I N	Agenc		NSTON-SALEN	CIDENT/INVESTIGATION						OCA 2429512									
C I	ORI	NC					1	REPORT						Date / Time Reported SMTWTFS Month Day Yr Time					
D E	10		NC 034		Att At Found SMTWTFS Month Day Yr Time							TF-S	Month Day YF Time 08 10 2024 22:44 Hrs. Last Known Secure S M T W T F S Month Day Yr Time						
N T	#1	71111C 11	reraem(s	, Trespassi	ng			ı —	Com	Month 08	Ι			ime 2:44 Hrs			Day Yr 1	Time	
D	#2	Crime I	ncident					_	Att			Incident	† <u>4</u> 2		7 00		10 2024	Offense Tract	
Α		7 T		tion Of City/cou	nty	Ordinan	ce	_	Com 1344 Winston Park Dr, Winston Att Premise Type						n-sale	salem NC 27105 224 Victim Residence Type			
T A	#3	Jime I	ncident						Com	Premise	ıyı	pe				- 1		ily ∏Multi Family	
МО			d or Com											Forcible					
MO	DATA OMITTED																		
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																		
V	1			ciety Governm ligious L.E. Of			inancial Institution Instituti		ıknow		_	roken Bone nternal 🔲		☐ Severe	Lacera Other		. –	es □Unknown o □N/A	
I C	1	Victim/	Business	Name (Last, First,	Mido	dle)					_	Victim of		3 / Age	Race	Sex	Relationship To Offender	Resident Status	
T I	V1		DA	ΓΑ OMITTED					Crime #					10 Offender	Non-Resident				
M	Home	cc						1,2				Hor	ne Phone	Unknown					
	DATA OMI									ΓΤΕD						Tronic Thone			
	Employer Name/Address DATA OMI									TTED					Business Phone				
	VYR	M	ake	Model	St	yle	Color		Lie	c/Lis				Vin					
				1															
О																			
T H																			
E																			
R S																			
							DATA	(M	ITTI	ET)							
I N	DATA OMITTED																		
V O	V O																		
L V																			
E																			
D																			
G	S L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found																		
Status Codes	(Chec	k "OJ"	= Stolen column i	R = Recovered if recovered for other	D = er jur	risdiction)	Z = Seized	В=	Burn	ied C=	Cot	unterfeit / F	orged	F = Four	ıd				
	Victim # DCI Status Value OJ QTY						Property Description							Mak	ce/Mc	odel S	erial Number		
- P - R													D.	ATA OMITTED FOR					
																	I	NFORMATION	
																		SECURITY	
O P																		PURPOSES	
E ·																	0	NLY THE FIRST	
T																	TWE	LVE PROPERTY	
Y																		ITEMS ARE	
-				+														P2C REPORTS	
-																	-	LECKETOKIS	
			ehicles S	-		mber Vehi	cles Recovere		0										
ID	Officer ID# Office GRABS, D. M. (16310)								cer Signature Supervisor Signature ALLEN, W. A. (15)								5431)		
	Complainant Signature Case Statu									Case Disposition:							modition D = 1' 1		
Status	i Ina									ve Cleared by Arrest Refuse to Cooperate							radition Declined		
						☐ Closed			hausted				rest by Ander	other Ag	gency	' г	Page 1		