I N	Agency Name WINSTON-SALEM POLICE									CIDENT/INVESTIGATION					OCA 2438603			
C	ORI	NC					1	REPORT Att At Found SMTWTFS Month Day Yr Time						Date / Time Reported SMTWTFS Month Day Yr Time				
D E			NC 034											10 26 2024 23:37 Hrs. Last Known Secure SMTWTFS Month Day Yr Time				
N	#1	Time I	nerdent(s) Drug Viola	tion	c		☐ Att	Mo	onth							Time	
T .	#2	Crime I	ncident	Drug viola	iiOn.	•		☐ Att	+ - 1		26 2024 of Incident	4 23	3:37 Hrs	s 10		<u> 2024 </u> -	23:36 Hrs. Offense Tract	
D A	1			ia- Possessing/o	conc	ealing l	Equipment	ĭX Coı	m .		hanes Ma	ll Bv,	Winston	-salem			322	
T A	#3 Crime Incident Driving While Impaired									Att Premise Type Com					Victim Residence Type ☐ Single Family ☐ Multi Family			
МО			d or Con MITTEI					Forcible Yes					☐ Yes	Weapon / Tools				
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															cohol Use:		
	1			ciety Governm	ent		inancial Instit			. –	Broken Bone		Severe	- Lacerat	ions	□ Ye	s Unknown	
V I		Victim/		igious L.E. Of Name (Last, First,			uty Oth	er/Unkno	own	<u> I</u> 	nternal Victim of		scious E	Other		r ⊠ No Relationship	□N/A Resident Status	
C T	V1					Crime #			1	50.1	To Offender	☐ Resident						
I			DA	TA OMITTED				1,2,3									☐ Non-Resident ☐ Unknown	
M	Home Address DATA OMI'								ГТЕО						Home Phone			
•	Employer Name/Address DATA OMI								TTED					Business Phone				
,	VYR Make Model Style Color							Lic/Lis Vin					Vin					
H E R S I N V O L V E D		DATA OMITTED																
Status Codes	L = Lo	ost S	= Stolen	R = Recovered	D = l	Damaged	Z = Seized	B = Bu	rned	C = Cc	ounterfeit / F	orged	F = Foun	d				
	Victim		Status	Value	QTY		Property Description							e/Mo	dal Sa	rial Number		
	#	"						FIREARMS/AMMUNITION						S&W	.C/ IVIO		TA OMITTED	
- P -									MS/AMMUNITION					S&W/M	&p 4		FOR	
		11 6 1 DRUGS/NARCO							OTICS EQUIPMENT						INFORMATION			
R O																	SECURITY PURPOSES	
Ρ.																	T CRI OSES	
E - R																ON	LY THE FIRST	
T Y																TWEL	VE PROPERTY	
																	ITEMS ARE	
					_												SPLAYED ON 2C REPORTS	
-				+	\dashv											r	2C REPORTS	
•	Numb	er of V	ehicles S	tolen 0	Nur	nber Veh	icles Recovere	d 0										
10	Officer		I CE	M (16270)) #		Officer Sig	nature					Supervisor			A M (1400	24)	
ID			ASE, J. Signatur	<u>M. (16379)</u> e			Case Statu	s	MCKAUĞHAN, A. M. (14884) Case Disposition:							4)		
Status	- omp		<u>-</u>				☐ Furthe ☐ Inac	r Investig tive /Cleared		n	☐ Unfoun☐ Cleared☐ Cleared	ded by Ai by Ai	Loc rrest rrest by And] Refuse other Ag	ency	ooperate $\ \ \ \ \ \ \ \ \ \ \ \ \ $	Page 1	