I N	Agenc	y Name		STON-SALEN	OLICE] IN	INCIDENT/INVESTIGATION							OCA 2434103					
C	ORI	NC	NC 03/	10200			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							09 23 2024 11:28 Hrs.			
N T	#1			Aggravated A	ssai	ult		_	Com	Month 09	Day 23			:28 Hrs				Time 11:27 Hrs.	
D	#2	Crime I	ncident			Att Location of Incident Offens									Offense Tract				
A T	πэ (Crime I	ncident						Com Att	Premise 7		Cree	K PW	, Winston	-salem NC 27127 314 Victim Residence Type				
A	#3							Com							☐ Single Family ☐ Multi Family				
МО			d or Com										Forcible Yes No	Weapon / Tools					
V	# of V	ictims	Туре	Ŋ Person	_	Business				Injury		None	ΠМ	_	Loss o			lcohol Use:	
	1 Society Government Financial Institute Broken Bones Severe Lacerations Wes Unknown Internal Unconscious Other Major Wes No No															_			
I C		Victim/		Name (Last, First,		Victim of Do					OB / Age Race			Relationship	Resident Status				
T	V1 DATA OMITTED									Crime #				30	_	,	To Offender		
I M	Home Address										1,				В	Hon	1RU ne Phone	Unknown	
					ATA OMI	ITTED							Trone Thone						
	Employer Name/Address DATA O								MITTED						Business Phone				
,	VYR	M	Color Lic/Lis Vin							Vin									
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 column i	R = Recovered for other	D = 1 er jur	Damaged isdiction)	Z = Seized	B =	Burn	C = 0	Counter	rfeit / F	orged	F = Found	i				
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo	del S	erial Number	
- - P - R													DA	ATA OMITTED					
					_												11	FOR FORMATION	
					\dashv													SECURITY	
O P -																		PURPOSES	
Р Е -					_												01	H M THE PID OT	
R T					\dashv													VE PROPERTY	
Y ·																	TVE	ITEMS ARE	
																	D	ISPLAYED ON	
					\Box												I	22C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	None	nher Voh	oles Pagaziona	d	0										
	Number of Vehicles Stolen 0 Number Vehicles Recovered 0 Officer ID# Officer Signature Supervisor Signature																		
ID	SIM		BUR							KS, C. M. (15216)									
Status	Comp	iainant	Signatur	ž			Case Statu: Further Inact Closed	Inve ive /Clea	red			Jnfound Cleared Cleared	ded by Ar by Ar	Loca	Refuse ther Ag	gency	ooperate	Page 1	