I N	Agenc	y Name		NSTON-SALEN	OLICE] IN	NCIDENT/INVESTIGATION						OCA 2437113					
C I	ORI	NC					1	REPORT							Date / Time Reported S M W T F S Month Day Yr Time			
D E			NC 034			Att At Found SMIWIFS Month Day Yr Time							10 15 2024 15:46 Hrs. Last Known Secure SMFWTFS Month Day Yr Time					
N T	#1			, ng Threats -intin	nida	tion, No	n Physical		Com	Month 10 I	Dε			ime 5:46 Hrs			Day Yr 🖰	Time $15:45$ Hrs.
D			ncident	<u> </u>					Att	Location	of I	ncident						Offense Tract
A T		'rime I	ncident					_	Com Att	1005 (Premise			4v, V	Vinston-sa	lem N		7101 Victim Reside	222
A	#3								Com	110111100	- J P C					- 1		ily □Multi Family
МО			d or Com MITTEI											Forcible Yes No	Weapon / Tools			
	# of Victims Type Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																	
V	1			ciety Governm igious L.E. Off			inancial Institu		know			oken Bone ernal 🔲		Severe	Lacerat Other		. –	es □Unknown □ □N/A
I	Victim/Business Name (Last, First, Middle) Victim of DOB														Race		Relationship	Resident Status
C T	V1		DA	ΓA OMITTED					Crime #		52			To Offender	□ Resident □ Non-Resident			
I M		A 11							1,			В	M	10K	Unknown			
	Home	Addre	SS		ATA OMI	ITTED							Home Phone					
	Employer Name/Address DATA C								MITTED					Business Phone				
,	VYR	Color		Lic	c/Lis				Vin	/in								
T H E R S I N V O L V E D	DATA OMITTED																	
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column	R = Recovered for other	D = I er juri	Damaged isdiction)	Z = Seized	B =	Burn	C = 0	Cour	nterfeit / F	orged	F = Found	i			
	Victim # DCI Status Value OJ QTY					QTY	Property Description								Mak	e/Mo	del S	erial Number
- - P - R													DA	ATA OMITTED				
					_												IN	FOR NFORMATION
																		SECURITY
O .																		PURPOSES
E ·					_												01	NLY THE FIRST
R T					_													VE PROPERTY
Υ .																		ITEMS ARE
																		ISPLAYED ON
					_												I	2C REPORTS
-	Numb	er of V	ehicles S	tolen 0	Nun	nber Vehi	cles Recovere	d	0									
	Office	r		ID			Officer Sig		-					Supervisor			(15070)	
ID			D. (16 Signatur			Case Status	Case Status Case Disposition:						MULLINS, B. H. (15079)					
Status	P		G				☐ Further ☐ Inact ☐ Closed	Inve ive /Clea	ared			Unfoun Cleared Cleared	ded by Aı by Aı	Locarrest rest by Ano	Refuse ther Ag	gency	ooperate	Page 1