I N	Agenc	y Name		STON-SALEN	CIDENT/INVESTIGATION						OCA 2444951								
C ·	ORI	NC						REPORT						Date / Time Reported SMTWTFS Month Day Yr Time					
D E			NC 034				Att At Found SMTWTFS Month Day Yr Time						TFS	12 15 2024 00:29 Hrs.					
N T	#1			, Assault-non Agg	grav	ated Ass	sault	ı —	Com	Month 12	D			lime 1:29 Hrs			Day Yr '	Time $00:28$ Hrs.	
D.	#2		ncident		,				Att	Location	n of	Incident		•			,	Offense Tract	
A T	Crime Incident Com 6024 Allington Ct, Winston-salem I																104 Victim Resid	324	
A	#3	Jillie i	neident					Com							☐ Single Family ☐ Multi Family				
МО			d or Com						•					Forcible Yes [X N/A	We	apon / Tools		
	# of V	ictims	Туре	☐ Person		Business				Injur	v	X None		□ No	Loss o	of Tee	th Drug/A	Alcohol Use:	
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown															es Unknown			
V I		Victim/		igious X L.E. Off Name (Last, First,			ity 🗌 Othe	er/Ur	ıknow	n _		ternal Victim of		scious Age	Other Race				
C T	V1	, 10 11111				Crime #				DOI	42		БСА	To Offende	Resident				
I M			DA	ΓΑ OMITTED					1,			$\mid W \mid$	M	1ST	☐ Non-Resident				
IVI ·	Home Address DATA OMIT									ГТЕО						Home Phone			
	Employer Name/Address DATA OMI								 FTED						Business Phone				
•	VYR	Color Lic/Lis Vi						Vin											
O 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 for other	D = er jur	Damaged isdiction)	Z = Seized	B =	Burn	ied C=	Cou	ınterfeit / F	orged	F = Foun	d				
	Victim # DCI Status Value OJ QTY						Property Description							Mal	ce/Mo	del S	erial Number		
- - P - R													D	ATA OMITTED					
														+			I	FOR NFORMATION	
																		SECURITY	
O P -																		PURPOSES	
Ē -																		NI V THE EIDST	
R T																		NLY THE FIRST LVE PROPERTY	
Y ·					\dashv									+			1 112	ITEMS ARE	
-																	I	DISPLAYED ON	
-																		P2C REPORTS	
-	N7 -		1 . 1	. 1		1 77.1.	1 5	1											
	Office	r	ehicles S	ID		mber Vehi	cles Recovere Officer Sig		0 re				Ī	Supervisor	Signat	ure			
ID	WAS	ENIUK,		FLYN								N, J. L. (15605)							
	Complainant Signature Case State									Case Disposition: Investigation ☐ Unfounded ☐ Located ☐ Extradit							tradition Declined		
Status							☐ Inact	tive /Clea	ared			Cleared	by Ai	rest rest by And	Refuse other Ag	gency	ooperate [Page 1	