Mak	e/Mo	del Se	rial Number				
		13	EVID		(9MM) SHELL CASINGS								NORM	4	DA	TA OMITTED			
- P - R						+											IN	FOR FORMATION	
				+														SECURITY	
ο .																		PURPOSES	
Р ⁻ Е -																			
R T																		VE PROPERTY	
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																	F	2C REPORTS	
-		0			Ţ			1											
	Numb Office		ehicles S	tolen 0		nber Vehi	Control of the Contro		0 re				- 1	Supervisor	· Sjønati	ıre			
ID	PAR	KER,		15308)		JAM.							or Signature <i>ERSON</i> , <i>B. M.</i> (15386)						
	Comp	lainant	Signatur	e	Case Statu	1 1						□ Loc	ated		□ Exti	adition Declined			
Status						Inact	☐ Closed/Cleared ☐ Cleared by Arrest ☐ Refuse t☐ Closed/Cleared ☐ Cleared by Arrest by Another Age							e to C	ooperate				
							☐ Closed			hausted				nder – –				Page 1	