I N	Agenc		, IN	INCIDENT/INVESTIGATION							OCA 2445797										
C	ORI NC NC 0340200									REPORT							Date / Time Reported SMTWTFS				
D E	10		NC 034				I	A 4 E		Idlw	ıl ırl w	া দি লি ল	12		21 2024	Time 4					
N	#1	Jillie I	ncident(s	Agg Aslt Pers	on S	Shot		_	Att Com	At Found	D			TFS Time			Day Yr	Time			
T	#2	Crime I	ncident	Agg Asu I ers	on s	moi		_	Att	12 Location			7 10	5:05 Hrs	12			16:04 Hrs. Offense Tract			
D A				Discharging H	ire	arm		X	Com				r, W	inston-sal	em N			323			
T A	#3	Crime I	ncident						Att Com	Premise 7	Тур	e				- 1	Victim Reside	nce Type ly ∏Multi Family			
	How A	Attacke	d or Com	nmitted				Ш	Com					Forcible		=	apon / Tools	IyIVIUIU I allilly			
MO	D.	ATA O	MITTEL)				☐ Yes ☐ No				IX N/A									
	# of V	ictims	""	☐ Person	_	Business				Injury	y	None		finor	Loss o	f Tee	th Drug/A	lcohol Use:			
V	2			ciety Governm ligious L.E. Of		_	Financial Institution		know	. –		oken Bone		Severe	Lacera Other			es Unknown			
I	Contact Con														Race		Relationship	Resident Status			
C T	V1		DΔ	ΓΑ OMITTED				'	Crime #		20			To Offender							
I M				TA OMITTED					1,			W	M	1FR	Unknown						
111	Home	Addre	ess		Г	ATA OMI	TA OMITTED								Home Phone						
	Emplo	oyer Na	me/Add	ress	ATA OMITTED								Business Phone								
	VYR	ake	Color	lor Lic/Lis Vin						Vin											
O T H E																					
R S	DATA OMITTED																				
I N	DATA OMITTED																				
V O L	V O I																				
V E																					
D																					
Status	S L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found																				
Codes	(Chec	k "OJ"	column	if recovered for other	er jui	risdiction)	Z = Scizeu	Б-	- Duii	icu C=0		micricit / I	orged	1 = 1 out							
	Victim #		Property Description								e/Mo		erial Number								
	13 EVID 1 GLOCK														GLOCE	3/17	DA	ATA OMITTED			
P - R																	IN	FOR FORMATION			
																		SECURITY			
ο .																		PURPOSES			
P .																					
R																		ILY THE FIRST			
Т Ү .																	TWEL	VE PROPERTY ITEMS ARE			
				+													D	ISPLAYED ON			
-																		2C REPORTS			
			ehicles S			mber Veh	Conficer Signature		<i>0</i>				-	Supervisor	Signat	ıre					
ID	Officer ID# Offi JAMERSON, B. M. (15386)								Officer Signature Supervis DAY ,								or Signature T. A. (15478)				
	Complainant Signature Case Stat									Case Disposition:							- Eve	radition Declined			
Status					☐ Inact	tive l/Clea	Cleared by Arrest Refuse to Cooperate leared Cleared by Arrest by Another Agency						ooperate								
							☐ Closed	/Lea	ds Ev	nausted	1 4	□ L)eath ∩	T ()ffe	nder \Box	Prose	cution	Declined L	Page 1			