| I N | Agenc | y Nam | | NSTON-SALE | POLICE | | INCIDENT/INVESTIGATION | | | | | | | OCA 2440336 | | | | |
|--|--|----------|-----------------------------|----------------------|--------|-----------------|---------------------------------|--|----------|----------------|-------------|--------|--|---|---|---------------------------------|-------------------------------|--|
| C I D E | ORI | | | | | OLICE | - | | | REP | ORT | | - | Date / Mont | Fime Re | ported | SMTWT⊒S Time | |
| | | | NC 034 | | | │ │ | | | | | | | 11 08 2024 16:13 Hrs. Last Known Secure Month Day Yr SM T W T F S | | | | | |
| Ν | #1 | | | , phernalia- Usi | no/ I | Eauinme | nt | Att | M | onth | Day Yr | | <u> </u> | | | Yr Yr | Time 16:12 Hrs | |
| T. D | #2 | Crime I | ncident | phermana ost | 18/ 1 | <u>aquipine</u> | | | | | of Incident | 4 10 | 0.15 1118 | <u>' 11</u> | 00 | 2024 | Offense Tract | |
| Α | □ Com 320 E Hanes Mill Rd, Winston | | | | | | | | | | | | | | | | 124 | |
| T A | #3 | Crime I | ncident | | | | | | remise I | уре | | | | | | ence Type nily ⊡Multi Family | | |
| МО | | | d or Con MITTEI | | | | | | | | | | Forcible | X N/A | Weapo | n / Tools | | |
| V I | | | | | | | | | | | | | | | Loss of Teeth Drug/Alcohol Use: | | | |
| | | | | | | | | | | | | | | | The Lacerations ☐ Yes ☐ Unknown ☐ Other Major ☑ No ☐ N/A | | | |
| | Victim/Business Name (Last, First, Middle) Victim of DOB / Age | | | | | | | | | | | | | | Sex Re | lationshi | p Resident Status | |
| C T | V1 | | DA | TA OMITTED | | | | | | | Crime # | | | | To | Offende | r □ Resident □ Non-Residen | |
| I M· | | | | - | | | | | | | 1, | | | | | | Unknown | |
| | Hom | e Addre | ess | | | D | ATA OMI | A OMITTED | | | | | | Home Phone | | | | |
| | Empl | oyer Na | ATA OMITTED | | | | | | | Business Phone | | | | | | | | |
| | VYR | M | Color | | Lic/L | is | | | Vin | | | | | | | | | |
| H E R S I N V O L V E D | DATA OMITTED | | | | | | | | | | | | | | | | | |
| Status | | | | | | | | | | | | | | | | | | |
| Codes | (Chec Victin | 1 | | if recovered for oth | | Í | | | | | | | | | | | | |
| - - - P - | # DCI Status Value OJ QTY 11 6 2 0 | | | | | | Property Description GLASS PIPE | | | | | | | Make | Model | | Serial Number | |
| | | | | | | | | | | | | | | | | | FOR | |
| | | | | | | | | | | | | | | | |] | NFORMATION | |
| R. | | | | | | | | | | | | | | | | | SECURITY PURPOSES | |
| O P · | | | | | | | | | | | | | | | | | PURPOSES | |
| E- R | | | | | | | | | | | | | | | | 0 | NLY THE FIRST | |
| Т | | | | | | | | | | | | | | | | TWE | LVE PROPERTY | |
| Y - | | | | | | | | | | | | | | | | | ITEMS ARE | |
| - | | | | | | | | | | | | | | | | | DISPLAYED ON | |
| - | | | | | | | | | | | | | | | | | P2C REPORTS | |
| - | Numt | ber of V | ehicles S | tolen 0 | Nu | mber Vehi | cles Recovere | d 0 | | | | | | | | | | |
| m | Office | | ~ c /1 | I | D# | | Officer Sig | - | | | | | Supervisor | Signatur | re (155) | 14) | | |
| ID | | | <i>G. S. (1</i> Signatur | | | | Case Status | Case Status Case Disposition: | | | | | | | (1551 | (4) | | |
| Status | r | | 0 | | | | □ Further □ Inact | □ Further Investigation □ Unfounded □ Lo | | | | | | Cated Extradition Declined Refuse to Cooperate | | | | |
| | | | | | | | | | | isted | | | | Prosecu | | clined | Page 1 | |