I N	Agenc	y Name		NSTON-SALE	M P	OLICE	IN	CIDENT/INVESTIGATION						OCA 2439129							
I C	ORI NC NC 0340200						REPORT							Date / Mon	nth Day Yr ' Time '						
D E	Crime Incident(s)									☐ Att					10 30 2024 23 Last Known Secure S M T Month Day Yr Time						
N	#1 l			, 1g Threats -intii	nida	ation No	n Physical	l		Month	Day Yr	Т	'ıme				r 🗀	Time	2		
Τ.			ncident	ig Trirectis titti	ni i nysicai	ПА	_	10 Location o		2:32 Hrs	10					e Tract					
D A								☐ Com 150 Hanes Mall C					inston-sa	lem N					2		
T A	#3	Crime I	ncident						Att Premise Type						Victim Residence Type						
71	Цопу	\ ttoolso	d or Com	umittad				☐ Com Forcible					☐ Single Family ☐ Multi Family Weapon / Tools								
MO			MITTEL						☐ Yes												
	No															Use.					
		ictinis			_		inancial Institu	ute			□ None Broken Bone						-				
V	2 Religious L.E. Officer Line of Duty Other/Unknown Internal Unconscious Other Major No N/A															N/A					
I C	'	Victim/Business Name (Last, First, Middle) Victim of Crime # DOB / Age Crime # 31												Race	Sex	Relation To Offer	ship	Resid	ent Status esident		
T I	V1		DA	TA OMITTED									31	117	,,	10 01101			on-Resider		
M ·	Home	e Addre									1			W	M	no Dhono		☐ Ur	nknown		
	поше	Addre	SS			D	ATA OMI	ΓΤED)						Home Phone						
	Employer Name/Address DATA OMIT									TTED					Business Phone						
	VYR	M	Model	Color Lic/Lis Vin						Vin											
						•															
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							Mak	ke/Model Serial Number				mber		
											DATA OMITTEI										
																		FO			
Р -																		SECU	IATION		
R O P																		PURP			
E - R																	ON	LY TH	IE FIRST		
T Y																TV			OPERTY		
																			S ARE		
-																			YED ON PORTS		
-																1.2					
-	Numb	er of V	ehicles S	tolen 0	Nu	mber Vehi	cles Recovere	d 0	1				<u> </u>								
ID	Office		עווווע	I (15222))#		Officer Sig	nature	ature Supervis						or Signature						
ID	WASZCZENIUK, L. (15222) Complainant Signature Case Statu															IN, J. L. (15605)					
Status	_ 0.mp/			-			☐ Further ☐ Inact ☐ Closed ☐ Closed	r Invest ive /Cleare	ed	on	☐ Unfoun☐ Cleared☐ Cleared	ded by Ar by Ar	Locarrest Locarr	Refuse other Ag	gency	Cooperate			Declined ge 1		