I N	Agenc	y Nam		NSTON-SALEN	IN	INCIDENT/INVESTIGATION							OCA 2438974						
C I	ORI				REPORT						Date / Time Reported SM WTFS Month Day Yr Time								
D E			NC 034										10 29 2024 19:00 Hrs.						
N	#1	Jillie I	ncident(s	Robber	_	77 Cl							Month Day Yr Time						
T .	#2	Crime I	ncident	Robber			\rightarrow	10 Locatio		29 2024 f Incident	4 15	7:00 HIS	10			18:59 Hrs. Offense Tract			
D A	☐ Com 11 E Clemmonsville Rd, Winston-s																	313	
T A	#3	Zrime I	ncident					Att Com	Premise	Ту	pe				- 1	Victim Resider Single Famil	ice Type y ∏Multi Family		
МО			d or Com									Forcible Yes [X N/A	We	apon / Tools	- <u>-</u>			
	# of V	ictims	Туре	∏ Person	□ R:	ucinecc				Inju	ry	X None		□ No linor □	Losso	f Tee	th Drug/Al	cohol Use:	
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow															Unknown			
V I		Victim		igious L.E. Off Name (Last, First,			uty Othe	er/Un	know	n [] In	victim of		nscious B / Age	Other Race		r No Relationship	□N/A Resident Status	
C T	V1					Crime #					44	race	БСА	To Offender					
I M	DATA OMITTED											1,			$\mid W \mid$	F	1RU	☐ Non-Resident ☐ Unknown	
IVI	Home Address DATA OMIT									ГТЕО						Home Phone			
	Employer Name/Address DATA OMI														Business Phone				
,	VYR	Color	Color Lic/Lis Vin																
									<u> </u>										
O																			
T H																			
E																			
R S																			
т	DATA OMITTED																		
I N																			
V O	V O																		
L V																			
E																			
D																			
Status	s L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found																		
Codes	(Chec	k "OJ"	column	if recovered for othe	r juris	sdiction)	Z = Seizeu	Б –	Duili	eu C –		unterrent / 1	orgeu	T = Found					
	Victim #	DCI 20	Status 7	Value		Property Description								e/Mo		rial Number			
	3	MONEY/CASI MONEY/CASI								US/Cur US/Cur			TA OMITTED FOR						
P - R		20	5			1 1	MONET/CASI	1						<u> </u>	55/Cu1	rency		FORMATION	
																		SECURITY	
O .																		PURPOSES	
E ·					_												ON	LY THE FIRST	
R T					+	-+												VE PROPERTY	
Y ·					-	+												ITEMS ARE	
•											_						DI	SPLAYED ON	
																	P	2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Num	her Vehi	cles Recovere	d	0										
	Office	r		ID		OCI V CIII	Officer Sig		_					Supervisor	Signati	ıre	* /1= /==		
ID			<i>Y, J. D.</i> Signatur	(16087)		Case Statu	<u>M</u>						MCCA.	CARŤHY, D. J. (15427)					
a. :	Comp	.a.manl	•	▼ Further	r Inve	Investigation Unfounded Located Extradit							adition Declined						
Status					☐ Inact	/Clea		naucted			by A	rrest rrest by And ander	ther Ag	gency		Page 1			