I N	Agenc	y Name		NSTON-SALE	M P	OLICE] IN	INCIDENT/INVESTIGATION REPORT							OCA 2440326						
C	ORI	NC	NC 034	10200						KEF	JKI				Time th	Reported				 IS	
D E	10		ncident(s			<u> </u>	_ A	# I	At Found	SI	1 T W	T ₹ S	11 Last	Knov			<i>14</i> М Т	me :59 н W т -	Irs. 		
N	#1								om	Month	Day Yr	. Т	'ıme			on Secure	r —	Time	e		
T .	<u> </u>	#2 Crime Incident							X Com 11 08 2024 14:59 H						11 08 2024 14:58 Hrs. Offense Tract						
D A	Com 485 Shepherd St, Winston-salem														2710	03		32			
T	#3	#3 Crime Incident													Victim Residence Type						
A	Com														_	Single F		уШМ	Iulti Fa	mily	
MO			d or Con MITTEI				Ye						Forcible Yes [T							
V																_					
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use: Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown															wn					
	T ☐ Religious ☐ L.E. Officer Line of Duty ☐ Other/Unknown ☐ Internal ☐ Unconscious ☐ Other Major ☐ N/A															,,,,,					
I	Victim/Business Name (Last, First, Middle) Victim of DOB / Age Race														ce Sex Relationship Resident Status					atus	
C T	V1		$D\Delta'$	ГА ОМІТТЕО							Crime #		26			To Offen			esident on-Res		
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ID	Office HAI		N. B A	1. (15721))#		Officer Sig	Officer Signature Supervisor Sign $DAY, T. A.$								ature (15478)					
ענו			Signatur				Case Status							1.12.(101/0)							
Status	Р						☐ Further ☐ Inact ☐ Closed ☐ X Closed	r Inves ive /Cleare	ed		☐ Unfour☐ Cleared☐ Cleared	ided l by Ai l by Ai	Test by And	Refuse other Ag	gency	ooperate			n Declin	ned	