I N	Agenc	y Name		NSTON-SALEN	, IN	INCIDENT/INVESTIGATION							OCA 2483191								
C .	ORI	NC	NC 034				1	REPORT								Date / Time Reported SMTWTFS					
D E	10	NC Crime I	│ │									09   14   2024  22:27 Hrs.									
N T	#1		nerdeni(s	Lost Prope	ertv		ı —	☐ Att   At Found   SMTWTES   I   Month Day Yr Time   IX Com   08   30   2024   19:00   Hrs								ast Known Secure SMTWTFS Onth Day Yr Time  08   30   2024   19:00   Hrs.					
D.	#2	Crime I	ncident					_	Att			of Incident		9.00	<u> </u>		<u> </u>		Offense Tract	_	
A		7 T	ncident					_	Com				Rd, W	inston-sa	lem N				323	_	
T A	#3	Jillie 1	ncident			☐ Att Premise Type ☐ Com							Victim Residence Type  ☐ Single Family ☐ Multi Family								
МО			d or Com					Forcible Yes							Weapon / Tools						
	# of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use															cohol Use:	$\dashv$				
	O Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow															'n					
V I		Viotim		-			uty   Othe	er/Un	nknow	/n	□ I <sub>1</sub>	nternal [			Other	r Major No N/A  Sex Relationship Resident Status				22.0	
C	Victim/Business Name (Last, First, Middle)  Victim of Crime #  DOB / Age  Crime #														Race	Sex	To Off	ender	☐ Resident		
T I	* 1		DA	ΓA OMITTED															☐ Non-Resid		
М -	Home Address DATA OMIT									 FTED						Home Phone					
	Employer Name/Address DATA OM															Business Phone					
•	VYR	Color Lic/Lis Vin							Vin												
				•	•																
О																					
T H																					
E R																					
S																					
ī	DATA OMITTED																				
I N																					
V O	V O																				
L V																					
E																					
D																					
a	s L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found														_						
Status Codes	(Chec	k "OJ"	= Stolen column	R = Recovered if recovered for other	D = er jur	Damaged isdiction)	Z = Seized	В=	Burn	ied C	= Cc	ounterfeit	Forge	1 F = Four	nd						
	Victim #				Descrip					Mal	Make/Model Serial Number										
		# DCI Status Value OJ QTY  36 LOST 1 TI						ELEPHONE/TELEPHONE EQUIPMENT								rola/Stylus G DATA OMITTED					
-																		IN	FOR FORMATION	-	
P - R																			SECURITY	-	
0																			PURPOSES		
Р <sup>-</sup> Е -																					
R T																	,		LY THE FIRS VE PROPERT		
Y -																			ITEMS ARE	_	
-																			SPLAYED ON	<u></u>	
																		P	2C REPORTS		
-	N <sub>1</sub> ,,1	or of W	ahialaa S	tolon	Nive	mbor Val-	iolos Dogover-	d	0											_	
	Office	r	ehicles S	ID		mber veh	Officer Sig		0 re					Superviso						_	
ID	ALE	XANI	DER, J.		ÀLE								XANDER, J. C. (15741)								
	Complainant Signature Case Stat ☐ Furth									tion		Case Disp Unfo	unded	□ Lo	cated		Г	] Extra	adition Decline	ed	
Status			☐ Inact	tive Cleared by Arrest Re						☐ Refus	efuse to Cooperate										
							☐ Closed			hausted	- [			ender r				ed	Page 1		