I N	Agency Name WINSTON-SALEM POLICE								NCIDENT/INVESTIGATION							OCA 2441814						
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МО	How Attacked or Committed DATA OMITTED							Forcible						Forcible Yes								
V	# of Victims Type Person X Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															e:						
	Society Government Financial Institute Broken Bones Severe Lacer																					
V I		Victim/		Name (Last, First,			иту 🔲 Опп	ei/Ulik	diowii			ternal <u></u> Victim of		S / Age	-	er Major No N/A el Sex Relationship Resident Status						
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