I N	Agency Name WINSTON-SALEM POLICE									ICIDENT/INVESTIGATION						OCA 2440291			
C	ORI	NC			REPORT						Date / Time Reported SMTWTES Month Day Yr Time								
D E	NC NC 0340200 Crime Incident(s)									│ │ Att │ At Found │ SMTΨTFS						11 08 2024 10:53 Hrs.			
N T	#1	inic i	,	, Lost/stolen Lice.	ı —	Month Day Yr Time Month Day Yr									Time $00:00$ Hrs.				
D	#2	Crime I	ncident						_			Incident	+ 10	7.30	- 03		00 2024	Offense Tract	
A	A ☐ Com 3955 High Poin														alem 1			214	
T A	#3	Jillie I	ncident					☐ Att Premise Type ☐ Com								Victim Residence Type ☐ Single Family ☐ Multi Family			
МО			d or Com								Forcible Yes	X N/A	We	apon / Tools					
																Icohol Use:			
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow																		
V I		Victim/		-			uty Othe	er/Un	nknow	'n		ternal Victim of			Other Race	<u> </u>			
C T	T/1													rime # DOB / Age Ra			To Offender	☐ Resident	
I	` -		DA	ΓA OMITTED											☐ Non-Resident				
M	Home Address DATA OMIT									ГТЕО						Home Phone			
	Employer Name/Address DATA OMI															Business Phone			
1	VYR	Color	Color Lic/Lis Vin																
O T																			
Н																			
E R																			
S																			
I	DATA OMITTED																		
N																			
V O																			
L V																			
E D																			
Ъ																			
Status	S L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found																		
Codes	(Chec	k "OJ"	column	if recovered for other	r juri:	sdiction)							01500						
	#	DCI	Status	LICENSE DI	Property Description								ce/Mo		erial Number				
	38 LOST 1 LICE							CENSE PLATE 14 REZ6622 NC							NC INFI Q.	50	D/	ATA OMITTED FOR	
P - R		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1									INFORMATION								
																		SECURITY	
O P .																		PURPOSES	
E ·					_												10	NLY THE FIRST	
R T																		VE PROPERTY	
Υ .																		ITEMS ARE	
																		ISPLAYED ON	
-					\dashv												I	P2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Num	ıber Vehi	cles Recovere	d	0										
ID	Office		F (15	ID	#		Officer Sig	Officer Signature SOMERVILLE T. I. (16036)											
ID	ALLEN, S. E. (15310) Complainant Signature Case State															ERVILLE, T. J. (16036)			
States			_		☐ Furthe	r Inve	Investigation Unfounded Located						Ext	radition Declined					
Status	Inactive ☐ Closed/Cleared ☐ Closed/Leads Ex											Cleared	l by Aı	rest by Ander	other Ag	gency	. г	Page 1	