I N	Agenc	y Name		STON-SALEN	IN	INCIDENT/INVESTIGATION							OCA 2429645						
C .	ORI	NC						REPORT								Date / Time Reported SMIWTFS Month Day Yr Time			
D E			NC 034			Att At Found SMIWIFS Month Day Yr Time							TFS	08 20 2024 03:21 Hrs. Last Known Secure SMIWIFS					
N T	#1	annie n	ieraem(s	, Trespassi	ng				Com	Month 08	D			ime 3:21 Hrs			Day Yr 🖰	Time $03:20$ Hrs.	
D.	#2	Crime I	ncident						_	Location	of	Incident						Offense Tract	
A	Crime Incident Com 368 Woodland Av, Winston-salem N																	221	
T A	#3	Jillie 1	ncident						☐ Att Premise Type ☐ Com							Victim Residence Type ☐ Single Family ☐ Multi Family			
МО			d or Com MITTEI		•	•					Forcible Yes No	X N/A	We	apon / Tools					
	# of Victims Type Person X Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															lcohol Use:			
* 7	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow															_			
V I		Victim/		Name (Last, First,			пу 🔲 Опи	21/ U11	KIIOW	11 _		Victim of		S / Age	Race				
C T	V1 DATA OMITTED																To Offender	☐ Resident	
I M			DA	IA OMITTED								1,						Non-Resident □ Unknown	
IVI ·	Home Address DATA OM									TTED						Home Phone			
•	Employer Name/Address DATA								OMITTED							Business Phone			
	VYR	M	Model	Color Lic/Lis Vin						Vin									
				1					<u> </u>										
О																			
T																			
H E																			
R S	R S																		
	DATA OMITTED																		
I N	DATA UMITTED																		
V	v V																		
O L																			
V E																			
D																			
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen	R = Recovered	D =	Damaged isdiction)	Z = Seized	B =	Burn	ed $C = C$	Cou	interfeit / F	orged	F = Foun	d				
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo	odel Se	erial Number	
•	#	" Troporty Bestription								17141	.0,1,10		ATA OMITTED						
- P -																		FOR	
																	IN	SECURITY	
R O																		PURPOSES	
Р -																			
E - R _																		ILY THE FIRST	
Т Ү -																	TWEL	VE PROPERTY	
1																	D	ITEMS ARE ISPLAYED ON	
-																		22C REPORTS	
_																			
			ehicles S	-		mber Vehi	cles Recovere		0				ı	Cunamia	Cianat	180			
ID	Office: GRA		D. M. (1	(6310) ID	Officer Sig									or Signature KE, B. K. (15602)					
	Comp	lainant	e	Case Statu	s Case Disposition:							ated		□ Evt	radition Declined				
Status							Inact							ooperate	addition Decimed				
							☐ Closed			nausted				rest by Ander				Page 1	