I N	Agenc	y Name		NSTON-SALE	M P	OLICE	IN	INCIDENT/INVESTIGATION							OCA 2441134					
C	ORI	NC	NC 034	40200			1			REPO)K I		-	Date / Mon	Time th	Reported Day Y		¶T W <u>∓</u> F		
D E	17						1	At		A . E 1	I cl x	d 다니 wi	메디어	11		14 20		Time 14:49 Hi		
N	#1	Crime Incident(s)							I 1	At Found Month	Day Yr	Т	∓FS ime			n Secure Day Yr	Ч Т.	ime	_	
T	Crimo Insident							☐ X Com 11 14 2024 14:49 F						Hrs 11 14 2024 14:48 Hrs. Offense Tract						
D A	#2	crime r	neraem				Com 2800 Lowery St, Winston-sal													
T	#3 Crime Incident													Victim Residence Type						
A	Com														☐ Single Family ☐ Multi Family					
МО	How Attacked or Committed DATA OMITTED Forcible Yes XN/A															apon / Too	s			
	DATA OMITTED																			
V	# of V	ictims	Type	☑ Person	_	Business				Injury	None	$\square M$	_	Loss o		1 -		nol Use:		
	1 Society Government Financial Institute Broken Bones Severe Lacerations White Major William Internal Unconscious Other Major No N/A															√n				
V I		Victim/		Name (Last, First,			uty 🔲 Out	JI/ CIIKI	IOWII	<u> </u>	Victim of		B / Age		e Sex Relationship Resident Status				tus	
C T	V1					,					Crime #		41			To Offend	er 🔯	Resident		
I			DA	TA OMITTED							1,			W	M	1ST] Non-Resid Unknown		
M	Home	e Addre	ess				ATA OMI	CTED							Home Phone					
	F1	N	/A 11				ATA OMI													
	Emple	oyer Na	me/Add	ress		D	ATA OMITTED							Business Phone						
,	VYR Make Model Style						Color Lic/Lis Vin						Vin						\neg	
																			\dashv	
H E R S I N V O L V E D	DATA OMITTED																			
Status Codes				R = Recovered if recovered for oth			Z = Seized	B = B	urnec	1 C = C	ounterfeit / F	orged	F = Found	d						
	Victim		Status	Value		QTY	Property Description							Make/Model Serial Number					\dashv	
	"							M PRODUCTS						IVIAK	DATA OMITT				$\overline{\mathbf{D}}$	
P · R								2010 WHI , THB7175 NC							D F150 FOR				-	
											INFORMATION									
																		CURITY		
O P .																	PU	RPOSES	_	
E ·																	ONT 1	Z THE FID		
R.																		THE FIRS		
T Y																1 W		EMS ARE	. Y	
																		LAYED O	$\frac{1}{N}$	
																		REPORTS		
•																				
-	Numb	er of V	ehicles S	tolen 0	Nu	mber Veh	cles Recovere	d 0												
ID	Officer ID# Officer Signature Supervisor Signature GORDON, B. S. (15106)													Signati	ature					
ID			<i>N, B. S.</i> Signatur				Case Status								OOŇ, J. G. (15435)					
Status	Comp	таннапс	əigiiätüf				☐ Further ☐ Inact ☐ Closed ☐ Closed	Investive /Cleare	d	on	☐ Unfoun☐ Cleared☐ Cleared	ded by Ai by Ai	Locarrest rest by Anorder	Refuse other Ag	gency	ooperate		tion Declin Page 1	ed	

DCI-600F