I N	Agenc	y Name		VSTON-SALEN	CIDENT/INVESTIGATION						OCA 2425973								
C	ORI	NG			02102	1	REPORT						Date / Time Reported S M T W T F S Month Day Yr Time						
D E	10		NC 034					☐ Att At Found ≦ M T W						TES	07	7 21 2024 17:44 Hrs			
N T	#1			, Assault-non Agg	_	Com	Month 07	D			T F S Time 7:44 Hrs			Day Yr	Time $17:43$ Hrs.				
D D	#2		ncident	15541111 11011 1188			\rightarrow	Location			f 1/	.44 111.5	1 07			Offense Tract			
A	Com 4942 University Pw, Winston-sal																	123	
T A	#3	rime I	ncident						Att Com	Premise	Тур	e				- 1	Victim Reside Single Fami	nce Type ly	
МО			d or Con						Forcible Yes						Weapon / Tools				
МО	DATA OMITTED See No																		
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																		
V	1			ciety Governmigious L.E. Off					know		•			Severe	Lacerat Other	tions Majo		es □Unknown □ □N/A	
I C	Victim/Business Name (Last, First, Middle)											Victim of Crime #	DOE	3 / Age	Race	Sex	Relationship To Offender	Resident Status	
T I	V1		DA	ΓA OMITTED				`	<i>1</i> ,		26	$\mid W \mid$	M	1RU	☐ Non-Resident				
M	Home	Addre	ss						1,			"		ne Phone	Unknown				
	DATA OMIT									ΓΤΕD									
	Employer Name/Address DATA OMI									TTED						Business Phone			
,	VYR	M	ake	Model	Sty	yle	Color		Lic	c/Lis				Vin					
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 for other	D = I r juri	Damaged sdiction)	Z = Seized	B =	Burn	C = 0	Cou	nterfeit / F	orged	F = Found	i				
	Victim # DCI Status Value OJ QTY						Property Description							Mak	e/Mo		erial Number		
- - P - R													DA	ATA OMITTED FOR					
					_												IN	FORMATION	
																		SECURITY	
O .																		PURPOSES	
E ·					_												ON	NLY THE FIRST	
R T					\dashv													VE PROPERTY	
Υ .																		ITEMS ARE	
																	D	ISPLAYED ON	
																	I	2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Nun	nber Vehic	cles Recovere	d	0										
	Officer ID# Officer Signature Supervisor Signature																		
ID			<i>C, B. D</i> Signatur	<u>. (15979)</u>		Case Status	2			C	ase Dispos	ition	ĀRNDī	, V. A	1. (1.	5514)			
Status	Comp	iamalli	Signatur	-			☐ Further ☐ Inact ☐ Closed	Inve ive /Clea	ared]	☐ Unfoun ☐ Cleared ☐ Cleared	ded by Aı by Aı	Locarrest □	Refuse ther Ag	gency	ooperate	Page 1	