I N	Agenc	y Name		STON-SALEN	] IN	INCIDENT/INVESTIGATION							OCA 2431365						
I C	ORI	NC				REPORT							Date / Time Reported SMTWTFS Month Day Yr Time						
D E			NC 034			Att At Found SMTWTFS Month Day Yr Time							$\begin{array}{c ccccccccccccccccccccccccccccccccccc$						
N T	#1			, Trespassi	ng					Month 09	Da			ime 0:06  Hrs				Time !   10:05  Hrs.	
D.	#2	Crime I	ncident							Location	of l	Incident		•			•	Offense Tract	
A T		'rime I	ncident					Com 607 Peters Creek Pw, Winston-s Att Premise Type						salem	wm NC 27103 311 Victim Residence Type				
A	#3	Jime i	nerdent						Com	Tremise	1 y P					- 1		nily □Multi Family	
МО			d or Com MITTEE					·					Forcible Yes	X N/A	We	apon / Tools	;		
	# of Victims   Type   Person   No   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:															Alcohol Use:			
	2 Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow																		
V I		Victim/					ity   Othe	er/Un	know	n 🗆	_	ernal   Victim of			Other Race				
C T	V1 Crime #													) / Age	Race	ЗСХ	To Offende	Resident	
I	, ]		DA	ΓA OMITTED	1,									☐ Non-Resident ☐ Unknown					
М -	Home Address DATA OMI									TTED						Home Phone			
	Employer Name/Address DATA							TA OMITTED								Business Phone			
•	VYR	M	Model	Color Lic/Lis Vin						Vin									
O T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen	R = Recovered f recovered for other	D = E	Damaged sdiction)	Z = Seized	B =	Burn	ed $C = C$	Cou	nterfeit / F	orged	F = Foun	d				
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo	odel	Serial Number	
- - P -	π	" Topony Bescription									11141	.0, 1,10		OATA OMITTED					
					_													FOR INFORMATION	
					+													SECURITY	
R O																		PURPOSES	
Р <sup>-</sup> Е -																			
R					_													NLY THE FIRST	
T Y					+												IWE	ITEMS ARE	
					+													DISPLAYED ON	
-																		P2C REPORTS	
_																			
	Numb		ehicles S	tolen 0		ber Vehic	cles Recovere		0				- 1	Supervisor	Signat	ıre			
ID			15709)		Officer Sig	Officer Signature Supervise SHEE								or Signature <i>TS</i> , <i>J. A.</i> (15336)					
	Comp	lainant	Signatur	e	Case Status	tus Case Disposition:							ntad			stradition Daslins			
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	tive /Clea	red		]	☐ Cleared ☐ Cleared	by Ar	Test by Ander	Refuse other Ag	gency	ooperate	Page 1	