I N	Agenc	y Namo		NSTON-SALE	OLICE	IN	DEPORT								OCA 2441297						
C	ORI	NC	NC 034	10200	1			KEP	Oi	KI			Date / Mon	Time th	e Reporte Day	d S Yr			∄ S		
D E								I	At Found	d	LsLv	d Tlw	TI-FIS	11	Knov	15 20 Inown Secure n Day Yr		<i>18</i> M T	ime :37 г Гигт	Hrs. ∳S	
N	#1	Crime Incident(s) Shoplifting								Month	Da			T≢S ime				r —	Time	e	
T	Colors Institute												3:3/ Hrs	Hrs 11 15 2024 18:36 Hrs. Offense Tract							
D A	#2 Crime incident												King Jr D	r Dr, Winston-salem 221							
T	#3	Crime Incident											Victim Residence Type								
A	☐ Com															☐ Single Family ☐ Multi Family					ımily
MO	How Attacked or Committed DATA OMITTED Forcible ☐ Yes ☒ N/A															We	eapon / To	ools			
	No																				
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use: Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown															NVn					
V	1															WII					
I	Victim/Business Name (Last, First, Middle) Victim of DOB / Age Race Se																ex Relationship Resident Status				atus
C T	V1		$D\Lambda'$	ГА ОМІТТЕО							1	Crime #					To Offe	nder		esiden on-Res	
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,	Employer Name/Address DATA OMITT															Business Phone					_
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T H E R S I N V O L V E D	DATA OMITTED																				
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ID	Office		GAN	ID P. D. (16071))#		Officer Sig	nature						Supervisor	Signat	ire	56021				
ID	GEOGHEGAN, P. D. (16071) Complainant Signature Case Status Case Disposition:												ட், D. I	1. (<i>1</i>	JUU2)				-		
Status	Comp	-minuit	<u>-</u>	-			☐ Further ☐ Closed ☐ Closed	r Investive /Clear	ed] [] []	☐ Unfoun ☐ Cleared ☐ Cleared	ded by Ar by Ar	Test by Andred] Refuse other Ag	gency	Cooperate	_		n Decli	ned

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