I N	Agency Name WINSTON-SALEM POLICE		INCIDENT/INVESTIGATION			OCA 2439117		
C I	ORI	RE	REPORT Att At Found SMTMTFS Month Day Yr Time			Date / Time Reported SMTWTFS Month Day Yr Time		
D E	NC NC 0340200 Crime Incident(s)	Att At Fo				last Known Secure Nonth Day Yr Time Last Known Secure SM TH TFS Month Day Yr Time		
N T	#1 Autobreaking And L	arceny			Time 0:00 Hrs		Day Yr ☐ 30 2024	Time
D	#2 Crime Incident		Att Location	on of Incident		•		Offense Tract
A T	Crime Incident		<u> </u>			7 Victim Residen	211	
A	#3 Crime Incident		Att Premise	гурс				y □Multi Family
МО	How Attacked or Committed DATA OMITTED	,	Forcible Yes			Weapon / Tools		
V I C	# of Victims Type Nerson Business Injury None Minor Loss of Teeth Drug/Alcohol Use:							
	1							
	Victim/Business Name (Last, First, Middle) Victim of DOB / Age					Race Sex	Relationship	Resident Status
T	V1 DATA OMITTED		Crime #	21				
I M	Home Address		1,		$W \mid F$	me Phone	Unknown	
		'A OMITTED	TED			Home I none		
	Employer Name/Address	'A OMITTED	TTED			Business Phone		
,		tyle Co	olor Lic/Lis SIL , NC		Vin 1FAF	P251550	G150953	
T H E R S I N V O L V E D	DATA OMITTED							
Status Codes								
P - R - O	Victim # DCI Status Value OJ	QTY	Property Descrip	tion		Make/M	odel Ser	ial Number
	13 7	1 (9MN	M) FIREARM			AURUS/G.	2c DA	ΓΑ OMITTED
	13 5 1 PCA TARG		M) FIREARM 5 SIL , NC			AURUS/G ORD 500		FOR FORMATION
	1 PCA TARG	1 2003	SIL, NC			OKD 300		SECURITY
								PURPOSES
Р ⁻ Е -								
R T Y -								LY THE FIRST /E PROPERTY
								TEMS ARE
								SPLAYED ON
							P2	C REPORTS
	Nymbou of Vokiolog Stolon 0 Ny	umban Vahialas	Danayanad 0					
	Officer ID#	mber Vehicles	Recovered 0 Officer Signature		Supervisor			
ID	GRABS, D. M. (16310)			Coss Die 'a'	CROKE	E, B. K. (15602)	
Status	Complainant Signature	0	Case Status ☐ Further Investigation ☐ Inactive ☐ Closed/Cleared ☐ Closed/Leads Exhausted	Case Disposition Unfounded Cleared by A Cleared by A	Loca Arrest Arrest by Anot	Refuse to the Agency	Cooperate y —	Page 1