I N	Agency Name WINSTON-SALEM POLICE									CIDENT/INVESTIGATION						OCA 2439711			
C	ORI	NG					-		REPORT						Date / Time Reported S M T W T F S Month Day Yr Time				
D E			NC 034					- Av.   At Power   I el M 메 대 메 티 el						11   03   2024  02:11 Hrs.					
N	#1	Time I		) mon Law Robbe	_									Day Yr Time					
T	#2	Crime I	ncident	mon Law Roove	:1 y - :	sirongui	m		_	11 Location	_	02   2024 Incident	4   13	3:00   Hrs	11	ι		13:00 Hrs. Offense Tract	
D A	□ Com 4019 Reynolda Rd, Winston-salem No																	114	
T A	#3	Crime I	ncident					☐ Att Premise Type ☐ Com							Victim Residence Type  ☐ Single Family ☐ Multi Family				
	How A	Attacke	d or Con	nmitted				Forcibl					Forcible	Weapon / Tools					
МО	D	ATA O	MITTEI	)										☐ Yes [ ☐ No	X N/A				
V	# of V	ictims	**	☐ Person	_	Business				Injur	-	None ∑			Loss o		-	lcohol Use:	
	1 Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown Internal Unconscious Other Major															_			
I		Victim/		Name (Last, First,							T	Victim of		B / Age	Race		Relationship	Resident Status	
C T	V1		DA	ГА ОМІТТЕО					Crime #		62			To Offender	□ Resident     □ Non-Resident				
I M									1,			W	F	1RU	Unknown				
	Home	Addre	ess		ГТЕD								Home Phone						
	Employer Name/Address DATA OMI									ГТЕО					Business Phone				
,	VYR Make Model Style Color								Lic/Lis Vin					Vin					
		•		•	•		•												
O																			
T H																			
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I							DATA	$\mathbf{A}$	)M	ITTE	$\Xi\Gamma$	)							
N	- <del> </del>																		
V O	v O																		
L V																			
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D																			
_					_			_	_			2.4.1							
Status Codes	(Chec	k "OJ"	= Stolen column	R = Recovered if recovered for other	D = er jur	Damaged isdiction)	Z = Seized	В=	Burn	ed C=	Cou	ınterfeit / F	orged	F = Foun	d 				
	Victim # DCI Status Value OJ QTY							Property Description							Mak	e/Mo	del Se	erial Number	
- P - R	1								ICATION CARD						9 WEST		DA	TA OMITTED	
	1	1         77         7         1         NC IDENTIFICATION CARD           1         09         7         1         DEBIT CARDS										NC/Id FIRST		IN	FOR FORMATION				
	1	10   7     20   DRUGS/NARCOTICS										Medica	ıtion		SECURITY				
O .																		PURPOSES	
P E -																	01	I WELL FIDOR	
R T																		VE PROPERTY	
Y ·				+														ITEMS ARE	
																		ISPLAYED ON	
																	P	2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Nııı	mber Veh	icles Recovere	d	0										
	Officer	r		ID			Officer Sig		-					Supervisor			(14000)		
ID			<i>I. O. (1.</i> Signatur		Case Status	s	HORSLEY, S. A. (14880)  Case Disposition:												
G4 ·	P		٠		Further	r Inve	estiga	tion		☐ Unfoun	ded	Loc	ated	a to C	ooperate Extr	radition Declined			
Status							☐ Closed	/Clea		haustad		Cleared	by A	rrest by And	ther Ag	gency	Г	Page 1	