I N	Agenc	y Name		NSTON-SALEN	1 P	OLICE	] IN	CIDENT/INVESTIGATION REPORT  Att At Found SMTWTFS Month Day Yr Time						OCA 2434962					
C I	ORI	NC												Date / Time Reported SMTWTFS Month Day Yr Time					
D E	<u> </u>		NC 034											TFS	09 Last	29   2024   21:48 Hrs.   Known Secure			
N T	#1			, Assault-non Agg	ı —	Com	Month 09	D			Time 1:48 Hrs			29   2024	Time				
D	#2 Crime Incident																	Offense Tract	
A T	Crime Incident Com 801 N Martin Luther King Jr Dr, W															nston-salem 222   Victim Residence Type			
A	#3	Jiiiie i	ncident						Com	Tiennse	тур							y □Multi Family	
МО			d or Con			!						Forcible Yes	X N/A	We	apon / Tools				
	No No															cohol Use:			
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow																		
V I		Victim/		igious L.E. Off			ity 🔲 Oth	er/Ur	ıknow	n _		ternal  Victim of		nscious		r Major No N/A Sex Relationship Resident Status			
C T	Crimo													OOB / Age Race			To Offender		
I	1		DA	ΓA OMITTED					1,			В	M	1NE	☐ Non-Resident ☐ Unknown				
М	Home Address DATA OMIT															Home Phone			
	Employer Name/Address DATA OMI														Business Phone				
,	VYR	Color Lic/Lis Vin						Vin											
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т							DATA	<b>(</b>	)M	ITTE	EΓ	)							
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D																			
C4-4	s L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found																		
Status Codes	(Chec	k "OJ"	column	if recovered for othe	er jur	isdiction)	Z = Seizeu	Б=	- Duii	ied C=	Cou	interrent / r	orgeu	r = round	1				
	Victim # DCI Status Value OJ QTY					QTY	Property Description							Mak	e/Mo		rial Number		
		<del>                                     </del>											DA	TA OMITTED FOR					
P - R																	IN	FORMATION	
																		SECURITY	
ο .																		PURPOSES	
P -																		T T I WITE ETD CO	
R T																		LY THE FIRST VE PROPERTY	
Y ·																		ITEMS ARE	
-																		SPLAYED ON	
																	P	2C REPORTS	
-	NT .		-1:1 °	4-1	<b>)</b> , ,	h - 37 1 '	-1 P	1											
	Numb Office		ehicles S	tolen 0		mber Vehi	cles Recovere Officer Sig		0 re				I	Supervisor	Signati	ıre			
ID	JACOBS, T. R. (15814)										_	:		MULG	ŘĚW,	<i>M</i>	J. (14746)		
	Complainant Signature Case State									tion		ase Dispos  ☐ Unfoun		☐ Loca	ited		□ Extr	adition Declined	
Status					tive				Cleared	by A	rrest 🗌	Refuse	e to C	ooperate					
							☐ Closed			hausted				rest by Ano				Page 1	