I N	Agenc	y Name		NSTON-SALE	. IN	INCIDENT/INVESTIGATION							OCA 2483547						
C .	ORI	NG				02102	-	REPORT							Date / Time Reported S M T W T F S Month Day Yr Time				
D E	10		NC 034			LETA# LAt Dound - Let M 파 I I I I							10   14   2024  11:44 Hrs.						
N T	#1	Jimic I	nerdent(s	, Identity Ti	_										Time				
D .	#2	Crime I	ncident	Twentity 11	icji				$\rightarrow$	Location			<i>‡</i>   00	7.00   1113	1 00		<del></del>	Offense Tract	
A	Com 2548 Manchester St, Winston-sal																	223	
T A	#3	rime i	ncident						☐ Att Premise Type ☐ Com						Victim Residence Type ☐ Single Family ☐ Multi Family				
МО			d or Con					Forcible Ves						Weapon / Tools					
WIO	DATA OMITTED See No.																		
	# of Victims   Type   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:    Society   Government   Financial Institute   Broken Bones   Severe Lacerations   Yes   Unkn																		
V	1		☐ Rel	igious 🔲 L.E. Of	ficer	Line of D			know	. –	•			severe scious	Cacera Other	nons Majo		_	
I C	Victim/Business Name (Last, First, Middle)											Victim of Crime #	DOI	3 / Age 59	Race	Sex	Relationship To Offender	Resident Status Resident	
T I	V1		DA	TA OMITTED				`	1		39	$\mid B \mid$	M		☐ Non-Resident				
М -	Home Address																ne Phone	Unknown	
	Employer Name/Address DATA OMI															Business Phone			
	DATA								MITTED										
	VYR	M	ake	Model	St	yle	Color		Lic	c/Lis				Vin					
T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column	R = Recovered if recovered for other	D = er jur	Damaged risdiction)	Z = Seized	B =	Burn	C = 0	Cou	interfeit / F	orged	F = Found	d				
	Victim #	DCI	Value	Property Description								Mak	Make/Model Serial Number						
-	"							ENTITY-INTANGIBLE									DA	TA OMITTED	
P - R					_												IN	FOR FORMATION	
					_	+											111	SECURITY	
0																		PURPOSES	
Р <sup>-</sup> Е -																			
R T																		VE PROPERTY	
Y -					_	+												ITEMS ARE	
																		ISPLAYED ON	
																	P	2C REPORTS	
-	NI1	or of T	ahiala - C	tolon	NT	mbor V-1	alas Pas	d	0										
	Office	r	ehicles S	ID		inder Vehi	Cles Recovere Officer Sig		<i>0</i>				1	Supervisor	Signat	ıre			
ID	WAI	DDEL		(15882)					I ~	D'		WADD	EĽL,	<i>J. A.</i>	(15882)				
Status	Comp	ıaınant	Signatur	е		☐ Further  【X Inact ☐ Closed	Case Status  ☐ Further Investigation  ☐ Inactive ☐ Closed/Cleared  ☐ Case Disposition: ☐ Unfounded ☐ Local						rrest by Ano	Refuse to Cooperate					
							☐ Closed	/Lead	ls Ext	hausted				nder 🗆				Page 1	