I N	Agenc	y Name		NSTON-SALEN	IN	INCIDENT/INVESTIGATION							OCA 2441028						
C I	ORI	NC					1	REPORT							Date / Time Reported S M T W T F S Month Day Yr Time				
D E	NC NC 0340200 Crime Incident(s)									☐ Att At Found SMT₩TFS Month Day Yr Time						$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
N T	#1		, Trespassi	ı —	Com	Month	ı I			Time 5:05 Hrs			Day Yr	Time $16:04$ Hrs.					
D	#2	Crime I	ncident	*		- 1	Location	on of	f Incident	·	•		_		Offense Tract				
A T		Crime I	ncident				_	Com 1420 Bethania-rural Hall Rd, V Att Premise Type						Vinston-salem NC 123 Victim Residence Type					
A	#3								Com			Γ.				- 1		ily □Multi Family	
МО			d or Con MITTEI											Forcible Yes	X N/A	We	apon / Tools		
	# of Victims Type No Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															Alcohol Use:			
	2 Society Government Financial Institute Broken Bones Severe Lacerations Unknown Internal Unconscious Other Major															_			
V I		Victim/		Name (Last, First,			иту 🔲 Оппе	21/ () 11	IKIIOW	11 [In	Victim of		B / Age	Race			Resident Status	
C T	V1		DA	ΓΑ OMITTED					Crime #		68			To Offender					
I M									1,			В	M		Unknown				
	Home	Addre	ess		ΓΤΕD							Home Phone							
•	Employer Name/Address DATA OMI									TTED						Busi	Business Phone		
,	VYR	M	ake	Model	St	tyle	Color		Lic	c/Lis				Vin					
T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column	R = Recovered for other	D = er jur	Damaged risdiction)	Z = Seized	В =	Burn	ed C=	Co	unterfeit / F	Forged	F = Found	d				
	Victim # DCI Status Value OJ QTY							Pro	perty	Descrip	tion				Mal	ce/Mo	odel S	erial Number	
- - P - R													D.	ATA OMITTED					
				+													I	FOR NFORMATION	
																		SECURITY	
O P -																		PURPOSES	
E ·																	0	NLY THE FIRST	
R T Y																		VE PROPERTY	
																		ITEMS ARE	
																		ISPLAYED ON	
																		P2C REPORTS	
-	Numh	er of V	ehicles S	tolen 0	Nııı	mber Vehi	cles Recovere	d	0										
	Office	r		ID		/ Cill	Officer Sig		-					Supervisor			M B /151	(0)	
ID			<i>MA YA</i> , Signatur	M. N. (16381)			Case Status						GEOG	GEOGHĒGAN, M. R. (16168)					
Status	Comp	t	~1511utuI1	-			☐ Further ☐ Inact ☐ Closed ☐ Closed	r Inve tive /Clea	ared			☐ Unfoun ☐ Cleared ☐ Cleared	ded by Ai by Ai	Locarrest	Refuse ther Ag	gency	ooperate	Page 1	