I N	Agenc	y Name		VSTON-SALEN	1 P	OLICE] IN	CIDENT/INVESTIGATION					OCA 2433110						
C ·	ORI	NG				1	REPORT					Date / Time Reported SMTWTFS Month Day Yr Time							
D E	NC NC 0340200 Crime Incident(s)									Att At Found SMTWTFS Month Day Yr Time						Day 17 Time 2024 22:43 Hrs.			
N T	ша									Month 09			Time 2:43 Hrs			oay Yr ⊆ 15 2024	Time		
D.	#2		ncident		,				Com Att	- /	of Inciden		2.43	7 09			Offense Tract		
A	Com 3637 Old Vineyard Rd, Winston																324		
T A	#3	Jillie I	ncident					☐ Att Premise Type ☐ Com						Victim Residence Type ☐ Single Family ☐ Multi Family					
МО			d or Com MITTEE						•				Forcible Yes No	X N/A	We	apon / Tools			
	# of V	ictims	Type	▼ Person	ΠВ	Business				Injury	☐ Nor	ie [X]		Loss	of Tee	th Drug/Al	cohol Use:		
* 7	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown															_			
V I																-	□N/A Resident Status		
C T	V1		DAT	ΓA OMITTED							Crime #		37			To Offender	Resident Non-Resident		
I M ·				TA OMITTED					1,			W	F	IAQ	Unknown				
111	Home Address DATA OMIT									ГТЕО					Home Phone				
•	Employer Name/Address DATA OMI								 FTED					Business Phone					
•	VYR	M	Model	Color Lic/Lis Vin						Vin									
O T H E R S I N V O L		DATA OMITTED																	
V E D	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	f recovered for othe	D = I r juri	sdiction)	Z = Seized	В=	Burn	ed C=C	Counterfeit	/ Forge	F = Foun	d					
	Victim # DCI Status Value OJ QTY					QTY	Property Description							Mal	ce/Mo	odel Se	rial Number		
- - P - R					_											DA	TA OMITTED FOR		
					+											IN	FORMATION		
					\dashv												SECURITY		
O P -																	PURPOSES		
Ē -					_											ON	LY THE FIRST		
R T					+												VE PROPERTY		
Y ·					+												ITEMS ARE		
-																DI	SPLAYED ON		
																P	2C REPORTS		
-	Num¹-	or of M	ehicles S	tolon 0	Nive	hor Vak	cles Recovere	d	0										
	Office	r		ID		iber venic	Officer Sig		e e				Supervisor	Signat	ure				
ID	RIC	E, J. I	(1593	33)					-	G 5:	\$OME	ERVILLE, T. J. (16036)							
Status	Compl	iainant	Signatur	e			Case Statu: Further Inact Closed	· Inve ive /Clea	ıred			ounded red by A red by A	☐ Loc	Refus	gency	ooperate	Page 1		