I N	Agenc	y Nam		NSTON-SALE	M P	OLICE	. IN	CIDENT/INVESTIGATION					OCA 2437401					
C I	ORI	NC					1	REPORT					Date / Time Reported SMTWTFS Month Day Yr Time					
D E			NC 034					Att At Found SMTWTFS Month Day Yr Time							10 18 2024 00:25 Hrs. Last Known Secure SMTMTFS Month Day Yr Time			
N T	#1			, ia- Possessing/o	conc	ealing I	Eauipment	DX (- 1	Month			ime :25 Hrs			Day Yr 🗀	Time $00:24$ Hrs.	
D			ncident				1		\rightarrow		of Incident	7 00	7.23	7 10			Offense Tract	
A		7 I	! 4 4						Com		Broad St,	Winst	ton-salem	NC 2			411	
T A	#3	Jrime i	ncident						Com	Premise T	ype				- 1	Victim Resider Single Fami	nce Type ly ∏Multi Family	
МО			d or Com MITTEI					Forcible ☐ Yes ☐ No					Weapon / Tools					
	# of V	ictims	Туре	Person	_ I	Business				Injury	None		_] Loss o	f Tee	th Drug/A	lcohol Use:	
V	I Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown Severe Lacerations Internal Unconscious Other Major No															_		
I	Victim/Business Name (Last, First, Middle) Victim of DOB / Age R															Relationship	Resident Status	
C T	V1		DA	ГА ОМІТТЕО							Crime #					To Offender	☐ Resident ☐ Non-Resident	
I M											1						Unknown	
	Home Address DATA OMIT									ГТЕD					Home Phone			
	Employer Name/Address DATA OMI								ГТЕD					Business Phone				
,	VYR	M	ake	Model	St	yle	Color		Lic	/Lis			Vin					
O T H E R S I N V O L V		DATA OMITTED																
D																		
Status Codes	(Chec	k "OJ"	= Stolen column	R = Recovered if recovered for oth	D = . er jur	isdiction)	Z = Seized	В=	Burn	ed C=C	ounterfeit / F	orged	F = Foun	.d				
	Victim # DCI Status Value OJ QT													Mak	e/Mo	del Se	rial Number	
		11 6 1 DRUGS/NARCOTICS EQUIPMENT											DA	TA OMITTED FOR				
P - R																IN	FORMATION	
																	SECURITY	
O p -																	PURPOSES	
E -																ON	I V THE EIDET	
R T																	ILY THE FIRST VE PROPERTY	
Y ·																	ITEMS ARE	
-																D	SPLAYED ON	
																P	2C REPORTS	
-	Num-	or of V	ahiolos C	tolen 0	Ni	nber Val-	olas Pasavas-	d	0									
	Number of Vehicles Stolen 0 Number Vehicles Recovered 0 Officer ID# Officer Signature Supervisor Signature																	
ID	WIT	CHE	(16390)				Т	Coss D'		ROBEI	RTSO1	V, <i>C</i> .	K. (15636))				
Status	Comp	iainant	Signatur	e			☐ Further 【X Inact ☐ Closed								Page 1			
							☐ Closed	/Lead	is Ext	nausted L	□ Death c	ot ()tte	nder ⊏	1 Prosec	ution	Declined	Page 1	