| I<br>N  | Agency  | y Name          | e WIM              | in in                                | INCIDENT/INVESTIGATION |                        |                                     |                |            |  |   |                              | OCA 2441357           |                                       |                    |                                |   |        |                          |  |  |
|---|---|-----------------|--------------------|--------------------------------------|------------------------|------------------------|-------------------------------------|----------------|------------|--|---|------------------------------|-----------------------|---------------------------------------|--------------------|--------------------------------|---|--------|--------------------------|--|--|
| C   | ORI   | NC              | NC 03/             | 10200                                |                        |                        |                                     | REPORT         |            |  |   |                              |                       |                                       |                    | Date / Time Reported SMTWTFS   |   |        |                          |  |  |
| D<br>E  | NC NC 0340200 Crime Incident(s)   |                 |                    |                                      |                        |                        |                                     |                |            | Att At Found SMTWTFS Month Day Yr Time |   |                              |                       |                                       |                    |                                | In the Day IF Time  In the Day IF Time  In the Day IF Time  Last Known Secure S M T W T F S  Month Day Yr  Time |        |                          |  |  |
| N<br>T  | #1  |                 |                    | Larceny- All                         | Oth                    | ier                    |                                     | ı —            | Com        | Month 11                               |   |                              |                       | ime<br>:19  Hrs                       |                    |                                |   |        | Time<br>09:18  Hrs.      |  |  |
| D   | #2  | Crime I         | ncident            | Automobile                           | The                    | ı.f.                   |                                     |                | Att<br>Com | Location                               |   |                              | D A                   | Winston-                              | salam              | NC                             | 2710  |        | Offense Tract 113        |  |  |
| A<br>T  | #3 0  | rime I          | ncident            | Automobile                           | The                    | :Ji                    |                                     |                | _          | Premise 7                              |   |                              | ) Ka,                 | winsion-                              | satem              |                                |   |        | ce Type                  |  |  |
| A   |   | 1               | 1 0                | * 1                                  |                        |                        |                                     |                | Com        |  |   |                              |                       | г 11                                  | -                  | =                              |   |        | y □Multi Family          |  |  |
| МО  |   |                 | d or Con<br>MITTEI |                                      |                        |                        |                                     |                |            |  |   |                              |                       | Forcible  Yes  No                     | X N/A              | wea                            | apon / '  | I oois |                          |  |  |
| V<br>I<br>C   | # of V  | ictims          | Туре               | N Person                             | _                      | Business               |                                     |                |            | Injury                                 |   | □ None                       |                       | · · · · · · · · · · · · · · · · · · · | Loss o             |                                |   | -      | cohol Use:               |  |  |
|   | 2   |                 | . –                | ciety 🔲 Governm<br>ligious 🔲 L.E. Of |                        | _                      | Financial Instit<br>Outy   Othe     |                | know       | . –                                    |   | oken Bone<br>ernal 🔲         |                       | Severe                                | Lacerar<br>Other   | ations Yes Unknown Rajor No No |   |        |                          |  |  |
|   | Victim/Business Name (Last, First, Middle)   Victim of   DOB / Age  |                 |                    |                                      |                        |                        |                                     |                |            |  |   |                              |                       |                                       | Race               | Sex                            | Relation To Off   | onship | Resident Status Resident |  |  |
| T<br>I  | V1  |                 | DA                 | ΓΑ OMITTED                           |                        |                        |                                     |                | 1,2        |  | 39  | $\mid W \mid$                | $_{F}$                | 10 01                                 | ender              | ☐ Non-Residen                  |   |        |                          |  |  |
| M   | Home  | Addre           | ss                 |                                      |                        |                        |                                     |                |            |  |   |                              |                       | ne Phor                               | ne                 | Unknown                        |   |        |                          |  |  |
|   | DATA OMI  |                 |                    |                                      |                        |                        |                                     |                |            |  |   |                              |                       |                                       |                    | D ' N                          |   |        |                          |  |  |
|   | •   |                 | Model              | DATA OMI                             |                        |                        |                                     |                |            | Business Phone                         |   |                              |                       |                                       |                    |                                |   |        |                          |  |  |
