I N	Agenc	y Name		VSTON-SALEN	IN	INCIDENT/INVESTIGATION							OCA 2425290						
C ·	ORI	NC				1	REPORT							Date / Time Reported S M W T F S Month Day Yr Time					
D E		NC .	10200		☐ Att At Found SMIWIFS Month Day Yr Time							$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$							
N T	#1			, Trespassi	ng			_	Com	Month 07	Γ			lime 1:56  Hrs				Time   13:00  Hrs.	
D.	#2	Crime I	ncident						- 1	Location	n of	Incident						Offense Tract	
A T	Crime Incident Com 5410 Woodcliff Dr, Winston-sa															Victim Residence Type   124			
A	#3	orinic I	nerdent						Com	Tremise	1 91	ρC						ily ∏Multi Family	
МО			d or Com											Forcible Yes	X N/A	We	apon / Tools		
																lackel Hay			
	# of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:    Society   Government   Financial Institute   Broken Bones   Severe Lacerations   Yes   Unknown																		
V	2			igious 🔲 L.E. Off			ity 🔲 Othe	er/Un	know	n _				nscious	Other	Majo	r 🛛 🖂 N	0 □N/A	
I C		Victim/	Business	Name (Last, First,	Victim of Crime #					DOI	3 / Age 71	Race	Sex	Relationship To Offender					
T I	V1 DATA OMITTED											1,			$\mid B \mid$	M	1NE	□ Non-Residen □ Unknown	
М -	Home Address DATA OMI									TTED						Home Phone			
	Employer Name/Address DATA ON														Business Phone				
	VYR							Vin	Zin										
			ake	Model	Sty	,													
O T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes	(Chec	k "OJ"	= Stolen column i	R = Recovered frecovered for other	D = I r juri	Damaged sdiction)	Z = Seized	B =	Burn	ed C=	Cou	ınterfeit / F	Forged	F = Found	i 				
	Victim # DCI Status Value OJ QTY						Property Description								Mak	ce/Mo		erial Number	
- - P - R													D.	ATA OMITTED FOR					
					+												I	NFORMATION	
					$\dashv$													SECURITY	
O P -																		PURPOSES	
Ē -					_												0	NLY THE FIRST	
R T					+													LVE PROPERTY	
Y					$\dashv$													ITEMS ARE	
																	Г	DISPLAYED ON	
																		P2C REPORTS	
-	Numb	or of W	ehicles S	tolen 0	Nive	abar Vak	cles Recovere	d	0										
	Office		emeies S	tolen 0		iber veni	Officer Sig		e e					Supervisor	Signat	ure			
ID	BOI		CLAI							EK, D. C. (15090)									
Status	Compl	lainant	Signatur	e			Case Status  Further  Inact  Closed	r Inve tive /Clea	ıred				ded by Ai by Ai	Loca	Refuse ther Ag	gency	ooperate Г	radition Declined Page 1	