I N	Agenc	y Name		NSTON-SALEN	. IN	INCIDENT/INVESTIGATION REPORT								OCA 2444342						
C	ORI	NG			1									Date / Time Reported SMIWTFS Month Day Yr Time						
D E			NC 034			☐ Att								$\begin{array}{c ccccccccccccccccccccccccccccccccccc$						
N T	#1	Jimic I	neideni(s	, Found Prop	ertv	,		_	Com	Month	ı I				ime 56 Hrs				Yr —	Time 11:55 Hrs.
D D	#2	Crime I	ncident	1 ound 1 rop	,,,,				_			Incider		11.	30 1113	12		10		Offense Tract
A	Com 199 E Second St/n Church St, W															Vinsto	ton-salem NC 411 Victim Residence Type			
T A	#3	rime i	ncident						Att Com	Premise	e ry	pe								ice Type y ∏Multi Family
МО			d or Com						Forcible						Forcible					
MO	DATA OMITTED See No.															A IN/A				
V	# of Victims Type																			
	0			igious L.E. Of					know	-	_	iternal				Lacerat Other		or	□ No	_
I C	Victim/Business Name (Last, First, Middle) Victim of Crime #														/ Age	Race	Sex		ionship ffender	Resident Status Resident
T I	VI DATA OMITTED																	100	richaei	☐ Non-Residen
M	Home	Addre	ess										Home Phone Unknown							
	DATA OMľ								TTED											
	Employer Name/Address DATA OM								ÍTTED							Business Phone				
,	VYR	M	ake	Model	Sty	/le	Color		Lic	:/Lis					Vin					
T H E R S I N V O L V E D	DATA OMITTED																			
Status Codes																				
Cours	Victim		Status	Value		Property Description								Make/Model Serial Number						
							380) FIREARMS/AMMUNITION								3	380 AU				TA OMITTED
P - R - O P - E - R - T Y -																				FOR
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-					\dashv															2C REPORTS
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			ehicles S	tolen 0		nber Vehi	cles Recovere		0							a:				
ID	Office: REN	r <i>IDLE l</i>	Officer Sig	Officer Signature Supervisor Signature WAGONER, S. D. (15802)																
	Comp		Case Statu	S Case Disposition:																
Status							☐ Further ☐ Inact ☐ Closed	tive l/Clea	ared				ared by ared by	Arr Arr	est Loca est by Ano der	Refuse ther Ag	ency	coopera	ate	Page 1