I N	Agency Name WINSTON-SALEM POLICE									ICIDENT/INVESTIGATION						OCA 2425176				
I C	ORI	NC	NC 02	10200		1	REPORT							Date / Time Reported S M T W T F S Month Day Yr Time						
D E	NC NC 0340200 Crime Incident(s)									│ ☐ Att │ At Found │ S 丞 T W T F S │ Month Day Yr Time							07 15 2024 11:23 Hrs. Last Known Secure SMTWTFS Month Day Yr Time			
N T	#1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, iking & Enterin	e Wi	ith Forc	e	ı —	Com	Month 07	Da			ime 1:23 Hrs			Day Yr 🖵	Time $17:22$ Hrs.		
D.	#2	Crime I	ncident		3				-	Location			+ 11	23	7 07			Offense Tract		
A	Com 1031 Ivy Av, Winston-salem NC 27																Victim Resider	112		
T A	#3	Jillie I	ncident						Com	Premise	тур	е				- 1		y □Multi Family		
МО			d or Com MITTEI						•					Forcible Yes No	X N/A	We	apon / Tools			
	# of Victims Type Person X Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															cohol Use:				
3.7	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow															_				
V I		Victim/		Name (Last, First,			пту 🔲 Оппе	21/ U11	KIIOW	¹¹		ernal		S / Age	Race			□N/A Resident Status		
C T	Crin																To Offender	☐ Resident		
I M			DA	IA OMITTED								1,						☐ Non-Resident☐ Unknown		
IVI ·	Home Address DATA OMIT									ГТЕО						Home Phone				
•	Employer Name/Address DATA OMI															Business Phone				
	VYR	M	Model	Color Lic/Lis Vin						Vin										
				l																
O																				
T																				
H E																				
R S																				
	DATA OMITTED																			
I N	DATA OMITTED																			
V																				
O L	O I																			
V																				
E D																				
Status																				
Codes	Victim			f recovered for othe	Í										Make/Model Serial Number					
	#	H DCI Status Value OJ QTY Property Description							+	Mak	e/Mo		rial Number TA OMITTED							
P - R -					\dashv													FOR		
																		FORMATION		
																		SECURITY		
O P -					+													PURPOSES		
E - R					\dashv												ON	LY THE FIRST		
Т																	TWEL	VE PROPERTY		
Y																		ITEMS ARE		
-					\dashv													SPLAYED ON		
-					+												P	2C REPORTS		
-	Numb	er of V	ehicles S	tolen 0	Nun	nber Vehic	cles Recovere	d	0					ĺ						
ID	Office:	r .F. C	R (140	ID 995)	Officer Sig	Officer Signature Supervisor Signature WAGONER K B (15655)														
ID	HELF, C. R. (14995) Complainant Signature Case State									WAGONER, K. B. (15655) Case Disposition:										
Status	•			☐ Further		Investigation Unfounded Located Extradition							adition Declined							
Status						Closed	☐ Closed/Cleared ☐ Cleared by Arrest						rest by And	t by Another Agency Prosecution Declined Page 1						