I N	Agenc	y Name		VSTON-SALEN	OLICE] IN	INCIDENT/INVESTIGATION							OCA 2438960						
C	ORI	NG			-	REPORT							Date / Time Reported SM WTFS Month Day Yr Time							
D E			NC 034				A 44 I	At Four	nd.	Isla	n rl w		10		29 202	Time 24 14:50 H SM TWTE				
N T	#1	JIIIIC II	nerdeni(s	, Missing Pe	ing Person				Att At Found S M = W Month Day Yr T T Com 10 29 2024 14.								yn Secure Day Yr 29 2024	Time	Irs.	
D D	#2	Crime I	ncident	1111551118 1 0	<u></u>			\rightarrow			Incident	+ 14	1.30 1113	10		29 2024	Offense Tract			
Α		~						_	Com				Wins	ton-salem	NC 2			224		
T A	#3	rime I	ncident						Att Com	Premise	Typ	pe					Victim Resid	ience Type nily ∏Multi Far	mily	
МО			d or Com						!		Forcible Pyes				Weapon / Tools					
WO	DATA OMITTED																			
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use: Broken Bones Severe Lacerations Yes Unknown															wn				
V	1			igious 🔲 L.E. Off					know	. –	-			Severe lascious	Other	tions Majo		_	,,,,,	
I C		Victim/	Business	Name (Last, First,					Victim of Crime #	DOI	3 / Age 56	Race	Sex	Relationshi To Offende						
T I	V1 DATA OMITTED											<i>1</i> ,		50	B	M	10 01101101	☐ Non-Resi	iden	
M	Home	Addre	ss						_			1,			Ь		ne Phone	Unknown	<u>n</u>	
	Employer Name/Address DATA OM Employer Name/Address									TTED										
		oyer ina	ime/Addi	ress	D.	ATA OMI	TA OMITTED							Business Phone						
,	VYR	M	ake	Model	St	yle	Color		Lic	:/Lis				Vin						
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 i	R = Recovered for other	D = l r juri	Damaged isdiction)	Z = Seized	B =	Burn	ed C=	Cou	ınterfeit / F	orged	F = Found	i					
	Victim # DCI Status Value OJ QTY						Property Description								Mal	ce/Mc	odel	Serial Number		
P - R - O													Γ	ATA OMITTE	D					
					+													FOR INFORMATION		
					\dashv													SECURITY	_	
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Р ⁻ Е -					_													NI VEHE EID	C/TC	
R T					\dashv													NLY THE FIRE		
Y ·					\dashv												1 111	ITEMS ARE		
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	Office	r	ehicles S	ID		nber Vehic	cles Recovere Officer Sig		e e				I	Supervisor	Signat	ure			\dashv	
ID	GAN	<i>1BILI</i>		(16360)								NAVY,	or Signature <i>Y, C. M.</i> (15037)							
	Comp	lainant	e	Case Status X Further						☐ Loca	Located Extradition Declined									
Status							☐ Inact	ive /Clea	ıred			Cleared	by A	rest by Ano	Refuse ther Ag	gency	ooperate	Page 1		