I N	Agenc	y Namo		NSTON-SALEN	CIE	CIDENT/INVESTIGATION						OCA 2443892								
I C	ORI	NC	NC 034	10200	1		REPORT						Date / Time Reported SMTWTFS Month Day Yr Time							
D E	10		ncident(s			1	☐ Att   At Found						TI-FISI	12   06   2024   08:39   Last Known Secure   S M T W T						
N T	#1			ning Money By	ı —										Time					
D.	#2	Crime I	ncident						-	Location	of I	ncident	•					Offense Tract		
A T	Com 625 W Sixth St, Winston-salem NC																/ictim Reside	111		
A	#3	Jillie I	ncident				Com	Tiennse	Турс					- 1		ly □Multi Family				
МО			d or Com								Forcible  Yes  No	X N/A	We	apon / Tools						
	# of V	ictims	Туре	∏ Person	П	Business				Injury	у г	☐ None			Loss o	f Tee	th Drug/A	lcohol Use:		
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow															_				
V I		Victim/		Name (Last, First,			uty   Otne	er/Un	Know	n		rnal   rictim of		scious B / Age	Race		r   ⊠ No Relationship			
C T	V1		DAT	ΓΑ OMITTED					C	Crime #		62			To Offender					
I M ·																F	1RU	Unknown		
141	Home	Addre	ess		ГТЕО							Home Phone								
	Employer Name/Address DATA OMI									TTED					Business Phone					
	VYR Make Model Style Colo								Lic	:/Lis				Vin						
T H E R S I N V O L V E D	DATA OMITTED																			
Status Codes	L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found (Check "OJ" column if recovered for other jurisdiction)																			
	Victim #		Property Description								e/Mo	del S	erial Number							
	1																DA	ATA OMITTED		
P - R																	IN	FOR NFORMATION		
																		SECURITY		
0																		PURPOSES		
Р <sup>-</sup> Е -																				
R T																		VE PROPERTY		
Y ·						+											1 44 121	ITEMS ARE		
-																	D	ISPLAYED ON		
																	I	P2C REPORTS		
-	<b>N</b> T -			1 2		1 777		1	^											
	Numb Office		ehicles S	tolen 0		mber Vehi	Cles Recovered Officer Sig		<i>0</i>				Ī	Supervisor	Signati	ıre				
ID	RICHARDSON, S. G. (15580)								<u> MATT</u>								ISON, G. M. (15167)			
	Comp	lainant	Signature	e	Case Status	r Inve	estigat	tion		se Dispos Unfoun	ded	☐ Loca	ited		□ Ext	radition Declined				
Status							☐ Closed	/Clea		nausted			by Aı	rest	Refuse ther Ag	gency	ooperate	Page 1		