I N	Agenc	y Name		NSTON-SALEN	OLICE	IN	NCIDENT/INVESTIGATION						OCA 2436349							
C	ORI	NG					-	REPORT							Date / Time Reported SMTATFS Month Day Yr Time					
D E	10		NC 034											10 09 2024 15:38 Hrs.						
N T	#1	Jimic I	neideni(s) Drug Violai	Att At Found SMTMTFS Month Day Yr Time T S Month Day 2024 15:38 Hrs								Month Day Yr Time							
D .	#2	Crime I	ncident	Drug roun		<u> </u>			_	Location			<i>†</i> 1.	7.36 1111	<u> 10</u>		19 20		Offense Tract	
Α		~ · ·						_	Com				ther I	King Jr D	r, Wir	inston-salem 221 Victim Residence Type				
T A	#3	rime i	ncident					☐ Att Premise Type ☐ Com								☐ Single Family ☐ Multi Family				
МО			d or Com						Forcible Tyes					Weapon / Tools						
	DATA OMITTED See No. No.															1				
	# of V	ictims	""	☐ Person ciety ☐ Governm		Business	inancial Instit	ute		Injury	•	☐ None oken Bone	□ M	Iinor □ □ Severe	Loss o			-	conoi Use: Unknow	vn
V	1		Rel	igious 🔲 L.E. Off	icer I	Line of D			know	. –	•	ternal 🔲	Unco	scious [Other		r [No	□ □N/A	
C	Crime #														Race	Sex	Relation To Offe	ship nder	Resident Stat Resident	us
T I	V1		DA	ΓA OMITTED								1,							☐ Non-Resid	
M	Home	ess	rte								Home Phone									
	Employer Name/Address DATA OMI' DATA OMI'														Business Phone					-
	VYR	ake	Color							Vin	/in					_				
	, 110		unc	Model	Sty	, 10	Color		Lic	J 213				V 111						\dashv
O T H E R S I N V O L V E D	DATA OMITTED																			
Status Codes	(Chec	k "OJ"	= Stolen column i	R = Recovered if recovered for other	D = I er juri	Damaged sdiction)	Z = Seized	B =	Burn	C = 0	Cou	interfeit / F	orged	F = Foun	d					
	Victim # DCI Status Value OJ QTY								Property Description							Make/Model Serial Number				
	1								ALE						UNKNO	NOWN/Scale DATA OMITTED				<u> </u>
P - R - O					+													IN	FOR FORMATION	<u></u>
					+														SECURITY	\vdash
																			PURPOSES	
Р ⁻ Е -																				_
R T Y					\dashv												T		LY THE FIRS E PROPERT	
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	Numb Office:		ehicles S	tolen 0		nber Vehi	Cles Recovere		<i>0</i>				ı	Supervisor	Signati	ıre				\dashv
ID			, M. L.	(16131)	Officer Sig	Officer Signature Supervisor $ARND$								r Signature T, V. A. (15514)						
	Complainant Signature Case Stat									Case Disposition:								Extr	dition Declin	ed
Status							☐ Inact	tive /Clea	ıred			☐ Cleared ☐ Cleared	by A	rest by And	Refuse other Ag	ency	ooperate	_	Page 1	