I N	Agenc	y Namo		NSTON-SALEN	OLICE	. IN	INCIDENT/INVESTIGATION							OCA 2436703							
C	C REPORT														Date / Mon	Time	e Reporte	d S		F S	
D E	<u> </u>		ncident(s				Att I	At Four	nd	SI	d T W	TFS	10				Time <i>14:04</i> M T W T				
N T	#1			, Larceny- All		ı —	Com	Month 10	Ι			T F <u>\$</u> Time 1:04 Hrs			vn Secure Day Y	′r —	Time	Hrs.			
D	#2 Crime Incident															Offense Tract					
A T		Trimo I	ncident					_	Com Att	4268 Premise			ı Av,	Winston-	salem	NC 27105 122 Victim Residence Type					
A	#3	ncident		Tremise	етуре					☐ Single Family ☐ Multi Family											
МО			d or Com											Forcible Yes	X N/A	We	apon / To	ools			
	# of Victims Type Person X Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															-					
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown															- 1					
V I		Victim/		-			uty Othe	er/Un	know	'n	-	viotim of			Other Race	<u> </u>		No No	□N/A Resident S	Statue	
C T	Crime #														Race	SCA	To Offe	nder		nt	
I	- 1		DA	ΓΑ OMITTED								1,							□ Non-Re		
М	Home Address DATA OMI									TTED						Home Phone					
	Employer Name/Address DATA O															Business Phone					
,	VYR	M	Color Lic/Lis Vin						Vin												
О																					
T H																					
E R S																					
	DATA OMITTED																				
I N																					
V	V O L																				
L																					
V E																					
D																					
a	s L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found																				
Status Codes	(Chec	k "OJ"	= Stolen column	R = Recovered if recovered for other	D = er jur	Damaged isdiction)	Z = Seized	В=	Burn	ed C=	Cou	unterfeit / F	orged	F = Foun	ıd						
	Victim #	Property Description								Mal	Make/Model Serial Number										
		78 7 1 TRAILERS														RBORN/2021 DATA OMITTED				ED	
P -																		IN	FOR FORMATION	ON	
					\dashv														SECURITY		
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														- 					C REPOR		
	Numb		ehicles S	tolen 0		mber Veh	Conficer Signature		0				- 1	Supervices	Signat	ure					
ID	SMI	TH, M	1. F. (1.	5992)		LEA .							or Signature CH, J. M. (15710)								
	Complainant Signature Case Stat ☐ Furth									1						cated					
Status	IX Inactive											Cleared	Unfounded								
							☐ Closed			hausted				rrest by And				_d \lceil	Page 1		