I N	Agenc	y Name		NSTON-SALEN	CIDENT/INVESTIGATION						OCA 2437923								
C	ORI	NG				-	REPORT						Date / Time Reported SMIWTFS Month Day Yr Time						
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N	#1) Assault-non Agg	rav	atad As	sault	_	Att Com	At Foun Month	D			T F S			Day Yr	Time	
T	#2		ncident	Assaun-non Age	zrav	aiea As.	зиин	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$									22 2024	Offense Tract	
D A	Com 2800 S Main St, Winston-salem NC 27																	313	
T A	#3	Crime I	ncident						Att	Premise '	Тур	e				- 1	Victim Resid	• •	
	How A	Attacke	d or Con	nmitted				Ш	Com					Forcible		_	apon / Tools	ily □Multi Family	
MO	D.	ATA O	MITTEL)										☐ Yes [☐ No	X N/A				
	# of V	ictims	""	▼ Person	_	Business				Injury	•	☐ None	ΣM		Loss o		_	Alcohol Use:	
V	I Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow Internal Unconscious Other Major No NA															_			
I		Victim/		Name (Last, First,						<u> </u>		Victim of		3 / Age	Race		Relationship	Resident Status	
C T	V1		DA	ΓΑ OMITTED			(Crime # 58					To Offender						
I M												1,			В	F	1RU	Unknown	
	Home	Addre	ess		ГТЕ	TTED							Home Phone						
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Codes	Victim				Ť	ĺ									Make/Model Serial Number				
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-	Numb	er of V	ehicles S	tolen 0	Nun	nber Vehi	cles Recovere	d	0										
ID	Office STA	AF	Officer Sig										r Signature H, J. M. (15710)						
ID	STANLEY, A. E. (15753) Complainant Signature Case State															ı. (1.	,		
Status	•		-		☐ Further Inact		Investigation Unfounded Located Extradition							radition Declined					
Status					/Cle		hausted	Ιi	Cleared	by A	rrest by Ano	ther Ag	gency	Г	Page 1				