I N	Agenc	y Name		NSTON-SALEN] IN	INCIDENT/INVESTIGATION							OCA 2425391					
C ·	ORI	NC	NC 034				1	REPORT							Date / Time Reported SMIWTFS Month Day Yr Time			
D E		Crime I			☐ Att							07 16 2024 17:49 Hrs. Last Known Secure SMTWTFS Month Day Yr Time						
N T	#1			, Trespassi	ng			ı —	Com	Month 07	Ι			Time 7:00 Hrs			Day Yr 15 2024	Time
D.	#2	Crime I	ncident		-				Att	Locatio	n of	Incident		•			•	Offense Tract
A T	Crime Incident Com 631 Cloister Dr, Winston-salem																7 Victim Resid	313
A	#3	Jiiiie i	neident						Com	1 Telliise	1 y]	pe				- 1		nily ∏Multi Family
МО			d or Com						•					Forcible Yes	N/A	We	apon / Tools	
																A 11 - 1 TT		
	# of Victims Type Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use: Property Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown																	
V	2		☐ Rel	igious 🔲 L.E. Off	icer I	Line of Du			know		_		Unco	nscious _	Other	Majo	r 🔯 l	lo □N/A
I C		Victim/	Business	Name (Last, First,	Victim of Crime #					DOI	3 / Age 65	Race	Sex	Relationshi To Offende				
T I	V1		DA	ΓA OMITTED					1,		05	$\mid_{B}\mid$	$_{F}$	1RU	☐ Non-Resident			
М -	Home Address DATA OMI																ne Phone	Unknown
	F1														Business Phone			
	VYR	I M	ake	Model	ATA OMITTED Color Lic/Lis Vin							Vin	Business I none					
	VIK	IVI	ake	Wiodei	Sty	yie	Color		Lic	/Lis				VIII				
O T H E R S I N V O L V E D	DATA OMITTED																	
Status Codes	(Chec	k "OJ"	= Stolen column	R = Recovered if recovered for other	D = I r juri	Damaged sdiction)	Z = Seized	B =	Burn	ed C=	Coı	unterfeit / F	Forged	F = Found	d			
	Victim # DCI Status Value OJ QTY						Property Description								Mak	ce/Mo	del	Serial Number
- - P - R														ATA OMITTED				
					+													FOR NFORMATION
					+													SECURITY
O P -																		PURPOSES
Ē -					_													NI V THE EIDST
R T					+													NLY THE FIRST LVE PROPERTY
Y					+												1111	ITEMS ARE
																		DISPLAYED ON
-																		P2C REPORTS
-	NT .	637	-1-: 1 ~	4-1	N	-h 37 1 '	-1 D		0									
	Numb		ehicles S	tolen 0		nber Vehic	cles Recovere Officer Sig		e e				ı	Supervisor	Signati	ure		
ID	ALL	EN, S	. E. (15	310)										pervisor Signature MCKAUGHAN, A. M. (14884)				
	Comp	lainant	Signatur	e	Case Status	Case Status Case Disposition: ☐ Further Investigation ☐ Unfounded ☐ Lo							ated		□ E	tradition Declined		
Status							☐ Inact	ive /Clea	ared			Cleared	by A	rrest Dece	Refuse ther Ag	gency	ooperate	Page 1