I N	Agenc	y Name		NSTON-SALEN	1 P	OLICE] IN	ICIDENT/INVESTIGATION						OCA 2444654					
C	ORI	NG				02102	-	REPORT						Date / Time Reported SMTWIFS Month Day Yr Time					
D E			NC 034				LE AM LATEOUND SMTWIRE						12 12 2024 15:23 Hrs.						
N T	#1 Crime Incident(s) Communicating Threats -intimidation, Non Physica									Att At Found S M T W T F S Month Day Yr Time 12 12 2024 15:23 Hr						Month Day Yr Time			
D D			ncident	18 Threens thum			n i nysteat		-		of Incident	4 1.	0.23 1113	12			Offense Tract		
A		~ · ·						_	Com		ison St, W	instor	ı-salem N	C 271			312		
T A	#3	rime i	ncident					☐ Att Premise Type ☐ Com						Victim Residence Type ☐ Single Family ☐ Multi Family					
МО			d or Com										Forcible Yes	X N/A	We	apon / Tools			
	# of Victims Type No Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															cohol Use:			
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow															s Unknown			
V I																r 🛛 🔀 No Relationship	□N/A Resident Status		
C T	Crime # 4.5														20.1	To Offender			
I M														W	F	1AQ	☐ Non-Resident ☐ Unknown		
171	Home Address DATA OMIT									TED					Home Phone				
	Employer Name/Address DATA OM								TTED					Business Phone					
,	VYR Make Model Style						Color Lic/Lis Vi						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 i	R = Recovered	D = l er jur	Damaged isdiction)	Z = Seized	B =	Burn	ed $C = C$	Counterfeit / 1	Forged	F = Found	d					
	Victim # DCI Status Value OJ QTY					QTY	Property Description							Mak	ce/Mo	odel Se	rial Number		
- - P - R																DA	TA OMITTED		
					_											IN	FOR FORMATION		
					\dashv												SECURITY		
O P -																	PURPOSES		
E ·																ON	I W THE EID OT		
R T																	LY THE FIRST VE PROPERTY		
Y ·					\dashv												ITEMS ARE		
-																DI	SPLAYED ON		
																P	2C REPORTS		
	Numb	on of V	ahialaa C	tolon 0	Num	nhou Vohi	alas Dagayana	a	0										
	Number of Vehicles Stolen 0 Number Vehicles Recovered 0 Officer ID# Officer Signature Supervisor Signature																		
ID	MEA, A. N. (15205)													DAY, T. Å. (15478)					
Status	Comp	iainant	signatur	e			Case Status Further Inact Closed	r Inve ive /Clea	red			nded d by A d by A	Loca	Refuse ther Ag	gency	ooperate	Page 1		