|   | VYR   | ake             | Color              |                                      | Lic                    | :/Lis                  |                                     |                |            | Vin                                    |   |                              |                       |                                       |                    |                                |   |        |                          |  |  |
| T<br>H<br>E<br>R<br>S<br>I<br>N<br>V<br>O<br>L<br>V<br>E<br>D | DATA OMITTED  |                 |                    |                                      |                        |                        |                                     |                |            |  |   |                              |                       |                                       |                    |                                |   |        |                          |  |  |
| Status<br>Codes   | L = Lo<br>(Checl  | ost S<br>k "OJ" | = Stolen<br>column | R = Recovered if recovered for oth   | D =<br>er ju           | Damaged<br>risdiction) | Z = Seized                          | B =            | Burn       | ed $C = 0$                             | Cour                                      | nterfeit / F                 | orged                 | F = Found                             | d                  |                                |   |        |                          |  |  |
| -<br>-<br>P -<br>R  | Victim<br>#   | DCI             | Status             | Value                                | QTY                    |                        | Property Description                |                |            |  |   |                              |                       | Make/Model Serial Number              |                    |                                |   |        |                          |  |  |
|   | 74 7 1 DASH CAMERA  |                 |                    |                                      |                        |                        |                                     |                | 1          |  |   |                              |                       |                                       |                    | TOZON/Digital DATA OMITTED     |   |        |                          |  |  |
|   | 1         16         7         1         BLENDER           2         SUV         7         1         2013 ONG, LDY1285 NC |                 |                    |                                      |                        |                        |                                     |                |            |  | PRINCESS FOR  YEAR Liens: Pag INFORMATION |                              |                       |                                       |                    |                                |   |        |                          |  |  |
|   | 2   | SUV             |                    |                                      |                        |                        | 2013 ONG ,                          |                |            |  |   |                              |                       |                                       |                    |                                | Pag   |        | SECURITY                 |  |  |
| O .   |   |                 |                    |                                      |                        |                        |                                     |                |            |  |   |                              |                       |                                       |                    |                                |   |        | PURPOSES                 |  |  |
| Ē.  |   |                 |                    |                                      |                        |                        |                                     |                |            |  |   |                              |                       |                                       |                    |                                |   | ON     | LY THE FIRST             |  |  |
| R<br>T<br>Y   |   |                 |                    |                                      |                        |                        |                                     |                |            |  |   |                              |                       |                                       |                    |                                |   |        | VE PROPERTY              |  |  |
|   |   |                 |                    |                                      |                        |                        |                                     |                |            |  |   |                              | ITEMS ARE             |                                       |                    |                                |   |        |                          |  |  |
|   |   |                 |                    |                                      |                        |                        |                                     |                |            |  |   |                              |                       |                                       |                    |                                |   |        | SPLAYED ON               |  |  |
| -   |   |                 |                    |                                      |                        |                        |                                     |                |            |  |   |                              |                       |                                       |                    |                                |   | P2     | 2C REPORTS               |  |  |
| •   | Numbe   | er of V         | ehicles S          | tolen 1                              | Nu                     | mber Veh               | icles Recovere                      | d              | 1          |  |   |                              |                       |                                       |                    |                                |   |        |                          |  |  |
| ID  | Officer   |                 | ZNDEZ              | II<br>, F. C. (16378)                | <b>)</b> #             |                        | Officer Sig                         | natur          | re         |  |   |                              |                       | Supervisor                            |                    |                                | 5100  | )      |                          |  |  |
| ID  |   |                 | Signatur           |                                      |                        |                        | Case Statu                          |                |            |  |   |                              |                       |                                       | (IN, K. L. (15100) |                                |   |        |                          |  |  |
| Status  | *   |                 | -                  |                                      |                        |                        | ☐ Further ☐ Inact ☐ Closed ☐ Closed | tive<br>l/Clea | ared       |  |   | Unfoun<br>Cleared<br>Cleared | ded<br>by Aı<br>by Aı | Test by Ano                           | Refuse<br>other Ag | gency                          | oopera  | te     | Page 1                   |  |  |