I N	Agenc	y Name		NSTON-SALEN	. IN	NCIDENT/INVESTIGATION						OCA 2482201							
C	ORI	NC	NC 02	40200			REPORT								Date / Time Reported SMTMTFS Month Day Yr Time				
D E	10		NC 034			☐ Att At Found SMIWIFS Month Day Yr Time							Day   Time   O6   26   2024   08:29   Hrs.     Last Known Secure   SM I W I F S   Month Day Yr   Time   Time   O7   Time   O						
N T	#1	Jimic I	nerdeni(s	, Identity Ti	heft			_	Com	Month 06	D			ime 3:10  Hrs			Day Yr 🖰	Time $08:10$ Hrs.	
D	#2	Crime I	ncident						_	Location			<del>7</del>   00	5.10	7 00			Offense Tract	
Α		7 T	! 4 4					_	Com				Bv, V	Vinston-s	alem Ì			112	
T A	#3	Jillie 1	ncident						Com	Premise	тур	ЭС					Victim Reside ☐ Single Fami	nce Type ly	
МО			d or Com					Forcible Yes							Weapon / Tools				
																lcohol Use:			
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow																		
V I		Viotim		-			uty   Othe	er/Un	know	n 🗆		ternal   Vistim of			Other Race	<u> </u>			
C T	V1														Kace	Sex	To Offender	☐ Resident	
I	1		DA	ΓA OMITTED								1						☐ Non-Resident	
M	Home Address DATA OMI'									 ITED						Home Phone			
•	Employer Name/Address DATA O								 IITTED						Business Phone				
,	VYR	M	Model	Color Lic/Lis Vin							Vin								
T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes																			
Cours	Victim		Status	Value	Property Description								Mol	e/Mo	odal S	erial Number			
	"						IDENTITY-INTANGIBLE								Ivian	.C/ IVIC		ATA OMITTED	
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			ehicles S	-		nber Vehi	cles Recovere		0										
ID	Office RA7		K. D	ID (15687)		Officer Sig	Officer Signature Supervisor Signature RATLIFF, K. D. (15687)												
ID			Signatur		Case Statu							IUII LA							
Status	-						☐ Further ☐ Inact ☐ Closed ☐ Closed	tive /Clea	ıred			☐ Unfoun☐ Cleared☐ Cleared☐	ded by Ai by Ai	Loc crest crest by Ander	Refuse other Ag	ency	looperate	Page 1	