I N	Agenc	y Name		NSTON-SALE!	M P	OLICE	IN	INCIDENT/INVESTIGATION							OCA 2446304					
C I	ORI	NC	NC 034	40200			1			REPO)K I			Date / Mon	Time th	e Reported Day	s	M T W		
D E			ncident(s						1	A (E 1	I cl x	וא וייו וא	TH FH CI	12		25 20	024	18:5 M T ₩	$\stackrel{ ext{e}}{0}$ Hrs.	
N	#1	Jillie I			□ A DXC	1 1		Day Yr		T F S			vn Secure Day Yr		Time					
T		Crime I	ncident	Larceny- All	Oth	ier			-		25 2024 of Incident	4 18	8:50 Hrs	Hrs 12 25 2024 18:00 Hrs. Offense Tract						
D A	#2	crimic r	neraent								Northwe	st Bv	- B. Wins	ton-so	alem	NC	"	321	rract	
T	#3 Crime Incident														Victim Residence Type					
A	Com														☐ Single Family ☐ Multi Family					
МО	How Attacked or Committed DATA OMITTED Forcible ☐ Yes ☒ N/A															Weapon / Tools				
	D	AIAU	MILLEI										□ No	23.1						
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																			
3.7	1																			
V I	Victim/Business Name (Last, First, Middle) Victim of DOB / Age Race Sex Relationship Resident Statu																			
C T	V1					,					Crime #	Doi	42	race	БСА	To Offend	ler	🛛 Resi	dent	
I	' -		DA	TA OMITTED							1,			$\mid w \mid$	M			_	-Resident	
M	Home	e Addre	ess				4.T. 4. C.) 4T.	DEED						1	W ☐ Unknown Home Phone					
			/				ATA OMI													
	Empl	oyer Na	ame/Add	ress		D	ATA OMI	ГТED)						Business Phone					
1	VYR	M	ake	Model	Color Lic/Lis Vin						Vin									
H E R S I N V O L V E D	DATA OMITTED																			
Status Codes	L = L (Chec	ost S	= Stolen	R = Recovered if recovered for other	D= er iur	Damaged	Z = Seized	$\mathbf{B} = \mathbf{B}$	urne	$\mathbf{C} = \mathbf{C}$	ounterfeit / F	orged	F = Foun	d						
	Victin	1			Ť	Ĺ	D. A. D. A. A.							3.7.1	2.1				1	
P - R	# DCI Status Value OJ QTY 1 76 7						Property Description BICYCLE							Mak KONA	ake/Model Serial Number DATA OMITTI					
													FOR							
																	INF	ORMA	TION	
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Р ⁻ Е -																				
R																			FIRST	
Т Ү.																TW		E PRO		
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•	Numb	er of V	ehicles S	Stolen 0	Nui	mber Vehi	cles Recovere	d 0												
	Office	r		ID		,	Officer Sig						Supervisor	Signat	ıre					
ID			M. (16			0 2	FLYN							IN, J. L. (15605)						
	Complainant Signature Case Status Case Dis ☐ Further Investigation ☐ Unfo												ded ☐ Located ☐ Extradition Declined							
Status							☐ Closed☐ Clo	tive /Cleare	ed		☐ Cleared	l by Aı l by Aı		Refuse other Ag	gency	Cooperate	Г	Page		