I N	Agenc	y Name		NSTON-SALE	INCIDENT/INVESTIGATION								OCA 2434411						
I C	ORI	NC	NC 034	40200		REPORT								Date / Mon	Date / Time Reported SMTWTFS Month Day Yr Time				
D E			ncident(s			│ Att At Found SMT₩TFS Month Day Yr Time							T F S	17:05 Hrs.   17:					
N T	#1			Aggravated A	Assai	ult		_	Com	Month 09	D			Time 7:05  Hrs				Time $17:04$ Hrs.	
D .	#2	Crime I	ncident	00					Att	Location	ı of	Incident						Offense Tract	
A T	Com 2899 Fairlawn Dr/reynolda Rd, Win															ston-salem 114   Victim Residence Type			
A	#3	Jillie I	ncident						☐ Att   Premise Type ☐ Com						Single Family   Multi Family				
МО			d or Con MITTEI					Forcible Yes							Weapon / Tools				
	# of Victims   Type   No   Drug/Alcohol Use:															lcohol Use:			
	Society Government Financial Institute Broken Bones Severe Lacerations															es Unknown			
V I		Jictim/		ligious  L.E. Of Name (Last, First,			uty   Othe	er/Un	know	n 🗆		ternal  Victim of		scious   B / Age	<del>'</del> -	r Major			
C T	V1	v ictiiii/				Crime #					68 68	Race	sex	To Offender					
I	DATA OMITTED									1,				W			1RU	☐ Non-Resident ☐ Unknown	
М -	Home	Addre	ss		ATA OMI	OMITTED								Home Phone					
	Emplo		ATA OMITTED							Business Phone									
	VYR		ake	Model	Color						Vin								
	2007	7   <i>T</i>	OYT	COROLLA	4.	D	BLK		<i>I</i>	HKS574	14,	NC		JTDI	3R321	32E370107787			
O T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes																			
	Victim #	DCI	Status	Value		Property Description							Mal	ce/Mo	odel Se	erial Number			
_	"						2007 BLK , HKS5744 NC							1	ГОҮТ С	Coroll	a DA	ATA OMITTED	
P -					_												TN	FOR FORMATION	
					$\dashv$												11	SECURITY	
R O																		PURPOSES	
Р <sup>-</sup> Е -																			
R																		ILY THE FIRST	
Т Ү -																	TWEL	VE PROPERTY	
1 .																		ITEMS ARE	
-					$\dashv$													ISPLAYED ON 2C REPORTS	
-					$\dashv$	-+											1		
-	Numb	er of V	ehicles S	Stolen 0	Nur	nber Vehi	cles Recovere	d	0										
ID	Officer	י בע ז	I. O. (1	5835)	Officer Sig	Officer Signature Supervisor Signature MATTISON C. M. (15167)													
ID			Signatur			Case Status	Case Status Case Disposition:						WIATII	MATTISŎN, G. M. (15167)					
Status	·P.		<i>J</i>				☐ Further ☐ Inact ☐ Closed ☐ Closed	r Inve tive I/Clea	ıred			☐ Unfoun☐ Cleared☐ Cleared☐	ded by Ai by Ai	Locarest Carest by Ander	Refuse ther Ag	gency	ooperate	Page 1	