I N	Agenc	y Name		STON-SALEN	1 P	OLICE] IN	CIDENT/INVESTIGATION					OCA 2444134						
C ·	ORI	NG				1	REPORT					Date / Time Reported SMTWTFS Month Day Yr Time							
D E	NC NC 0340200 Crime Incident(s)									Att At Found SMTWTFS Month Day Yr Time						12 08 2024 15:09 Hrs.			
N T	#1 Simple Assault-non Aggravated Assault									Month 12			Time 15:09 Hr			Day Yr 🗕	Time $15:08$ Hrs.		
D .	#2		ncident	15541111 11011 1188	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Com Att	Location			13.09	3 12	(Offense Tract		
A	Com 774 E Clemmonsville Rd, Winston-s																212		
T A	#3	rime i	ncident					☐ Att Premise Type ☐ Com						Victim Residence Type ☐ Single Family ☐ Multi Family					
МО			d or Com					Forcible Yes					Weapon / Tools						
	# of V	ictims	Туре	▼ Person		Rucinece				Injury	LALV.	one 🗆	Minor F	TLoss o	of Tee	th Drug/Al	cohol Use:		
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown															s Unknown			
V I		Victim/		igious L.E. Off Name (Last, First,			ity Othe	er/Un	know	n 🗆	Internal Victin		onscious [OB / Age			r 🔯 No Relationship	□N/A Resident Status		
C T	V1	v ictiii/							Crime		20 Z	Race	SCA	To Offender	Resident Resident				
I	DATA OMITTED													W	F	10K	☐ Non-Resident ☐ Unknown		
М -	Home Address DATA OMIT									TTED .					Home Phone				
	Employer Name/Address DATA OMI													Business Phone					
	VYR	Color Lic/Lis V						Vin											
									1										
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T H																			
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I N	DATA OMITTED																		
V	I																		
O L																			
V E																			
D																			
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column i	R = Recovered f recovered for other	D = I er juri	Damaged isdiction)	Z = Seized	B =	Burn	ed $C = C$	Counterfe	eit / Forg	ed $F = Four$	ıd					
	Victim # DCI Status Value OJ QTY						Property Description							Mal	ce/Mo	odel Se	rial Number		
- - P -		"						Transfer from the contract of								DA	TA OMITTED		
																TNI	FOR		
					-												FORMATION SECURITY		
R O					_												PURPOSES		
Р ⁻ Е -																			
R																	LY THE FIRST		
Т Ү -					_												VE PROPERTY		
٠.																	ITEMS ARE SPLAYED ON		
-																	2C REPORTS		
-																			
			ehicles S			nber Vehi	cles Recovere		0				l c	. C:					
ID	Officer ID# Office RUSSELL, G. H. (15035)															or Signature <i>Y, C. M. (15037)</i>			
	Complainant Signature Case State									tion		ispositio	n:	entad			adition Dealined		
Status	X Inac									Investigation ☐ Unfounded ☐ Locate ive ☐ Cleared by Arrest ☐ R					e to C	ooperate	adition Declined		
							☐ Closed			nausted			Arrest by An				Page 1		