| I<br>N   | Agenc   | y Name   |                    | NSTON-SALE                         | M P         | OLICE       | IN                | CIDENT/INVESTIGATION  |       |   |                |                | OCA 2440150               |  |                                     |  |     |         |  |
|--|---|--|--------------------|------------------------------------|-------------|-------------|-------------------|---|-------|---|----------------|----------------|---------------------------|--|-------------------------------------|--|-----|---------|--|
| D<br>C   | ORI   |  | NC 034             |                                    |             |             | REPORT            |   |       |   |                |                |                           | Date / Time Reported SMTWIFS Month Day YI Time 11 07 2024 12:03 Hrs.       |                                     |  |     |         |  |
| E<br>N<br>T  | #1 C  | ommi   |                    | )<br>1g Threats -inti              | mide        | ation, No   | n Physical        | 11 0, 202. 12.00  |       |   |                |                |                           | Last Known Secure SMTWIFS Month Day Yr Time rs 11   07   2024   12:02 Hrs. |                                     |  |     |         |  |
| D<br>A   | #2  |  | ncident            |                                    |             |             |                   | Att Location of Incident Offense Tract  Com 271 Mercantile Dr, Winston-salem NC 27105 124   |       |   |                |                |                           |  |                                     |  | 124 |         |  |
| T<br>A   | #3  |  | ncident            |                                    |             |             |                   | Com Premise Type  |       |   |                |                |                           | Victim Residence Type  ☐ Single Family ☐ Multi Family  Weapon / Tools      |                                     |  |     |         |  |
| МО   |   |  | d or Con<br>MITTEI |                                    |             |             |                   |   |       |   |                |                | Forcible  Yes  No         | X N/A  | We                                  | apon / Too   | ols |         |  |
| V<br>I   | # of Victims   Type   None   Business   Injury   None   Minor   Loss   Broken Bones   Severe Lacerr   Religious   L.E. Officer Line of Duty   Other/Unknown   Internal   Unconscious   Othe   Victim/Business Name (Last, First, Middle)   Victim of DOB / Age   Race |  |                    |                                    |             |             |                   |   |       |   |                |                |                           |  |                                     | ations Yes Unknown r Major No N/A Sex Relationship Resident Status |     |         |  |
| C<br>T<br>I  | V1  |  |                    | ΓΑ OMITTED                         |             |             |                   | Crime # 1,  |       | 64  | В              | F              | To Offen                  | der [  | ☐ Resident ☐ Non-Resident ☐ Unknown |  |     |         |  |
| М -  | Home Address DATA OM  |  |                    |                                    |             |             |                   |   | ITTED |   |                |                |                           | Home Phone   |                                     |  |     |         |  |
|  |   |  | me/Add             |                                    | ATA OMITTED |             |                   |   |       |   |                | Business Phone |                           |  |                                     |  |     |         |  |
|  | VYR   | VYR Make Model Style                           |                    |                                    |             |             | Color Lic/Lis Vin |   |       |   |                |                | Vin                       |  |                                     |  |     |         |  |
| O<br>T<br>H<br>E<br>R<br>S<br>I<br>N<br>V<br>O<br>L<br>V<br>E<br>D | DATA OMITTED  |  |                    |                                    |             |             |                   |   |       |   |                |                |                           |  |                                     |  |     |         |  |
| Status<br>Codes  | (Chec   | k "OJ"   | = Stolen<br>column | R = Recovered if recovered for oth | er jui      | risdiction) | Z = Seized        | В = В   | urnea | C = C   | ounterient / F | orgea          | F = Found                 | 1  |                                     |  |     |         |  |
| P -<br>R <sub>-</sub><br>O p -                                     | #   | # DCI Status Value OJ QTY Property Description |                    |                                    |             |             |                   |   | 1     | Make/Model Serial Number DATA OMITTEE  FOR INFORMATION SECURITY |                |                |                           |  | A OMITTED<br>FOR<br>ORMATION        |  |     |         |  |
|  |   |  |                    |                                    |             |             |                   |   |       |   |                |                |                           |  |                                     |  |     | URPOSES |  |
| E -<br>R -   |   |  |                    |                                    |             |             |                   |   |       |   |                | ONLY THE FIRST |                           |  |                                     |  |     |         |  |
| T<br>Y   |   |  |                    |                                    |             |             |                   |   |       |   |                |                | TWELVE PROPERTY ITEMS ARE |  |                                     |  |     |         |  |
| -  |   |  |                    |                                    |             |             |                   |   |       |   |                |                |                           |  |                                     | DISPLAYED ON<br>P2C REPORTS  |     |         |  |
| -  | Numb  | er of V  | ehicles S          | Stolen 0                           | Nu          | mher Vehic  | cles Recovere     | d 0   |       |   |                |                |                           |  |                                     |  |     |         |  |
| ID   | Officer   |  |                    |                                    | )#          | oci veille  |                   | Officer Signature Supervisor Signature WILLIAMS, K. A. (15631)  |       |   |                |                |                           |  |                                     |  |     |         |  |
| Status   |   |  | Signatur           |                                    |             |             | ☐ Inact           | Case Status  ☐ Further Investigation ☐ Inactive ☐ Closed/Cleared  ☐ Closed/Cleared  ☐ Cleared by Arrest ☐ ☐ Cleared by Arrest |       |   |                |                |                           | cated Extradition Declined Refuse to Cooperate                             |                                     |  |     |         |  |
|  |   |  |                    |                                    |             |             | ☐ Closed          | /Leads  | Exha  | ısted   | Death o        | t Offe         | nder $\square$            | Prosec   | cution                              | Declined   | 1   | Page 1  |  |