I N	Agenc	y Name		NSTON-SALEN	CIDENT/INVESTIGATION						OCA 2442992								
C	ORI	NC				02102		REPORT						Date / Time Reported SMTWTFS Month Day Yr Time					
D E			NC 034												11				
N T	#1) Assault-non Agg	erav	vated Ass	sault	ı —	Com	Month	Γ			ime 3:53 Hrs	1		28 2024	Time	
D .	#2		ncident	15541111 11011 1188	5,,,,,	1150	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		\rightarrow			Incident	+ 25	5.55 1115	11		2024	Offense Tract	
A	□ Com 774 Pecan Ridge Cr, Winston-sale.																	214	
T A	#3	rime i	ncident						Att Com	Premise	тур	pe				- 1	Victim Reside Single Fam	ence Type ily ∏Multi Family	
МО			d or Com											Forcible	Weapon / Tools				
WO	No No																		
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use: Broken Bones Severe Lacerations Yes Unknown																		
V	3		Rel	igious 🔲 L.E. Off	ficer	Line of Du			know	. –	-	ternal			Cacera Other			_	
I C		Victim/	Business	Name (Last, First,						Victim of Crime #	DOI	3 / Age 19	Race	Sex	Relationship To Offender				
T I	V1		DA	TA OMITTED					<i>1</i> ,		19	$\mid_{B}\mid$	$_F$	1AQ	☐ Non-Resident				
M	Home	Addre	ss			_			1,					ne Phone	Unknown				
	DATA OMI															Business Phone			
	DATAOMI															Business Filone			
	VYR	M	ake	Model	St	yle	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 i	R = Recovered for other	D = er jur	Damaged isdiction)	Z = Seized	B =	Burn	C = 0	Cot	ınterfeit / F	orged	F = Found	d				
	Victim # DCI Status Value OJ QTY						Property Description							Mak	ce/Mo	del S	erial Number		
- - P - R													D.	ATA OMITTED					
																	I	FOR NFORMATION	
																		SECURITY	
O p -																		PURPOSES	
E -					_												0	NI V THE EIDST	
R T																		NLY THE FIRST LVE PROPERTY	
Y ·																	1 11 12	ITEMS ARE	
																	Γ	ISPLAYED ON	
•																		P2C REPORTS	
-					\Box		1 5	1											
	Numb		ehicles S	tolen 0		mber Vehi	cles Recovere Officer Sig		e e				1	Supervisor	Signati	ure			
ID	MAI	RIN-S	ALINAS		MITCHELL, J. R. (15672)														
	Comp	lainant	Signatur	e	Case Status X Further		estiga	tion		Case Dispos		☐ Loca	ated		□ Fv	radition Declined			
Status							☐ Inact	ive /Clea	ared			☐ Cleared	by A	rrest by Ano	Refuse ther Ag	gency	ooperate	Page 1	