I N	Agency Name WINSTON-SALEM POLICE									CIDENT/INVESTIGATION						OCA 2443951				
C I	ORI	NC			REPORT							Date / Time Reported S M T W 기里 S Month Day Yr Time								
D E	NC NC 0340200 Crime Incident(s)									│ Att │ At Found │ SMTWT里S │ Month Day Yr Time							12 06 2024 77:29 Hrs. Last Known Secure SMTWTFS			
N T	#1			, Drug Viola	tion	S		_	Com	Month 12	D			ime 7:29 Hrs				Time 17:28 Hrs.		
D	#2	Crime I	ncident							Location	n of	Incident	•		•			Offense Tract		
A T		Trimo I	Para ncident	phernalia- Usin	nt	_	☐ Att Premise Type						n-sale	Victim Residence Type						
A	#3	Jiiiie i	ncident						Com	Tremise	туţ							ily □Multi Family		
МО			d or Com					Forcible Yes						Weapon / Tools						
		ictims	l			. ·				Injur	37			□ No	77	£ T	41. Drug/A	Alcohol Use:		
		icuins	IX So	☐ Person ciety ☐ Governm	ent		inancial Instit			_	-	□ None oken Bone	s \square N	inor ∟	Loss o Lacera		-	es Unknown		
V	$\frac{I}{I}$			igious L.E. Of			uty 🔲 Othe	er/Un	know	'n _		ternal		scious [Other	Majo				
C		V ictim/		Name (Last, First,	ale)				Victim of Crime #				3 / Age	Race	Sex	Relationship To Offender	☐ Resident			
T I	V1		DA	ΓA OMITTED								1,2,						□ Non-Resident □ Unknown		
M	Home Address DATA OMIT															Home Phone				
	Employer Name/Address DATA OMI														Business Phone					
	VYR Make Model Style Color									Lic/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	R = Recovered if recovered for other	D = er jur	Damaged isdiction)	Z = Seized	B =	Burn	ied C=	Cou	ınterfeit / F	Forged	F = Foun	d					
	Victim #	DCI	Status	Value	Property Description								Mak	e/Mo	odel S	erial Number				
- - P -									ERNALIA								D.	ATA OMITTED		
																	T	FOR NFORMATION		
					-												11	SECURITY		
R O																		PURPOSES		
P :																				
R																		NLY THE FIRST		
T Y																	TWE	LVE PROPERTY		
					-												Г	ITEMS ARE ISPLAYED ON		
-						-+								+				P2C REPORTS		
			ehicles S	-		mber Vehi	cles Recovere		0					g :	G.					
ID	Office TAY	r <i>LOR</i> ,	J. C. (1	ID (16205)	#		Officer Sig	natur	re			Supervisor CLAR			Signature K, D. C. (15090)					
	Complainant Signature Case State									Case Disposition:							ĺ	100 5 11 1		
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	tive /Clea	ared				by A	Loc rest rest by Ander] Refuse other Ag	gency	ooperate	Page 1		