I N	Agenc	e WIM] IN	INCIDENT/INVESTIGATION							OCA 2436993									
C I	ORI	NC					1	REPORT								Date / Time Reported SMTWTFS Month Day Yr Time				
D E	NC NC 0340200 Crime Incident(s)									☐ Att At Found S上 TWTFS Month Day Yr Time						$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$				
N T	#1			, Larceny- All	Oth	ner		ı —	Com	Month	1]			Time 5:49 Hrs			Day Yr 🖰	Time 16:48 Hrs.		
D	#2	Crime I	ncident						Att	Locatio	on o	f Incident						Offense Tract		
A T	Crime Incident Com 4741 Kester Mill Rd, Winston															salem NC 27103 323 Victim Residence Type				
A	#3	.111116 1	ncident					Com	Tienns	JIy	pe				- 1		ly □Multi Family			
МО			d or Con								Forcible Yes				Weapon / Tools					
																1 1 1 1 1 1				
	☐ Society ☐ Government ☐ Financial Institute ☐ Broken Bones ☐ Severe Lacerations ☐ Y															es Unknown				
V	1		Rel	igious 🔲 L.E. Of	ficer	Line of D			nknow		_		Unco	nscious [Other	ner Major No N/A				
I C		Victim/	Business	Name (Last, First,						Victim of Crime #	DOI	3 / Age 68	Race	Sex	Relationship To Offender					
T I	V1		DA	TA OMITTED					1,		00	W	M		☐ Non-Resident					
M	Home	e Addre	ess		PTP	·D						<u> </u>		ne Phone	Unknown					
	Employer Name/Address DATA OMI															Business Phone				
	DATA OIVI									Lic/Lis				1. 17			Business I none			
	VYR	IVI	аке	Model	51	tyle	Color		Li	C/L1S				Vin						
O T H E R S I N V O L V E D	DATA OMITTED																			
Status Codes	(Chec	k "OJ"	= Stolen column	R = Recovered if recovered for other	D = er jui	Damaged isdiction)	Z = Seized	B =	Burn	ied C=	: Co	ounterfeit / F	Forged	F = Foun	d					
	Victim # DCI Status Value OJ QTY								Property Description						Mal	ce/Mc	odel So	erial Number		
	1 78 7 1 TRAILER													1	LEONA	RD	DA	ATA OMITTED		
- P - R														+			IN	FOR FORMATION		
																		SECURITY		
ο .																		PURPOSES		
Р ⁻ Е -																				
R T																		VE PROPERTY		
Y ·																	1 WEL	ITEMS ARE		
																	D	ISPLAYED ON		
																	I	2C REPORTS		
	Numb Office		ehicles S	tolen 0		mber Veh	icles Recovere		0 re				1	Supervisor	Signat	ure				
ID	AYA	LA-A	MA YA,		Officer Signature Supervisor Signature MCKAUGHAN, A. M. (14884)										34)					
	Comp	lainant	Signatur	e			Case Status		Case Disposition: Unfounded							radition Declined				
Status							☐ Closed	ive /Clea	ared			☐ Cleared	by A	rrest E	Refus	gency	Cooperate	Page 1		