I N	Agenc	y Name		STON-SALEN	CIDENT/INVESTIGATION						OCA 2443987									
C .	C REPORT														Date /	Time	Reported	l S Yr		<u> </u>
D E	10		ncident(s					□ Att   At Found     S M T W T F S							12   06   2024   23:24 Hrs.					
N T	#1			, Drug Violat	ion.	s	ı —	Tr. Camel								n Day Yr Time				
D.	#2	Crime I	ncident	0	Location	tion of Incident Offense Trac														
A T	Com 201 N Church St, Winston-salem NC  H 3 Crime Incident																01 Victim Re	siden	411	
A	#3	orinic I	nerdent			Com							☐ Single Family ☐ Multi Family							
МО			d or Com MITTED			Forcible ☐ Yes ☐ No						Weapon / Tools								
	# of V	ictims	Type	☐ Person	ΠЛ	Business				Injury		None			Loss o	f Tee	th Dru	ıg/Ald	cohol Us	se:
	Society																			
V I		Victim/		Name (Last, First,			шіу 🔲 Опіс	21/ U11	KIIOW	<sup>11</sup>	_	rnal ictim of		S / Age	+	Sex Relationship Resident Status				
C T	V1 DATA OMITTED																To Offen	der	□ Resi	ident -Resident
I M ·				TA OMITTED							1	1,							☐ Unk	
	Home Address DATA OMIT									ГТЕD						Home Phone				
	Employer Name/Address DATA OMI									 ITED						Business Phone				
	VYR	Color		Lic	c/Lis				Vin											
T H E R S I N V O L V E D	DATA OMITTED																			
Status Codes																				
	Victim #			Property Description								Mak	ake/Model Serial Number				ber			
	# DCI Status Value OJ QTY Property D								Description					DATA OMITTED				ITTED		
- P - R																		INII	FOR FORMA	
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Р <sup>-</sup> Е -																				
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	Numb		ehicles S	tolen 0		nber Vehi	cles Recovere		0 e				ı	Supervisor	Signati	ıre				
ID	MO	NTGC		, A. E. (16371)		Officer Signature Supervisor Signature CROKE, B. K. (156									5602)					
Status	Comp	lainant	Signatur	2									Test Loc	Refuse	to C	ooperate	Extra	dition D	Declined	
							☐ Closed			hausted				rest by And nder				ιГ	Page	e 1