I N	Agenc	y Name	e WIN	VSTON-SALEN	1 PC	OLICE] IN	INCIDENT/INVESTIGATION						OCA 2439782					
C .	ORI									REPORT						Date / Time Reported SMTWTFS Month Day Yr Time			
D E	NC NC 0340200 Crime Incident(s)								At Found SMTWTFS Month Day Yr Time						$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
N T	#1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, iking & Enterin	e Wi	th Force	e	_	Com	Month 11			Time 0:30 Hrs			04 2024	Time		
D.	#2	Crime I	ncident		3 //				Att		of Incident		0.30	, 11			Offense Tract		
A		7 T	: 1					_	Com 2270 Sunderland Rd Apt. 5-A, Win						ton-salem NC 322 Victim Residence Type				
T A	#3	Jime i	ncident					☐ Att Premise Type ☐ Com						Single Family Multi Family					
МО			d or Com						!				Forcible Yes	x N/A	_	apon / Tools	· -		
																lookal Haar			
	# of Victims Type Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use: Broken Bones Severe Lacerations Yes Unknown																		
V			Rel	igious 🔲 L.E. Off	icer L		ity 🔲 Othe	er/Un	know	n _			nscious [Other	Majo	r 🛛 🗖 No	N/A		
C		Victim/		Name (Last, First,	Middl	le)		Victim of Crime #				B / Age 35	Race	Sex	Relationship To Offender	Resident Status Resident			
T I	V1		DA	ΓA OMITTED							1,			$\mid_{B}\mid$	$_{F}$		☐ Non-Resident		
М -	Home Address DATA OMIT														Home Phone				
	Employer Name/Address DATA OMI													Business Phone					
	VYR	Model							Vin	in									
O T H E R S I N V O L V E D		DATA OMITTED																	
Status Codes	(Chec	k "OJ"	= Stolen column i	R = Recovered frecovered for other	D = D r juris	Damaged sdiction)	Z = Seized	В=	Burn	ed $C = C$	Counterfeit	/ Forgeo	f F = Found	d 					
	Victim # DCI Status Value OJ QTY						Property Description							Mal	ce/Mo		erial Number		
- P - R													DA	TA OMITTED FOR					
					+											IN	FORMATION		
					\top												SECURITY		
O P -																	PURPOSES		
Р Е -					_											01	II W THE EID OT		
R T					+												VE PROPERTY		
Y ·					+											1 WEE	ITEMS ARE		
-																D	ISPLAYED ON		
																F	2C REPORTS		
-	NT -		1 . 1	. 1	Ň	1 1771		1	^										
	Numb Office		ehicles S	tolen 0		ber Vehic	cles Recovere Officer Sig		e e				Supervisor	Signat	ure				
ID	TAY	LOR,	C. J. (1	(6361)			WEL						LS, S. S. (15941)						
	Complainant Signature Case Stat																adition Declined		
Status							☐ Closed	ive /Clea	ared		☐ Clear ☐ Clear	ed by A ed by A	rrest by And	Refuse ther Ag	gency	ooperate	Page 1		