I N	Agenc	y Name		NSTON-SALEN	IN	INCIDENT/INVESTIGATION							OCA 2431189							
I C																e/Time Reported SMTWTFS onth Day Yr Time				
D E		Crime I			SI	T F S	08 31 2024 21:17 Hrs Last Known Secure S M T W T F & Month Day Yr Time													
N T	#1		`	Discharging F	arm		ı —	Att Com	At Four Month 08	I			T F <u>\$</u> Time !:17 Hrs				7r — 0241	Time 21:17	Hrs.	
D .	#2 Crime Incident																		Offense Tra	
A T		'rime I	ncident						Com				Acade	emy St, W	inston	n-salem NC 312 Victim Residence Type				
A	#3	Jiiiic i	nerdent					☐ Att Premise Type ☐ Com							☐ Single Family ☐ Multi Family					
МО			d or Con MITTEI					•					Forcible Yes	X N/A	We	apon / To	ools			
	No No															\dashv				
																iown				
V I		liotim/		-			uty 🔲 Othe	er/Un	ıknow	'n 🗆] In	nternal			Other Race	<u> </u>		No No	□N/A Resident S	Stotuc
C T	T/1														Race	sex	To Offe	nder	☐ Resider	nt
I	11		DA	ΓA OMITTED								1							□ Non-Re	
М -	Home Address DATA OMIT									 FTED						Home Phone				
•	Employer Name/Address DATA (OMITTED							Business Phone				
	VYR	Color Lic/Lis Vin						Vin												
T H E R S I N V O L V E D	DATA OMITTED																			
Status Codes																				
	Victim # DCI Status Value OJ QTY						Property Description								Mak	ake/Model Serial Number				r
	"	The Control of the Co												DA	ГА ОМІТТ	ED				
- P - R																		INI	FOR FORMATION	ON
																			SECURITY	
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Р ⁻ Е -																				
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Y -																	1		ITEMS AR	
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_																		P2	C REPOR	TS
-					\Box															
	Number of Vehicles Stolen 0 Number Vehicles Recovered 0 Officer ID# Officer Signature Supervisor Signature													-						
ID	SISS	ON, I	M. L. (1	4825)		ŠOJK							or Signature (A, D. A. (15535)							
										Case Disposition: nvestigation Unfounded Located								Extra	dition Dec	lined
Status							☐ Closed	/Clea		hausted			l by Aı	rrest rrest by And	other Ag	gency			Page 1	