							_									
I N	Agency Name WINSTON-SALEM POLICE							INCIDENT/INVESTIGATION					OCA 2432017			
C · I	ORI						REPORT						Date / Time Reported S M T W T F S Month Day Yr Time			
D		NC NC 0340200						<u> </u>					09 07 2024 13:21 Hrs.			
E N	#1	Crime I	ncident(s					Att	At Foun Month	d SM Day Yr	TWTF-S Time	Last Mon	Known S th Day	ecure Yr	SMTWTF _S Time	
T.		$\begin{array}{c c c c c c c c c c c c c c c c c c c $											07	2024	13:21 Hrs. Offense Tract	
D	#2		nendent					☐ Att ☐ Com			llage Cr, W	inston-s	alem N	c	314	
A T	#3	#3 Crime Incident													ence Type	
A								Com						-	ily □ Multi Family	
МО	How Attacked or Committed DATA OMITTED											Forcible Weapon / Tools Yes X N/A No				
17	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															
	1			ciety 🔲 Governi ligious 🔲 L.E. O			Financial Institu			Broken Bone	1 1 50 10	ere Lacera	tions		es Unknown	
V I		Victim/		Name (Last, First						Internal Victim of	DOB / Age	Other Race		lationship		
C T	V1					,				Crime #				Offender	Resident	
Ι			DA	ΓΑ OMITTED						1,					□ Non-Residen	
M·	Home Address DATA OMITTED												Home Phone			
	Employer Name/Address DATA OMITTED												Business Phone			
	VYR	I M	ake	Model		tyle	Color	Lic/Lis Vin								
	, IK		une	Model		.tyle					V III					
H E S I N V O L V E D		DATA OMITTED														
Status Codes	L = L	ost S	= Stolen	R = Recovered	D =	Damaged	Z = Seized	B = Burr	ned $C = 0$	Counterfeit / F	orged F = Fo	und				
Coues	Victin	1				Ĺ										
	#1							Property Description LOTHES/FURS					e/Model		erial Number ATA OMITTED	
-	1													FOR		
D														Ι	NFORMATION	
Р - R															SECURITY	
O P															PURPOSES	
F E -																
R. T.															NLY THE FIRST	
Y ·														I WL	ITEMS ARE	
-														Γ	DISPLAYED ON	
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			ehicles S	-		mber Vehi	icles Recovere	-								
ID										Supervis	sor Signat	ure				
Status												tradition Declined				
									hausted			Prose		clined	Page 1	