| I N | Agenc | y Name | | NSTON-SALEN | Л Р | OLICE | IN | NCIDENT/INVESTIGATION | | | | | | OCA 2444437 | | | | | |
|-----------------|--|---------|--------------------|-------------------------|---------------|---|---------------|--|--|--|------|-------------------|--------|-------------------|---------------------------------------|---|---------------------------|-----------------------|--|
| C | ORI | NC | NC 032 | 10200 | | | 1 | REPORT | | | | | | | Date / Time Reported SMTWTFS | | | | |
| D E | NC NC 0340200 Crime Incident(s) | | | | | | | | | Att At Found SMTWTFS Month Day Yr Time | | | | | | 12 11 2024 03:56 Hrs. Last Known Secure S M T M T F S Month Day Yr Time | | | |
| N T | | | | ig Threats -intir | nide | ation, No | on Physical | _ | Com | Month 12 | 11 | 1 2024 | | lime 3:56 Hrs | | | | Time 03:55 Hrs. | |
| D A | #2 | Crime I | ncident | | | | | ı — | Att Com | Location 221 E | | | St. V | Vinston-s | alem 1 | VC 2 | 7127 | Offense Tract 412 | |
| T A | #3 | Crime I | ncident | | | | | | Att | Premise 7 | | | 2., . | , more in a | | ' | Victim Resid | ence Type | |
| Α | How A | Attacke | d or Com | mitted | | | | | Com | | | | | Forcible | | | Single Fan | nily ∏Multi Family | |
| МО | D | ATA O | MITTEI |) | | | | | | | | | | ☐ Yes [☐ No | X N/A | | 1 | | |
| V | # of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use: | | | | | | | | | | | | | | | | | | |
| | T ☐ Religious ☐ L.E. Officer Line of Duty ☐ Other/Unknown ☐ Internal ☐ Unconscious ☐ Other Major ☐ N/A | | | | | | | | | | | | | | | es □Unknown Io □N/A | | | |
| I C | | Victim/ | Business | Name (Last, First, | Mid | dle) | | | | | | Victim of Crime # | DOI | 3 / Age 47 | Race | Sex | Relationshi To Offende | | |
| T I | V1 | | DA | ΓA OMITTED | | | | | 1, | | 7/ | W | $_{F}$ | 10K | □ Non-Resident | | | | |
| M | Home Address DATA OMIT | | | | | | | | | | | | | | 1 | Home Phone | | | |
| , | Employer Name/Address DATA OMI | | | | | | | | | | | | | | Business Phone | | | | |
| , | VYR | Model | | | | | | | Vin | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| О | | | | | | | | | | | | | | | | | | | |
| T H | | | | | | | | | | | | | | | | | | | |
| E R | | | | | | | | | | | | | | | | | | | |
| S | | | | | | | | | | | | | | | | | | | |
| I | DATA OMITTED | | | | | | | | | | | | | | | | | | |
| N V | | | | | | | | | | | | | | | | | | | |
| O | O I | | | | | | | | | | | | | | | | | | |
| V E | | | | | | | | | | | | | | | | | | | |
| D | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | |
| Status Codes | (Chec | k "OJ" | = Stolen column | R = Recovered for other | D = er jur | Damaged isdiction) | Z = Seized | B = | Burn | C = 0 | Cour | nterfeit / F | orged | F = Foun | d | | | | |
| | Victim # DCI Status Value OJ | | | | | QTY | | Property Description | | | | Mak | ce/Mo | | Serial Number | | | | |
| - P - R _ | | | | | | | | | | | | | D | ATA OMITTED FOR | | | | | |
| | | | | | | | | | | | | | | | | |] | NFORMATION | |
| | | | | | | | | | | | | | | | | | | SECURITY | |
| O P | | | | | | | | | | | | | | | | | | PURPOSES | |
| E - R | | | | | | | | | | | | | | | | | C | NLY THE FIRST | |
| T | | | | | | | | | | | | | | | | | TWE | LVE PROPERTY | |
| Y | | | | | | | | | | | | | | | | | | ITEMS ARE | |
| | | | | | | | | | | | | | | | | | | DISPLAYED ON | |
| - | | | | | | | | | | | | | | | | | | P2C REPORTS | |
| | | | ehicles S | tolen 0 | Nu | mber Vehi | cles Recovere | | 0 | | | | | | | | | | |
| ID | Office: | | REICH. | T. F. (16354) | Officer Sig | Officer Signature Supervisor Signature PERKINS, R. A. (15028) | | | | | | | | | | | | | |
| | | | Signatur | | | | Case Status | Case Disposition: | | | | | | | · · · · · · · · · · · · · · · · · · · | | | | |
| Status | | | | | | | Inact | ☐ Inactive ☐ Cleared by Arrest ☐ Refuse to Cooperate | | | | | | | tradition Declined | | | | |
| | | | | | | | Closed | | leared Cleared by Arrest by Another Agency | | | | | | | Page 1 | | | |