I N	Agency Name WINSTON-SALEM POLICE									CIDENT/INVESTIGATION REPORT						OCA 2440813				
C ·	ORI NC NC 0340200															Date / Time Reported SMIWTFS Month Day Yr Time				
D E	10		NC 034										11   12   2024  10:35 Hrs.							
N	#1	Jime I		) utobreaking An	d I d	arconv		_	Att Com	At Foun Month	Γ			T F S Time			Day Yr 🗀	Time		
Т.	#2	Crime I	ncident	uiobreaking An	и Д	irceny		_	Att	11 Location			7   10	):35  Hrs	11			10:34 Hrs. Offense Tract		
D A				Drug Viola	S												312			
T A	#3	Crime I	ncident						Att Com	Premise '	Тур	pe				- 1	Victim Resider	nce Type ly ∏Multi Family		
	How A	Attacke	d or Com	nmitted	Ш	Com					Forcible		_	apon / Tools						
МО	D.	ATA O	MITTEL	)									☐ Yes ☐ ☐ No	s XN/A						
	# of Victims   Type   None   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:																			
V	2			ciety  Governm ligious  L.E. Of		_	Financial Institution Institution		know		•	roken Bone		Severe		ations Yes Unknown Rajor No No				
I	Victim/Business Name (Last, First, Middle)   Victim of DOB / Age   1														Race		Relationship	Resident Status		
C T	VI DATA OMITTED											Crime #		28			To Offender	☐ Resident ☐ Non-Resident		
I M ·				TA OMITTED					1,			В	M	1ST	Unknown					
111	Home Address DATA OMIT									ГТЕО						Home Phone				
	Employer Name/Address DATA OMI															Business Phone				
	VYR   Make   Model   Style   Color								Lic/Lis					Vin						
O T H E R																				
S							DATA	<b>(</b>	ΟM	ITTE	ΞI	)								
N V O																				
L V E	L V																			
D																				
G	s L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found																			
Status Codes	(Chec	k "OJ"	column	if recovered for other	er jur	isdiction)	Z = Seized	В=	Burr	ied C=0	Cot	unterieit / F	orgea	F = Found	1					
	Victim # DCI Status Value OJ QTY									Property Description						e/Mo	del Se	rial Number		
_	1 77 7,5 6 OTHER														AISC		DA	TA OMITTED		
P -	1	77	5			6	OTHER							/	AISC		IN	FOR FORMATION		
					$\dashv$													SECURITY		
R O					$\dashv$													PURPOSES		
Р <sup>-</sup> Е -																				
R																		ILY THE FIRST		
Т Ү -					_													VE PROPERTY		
٠.																		ITEMS ARE ISPLAYED ON		
-																		2C REPORTS		
-																				
			ehicles S	-		mber Veh	icles Recovere		0											
ID	Office: RAY	r , C. B	2. (1635	(6)	Officer Sig							Supervisor LEACH	or Signature CH, J. M. (15710)							
	Complainant Signature Case State									Case Disposition:										
Status	Closed												by A	rrest by Ano	Refuse ther Ag	gency	ooperate	radition Declined		
							☐ Closed	/Lea	ds Ex	hausted	1	□ Death o	f Offe	nder 🗆	Prosec	uition	Declined	Page 1		