I N	Agenc	y Name		NSTON-SALEN	] IN	ICIDENT/INVESTIGATION						OCA 2444943									
C	ORI	NG				72102		REPORT							Date / Time Reported SMTWTFS						
D E	10		NC 034					Att At Found SMTWTFS Month Day Yr Time							last Known Secure SMTWTFS.  Last Known Secure SMTWTFS						
N T	#1	Jimic I	nerdent(s	) Drug Viola	tions			_	Com	Month 12	Da							<u>-</u>	Time $20:53$		
D .	Crime Incident														?† 1 <u>2</u>		4   202		Offense T		
A		~ · ·						_	Com				Winst	on-salem	NC 2				211		
T A	#3	rime i	ncident		☐ Att Premise Type ☐ Com								Victim Residence Type  ☐ Single Family ☐ Multi Family								
МО			d or Com		Forcible ☐ Yes ☐ No						Weapon / Tools										
	# of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:															se:					
37	1 Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow Internal Unconscious Other Major No NA																				
V I		Victim/		Name (Last, First,			пу 📙 Опк	21/ ()11	KIIOW	<u>"                                       </u>		Victim of		B / Age	<del>-</del>	Sex Relationship Resident Status				nt Status	
C T	V1		DA	ΓΑ OMITTED							(	Crime #					To Offen	der	☐ Resi	ident -Resident	
I M				IA OMITTED								1,				Unl					
111	Home Address DATA OMIT									[TED						Home Phone					
•	Employer Name/Address DATA OMI									 ГТЕD						Business Phone					
1	VYR	M	Model	Color Lic/Lis Vin							Vin										
О																					
T H																					
E	E																				
R S																					
	DATA OMITTED																				
I N	DATA OMITTED																				
V O	V																				
L																					
V E																					
D																					
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column	R = Recovered if recovered for other	D = D er juris	Damaged sdiction)	Z = Seized	B =	Burn	ed $C = C$	Cour	nterfeit / F	Forged	F = Foun	d						
	Victim # DCI Status Value OJ QTY								Property Description							Iake/Model Serial Number				ıber	
	11 EVID 2 DIGITAL SO															TAL/Scales DATA OMITTED					
- P - R		20	EVID		+	233	MONEY/CASI	EY/CASH							US/Dol	Dollars FOR INFORMATION					
					+														SECUR		
ο .																		]	PURPO	SES	
P :																					
R T					+												TU		LY THE /E PRO	FIRST	
Y ·					+												1 V		TEMS.		
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																		P2	C REPO	ORTS	
-	Numb	or of V	ehicles S	tolen 0	Nive	har Vahi	cles Recovere	d	0												
	Office	r		ID		ioci veiil	Officer Sig		-					Supervisor	Signati	ıre					
ID	STU	LTZ,		16204)	Case Status				<u> </u>	ngo D:	itio	PENN,	N, C. I. (16004)								
	Furth									Case Disposition:  [Investigation								Extra	dition E	Declined	
Status	☐ Inac									tive Cleared by Arrest						☐ Refuse to Cooperate					
							Closed			nausted				nder ⊏					Page	e 1	