I N	Agenc	y Nam	IN	INCIDENT/INVESTIGATION							OCA 2445405											
C															Date /	ate / Time Reported SMTWTFS						
D E			NC 034			│								12 18 2024 15:50 Hrs. Last Known Secure SMTWTFS								
N	#1	Jime i	ncideni(s) Shopliftii	10				Att Com	Mont	h	Day			T≢S ime				Yr —	Time		
T	#2	Crime I	ncident	Shopiijiii	ıg				_	10 Locat	_	25 of Incid		7 21	:08 Hrs	s 10		25 2	2024 (20:58 Hrs Offense Tract		
D A									Com				Mall	Bv,	Winston-	salem				323		
T A	#3	Crime I	ncident						Att Com	Premi	se Ty	ype					- 1			ce Type y		
МО	How Attacked or Committed													Forcible Yes XN				Weapon / Tools				
		ictims	l	☐ Person	LAL I	Business				l In	ury		None		□ No	11 088 0	f Tee	th I	Drug/Al	cohol Use:		
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow																					
V I		Victim		-			uty Othe	er/Un	know	/n	□ I 					Other Race	<u> </u>		No onship	□N/A Resident Status		
C T	V/1														Race	Sex		fender	☐ Resident			
I	1		DA	ΓA OMITTED								1,								☐ Non-Reside		
M	Home Address DATA OMITTE										 FD						Home Phone					
,	Employer Name/Address DATA OMI																Business Phone					
	VYR	M	ake	Model	Color Lic/Lis Vin							Vin										
O T H E R S I N V O L V E D		DATA OMITTED																				
Status Codes	(Chec	k "OJ"	= Stolen column	R = Recovered if recovered for other	D = l er juri	Damaged isdiction)	Z = Seized	B =	Burn	ned C	= Co	ounterf	feit / F	orged	F = Foun	ıd						
	Victim #	DCI	Status	Value	Property Description									Mak								
P . R							COMFORTERS									RALPH						
	I	77	7		_	1 .	BLANKET												IN			
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ο .					\neg															ial Number TA OMITTED FOR FORMATION SECURITY PURPOSES LY THE FIRST VE PROPERTY ITEMS ARE SPLAYED ON CC REPORTS		
P :																Make/Model Serial Number RALPH LAUREN DATA OMITER FOR INFORMATE SECURITER PURPOSE ONLY THE FOREST SECURITER AND INFORMATER SECURITER AND INFORMATER SECURITER SECURITE						
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			ehicles S	-		nber Vehi	cles Recovere		0													
ID	Office ALL		. E. (15	ID (310)	#		Officer Sig	natur	re						Supervisor SOMF	Signati RVII I	ure E. 7	T. J. C	(6036)			
11/			Signatur				Case Statu					Case I					, 1					
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	tive /Clea	ared			□c □c		by Ai	rest rest by An] Refuse other Ag	gency	Coopera	te			