I N	Agenc	y Name	ISTON-SALEN	, IN	NCIDENT/INVESTIGATION						OCA 2438428										
C	ORI	NC	NC 034	10200			1	REPORT							Date / Time Reported SMTWTFS Month Day Yr Time 10   25   2024   18:06 Hrs.						
D E		NC :			A 1	At Fou	n d	IgIn	d TIW	   TI II	10		25   2	2024	18:06 M T W T						
N	#1	Jime ii	20		Com	Month	. I			TIS Time			vn Secure	Yr 💳	Time						
T	#2	Crime I	ncident	iking & Enterin	un ron			_	10 Locatio	_	25   2024 Incident	4   10	8:06  Hrs	10	<u> </u>	25   20		18:05  Offense Trac	Hrs. ct		
D A	Com 3710 Vandalia Dr, Winston-salem NC 27104 321																				
T A	#3	Crime I	ncident						Att	Premise	Ty	pe				- 1			• 1	omily.	
	How A	Attacke	d or Com	mitted	Ш	Com						☐ Single Family ☐ Multi Family  Weapon / Tools									
MO			MITTEL											☐ Yes [	<b>X</b> N/A	N/A					
	# of Victims   Type None   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:																				
	2 Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown															own					
V I		Victim/		Name (Last, First,			uty   Otne	er/Un	iknow	'n   [		Victim of		nscious  B / Age	Other			No	□N/A Resident S	tatus	
C T	V1 DATA OMITTED												70			50.1	To Offe		■ Resider	nt	
I	DATA UNITTED											1,			$\mid W \mid$	F			☐ Non-Re ☐ Unknov		
М	Home	ess	ГТЕ	ΓED							Home Phone										
	Employer Name/Address DATA OMIT															Business Phone					
	VYR   Make   Model   Style   Color								Lic/Lis					Vin							
	V 110	141	arc	Widdei	50	.yic	Color		Lik					<b>*</b> III							
T H E R S I N V O L V E D	DATA OMITTED																				
Status Codes																					
	Victim # DCI Status Value OJ QTY							Property Description							Mal	Iake/Model Serial Number					
		11 OTHE 1 DRUGS/NARCOTICS EQUIPMENT														DA	TA OMITT	ED			
P - R - O		77	OTHE				OTHER											INI	FOR	ONI O	
	1	<i>77 35</i>	OTHE OTHE				OTHER STRUCTURES - OTHER									INFORMATION SECURITY					
	1	35	OTHE				STRUCTURES - OTHER									PURPOSES					
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ID	Office:		1. W. (1	ID 6197)	Officer Sig	Officer Signature Superviso								r Signature ERVILLE, T. J. (16036)							
			Signature		Case Statu		Case Disposition:														
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	tive I/Clea	ared				by A	Locarrest □ rrest by And	Refuse other Ag	gency	Cooperate	· _	dition Decl Page 1	ined	