I N	Agenc	y Name		NSTON-SALEN	CIE	CIDENT/INVESTIGATION						OCA 2426167							
C ·	ORI				1	REPORT						Date / Time Reported SMIWTFS Month Day Yr Time							
D E	17		NC 034				I	A 4 E		I cl w	al 구민 ta	TH FH CI	07		23 2024				
N	#1) fail To Return I	☐ Att At Found SM							Last Known Secure SMIWTFS Month Day Yr Time							
Т.	#2		ncident	jan 10 Ketaru 1	хен	шттор	ену	_	Att	07 Location	_		4 10):33 Hrs	s} <i>07</i>			10:52 Hrs. Offense Tract	
D A	☐ Com 1000 Hanes Mall Bv, Winston-salem																	323	
T A	#3	Crime I	ncident				Att Com	Premise '	Тур	e				- 1	Victim Reside	nce Type ily ∏Multi Family			
	How A	Attacke	d or Con	nmitted			com					Forcible		_	apon / Tools	, <u> </u>			
МО	D.	ATA O	MITTEL)										☐ Yes ☐ No	X N/A	A			
	# of Victims Type																		
V	1			igious 🔲 L.E. Off					ıknow	. –		oken Bone ternal 🔲		Severe	Lacera Other		. –	es □Unknown □ □N/A	
I C	Victim/Business Name (Last, First, Middle) Victim of DOB / Age Ra														Race	Sex	Relationship	Resident Status	
T	V1		DA	ΓΑ OMITTED				'	Crime #					To Offender	□ Resident □ Non-Resident				
I M ·	Нот	Addra	100			1,							Цог	na Dhana	Unknown				
	Home Address DATA OMIT									ГТЕD						Home Phone			
	Employer Name/Address DATA OMI								ΓΤΕD						Business Phone				
	VYR	M	ake	Model	St	yle	Color		Lie	c/Lis				Vin					
					<u> </u>		l		<u> </u>										
О																			
T H																			
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Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column	R = Recovered	D = l er juri	Damaged isdiction)	Z = Seized	B =	Burn	C = 0	Cou	interfeit / F	Forged	F = Four	ıd				
	Victim #	DCI	Status	Value		Property Description							Mak	Iake/Model Serial Number					
	"							E BOOM LIFT							JLG/T3			ATA OMITTED	
P -																	73	FOR	
					\dashv												11	NFORMATION SECURITY	
R O					\dashv													PURPOSES	
Р ⁻ Е -																			
R																		NLY THE FIRST	
Т Ү -					_												TWEI	ITEMS ARE	
-					\dashv												D	ISPLAYED ON	
-																		P2C REPORTS	
-					\Box		-	_											
	Numb Office		ehicles S	tolen 0		nber Vehi	Officer Sig		0 re				1	Supervisor	Signati	ıre			
ID	DAWKINS, C. J. (15385)								COX							Sof Signature (, M. A. (14920)			
	Complainant Signature Case State									tion	[ase Dispos	ded	□ Loc	ated		☐ Ext	radition Declined	
Status					tive	ive Cleared by Arrest [Cleared by Arrest by Ar						Refuse to Cooperate							
							☐ Closed			hausted				nder 🗆				Page 1	