I N	Agency Name WINSTON-SALEM POLICE								NCIDENT/INVESTIGATION						OCA 2440900				
C I	ORI	NC					1	REPORT							Date / Time Reported SMIWTFS Month Day Yr Time				
D E	NC NC 0340200  Crime Incident(s)									☐ Att At Found SMIWTFS Month Day Yr Time						$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
N T	#1			, Driving While I	тро	aired		_	Com	Month 11	D			ime 1:43   Hrs			12   2024	Time	
D	#2	Crime I	ncident		1				Att	Location	of	Incident						Offense Tract	
A T	Crime Incident Com 426 Jonestown Rd, Winston-salen																Victim Reside	324	
A	#3	JIIIIC I	ncident				☐ Att Premise Type ☐ Com								☐ Single Family ☐ Multi Family				
МО			d or Com										Forcible Yes	X N/A	We	apon / Tools			
	# of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Us															lcohol Use:			
	Society																es Unknown		
V I		Victim		igious  L.E. Off Name (Last, First,			uty   Othe	er/Un	ıknow	n 🗆	_				Other Race	<u> </u>		N/A Resident Status	
C T	V1	v ictiii/			iie)			Victim of Crime # DOB / Age				Race	sex	To Offender	☐ Resident				
I	DATA OMITTED											1,						☐ Non-Resident	
M	Home Address DATA OMIT									 ГТЕD						Home Phone			
	Employer Name/Address DATA OMI															Business Phone			
,	VYR	Color Lic/Lis Vin						Vin											
О																			
T H																			
E																			
	DATA OMITTED																		
I N	I N V																		
V																			
O L																			
V E																			
D																			
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column	R = Recovered if recovered for other	D = er jur	Damaged isdiction)	Z = Seized	B =	Burn	C = 0	Cou	ınterfeit / F	orged	F = Foun	d				
	Victim #	DCI	Status	Value	Property Description								Mal	ce/Mo	odel Se	erial Number			
		ED CARD								SANDI	SK/U	ltra DA	ATA OMITTED						
P -					$\dashv$												IN	FOR FORMATION	
					$\dashv$												IIV	SECURITY	
R O					$\dashv$	+												PURPOSES	
P :																			
R																		ILY THE FIRST	
Т Ү.					_												TWEL	VE PROPERTY	
																	D	ITEMS ARE ISPLAYED ON	
-						+												2C REPORTS	
			ehicles S	-		mber Veh	cles Recovere		0					C	C:				
ID	Office SNII	r D <u>E</u> R, .	A. P. (1	ID (6152)	Officer Sig	natuı	re					Supervisor $(0)$	or Signature						
	Complainant Signature Case State									Case Disposition:									
Status					tive	Investigation ☐ Unfounded ☐ Lo						cated Extradition Declined Refuse to Cooperate							
	□ Closed/Cleared □ Closed/Leads Exhauste											Cleared by Arrest by Another Agency  Death of Offender  Page 1							