| I N | Agency Name WINSTON-SALEM POLICE | | | | | | | | | NCIDENT/INVESTIGATION | | | | | | OCA 2483742 | | | |
|-----------------|--|----------|--------------------|--------------------|-------------|--|--------------------------|----------|----------|-----------------------|-----------|--|--|---|--------------------------|----------------|------------|----------------------|--|
| C . | ORI | NC | | | | - | REPORT | | | | | | | Date / Time Reported SMTWTFS Month Day Yr Time | | | | | |
| D E | 10 | | NC 034 | | | ☐ Att At Found S M T W T F S Month Day Yr Time | | | | | | | 11 01 2024 11:13 Hrs. Last Known Secure S M T W T F S Month Day Yr Time | | | | | | |
| N T | #1 | Jime I | nerdeni(s | , Shopliftii | เย | | | _ | Com | Month 10 | I | | | lime 1:40 Hrs | | | | Time $ 14:40 $ Hrs. | |
| D. | #2 | Crime I | ncident | ~ _F | -0 | | | | _ | | _ | f Incident | 7 17 | F. 40 111 | 7 10 | | 20 2024 | Offense Tract | |
| A | | 7 T | ! 4 4 | | | | | _ | Com | | | | Win | ston-sale | m NC | | | 314 | |
| T A | #3 | Jillie I | ncident | | | | ☐ Att Premise Type ☐ Com | | | | | | | Victim Residence Type ☐ Single Family ☐ Multi Family | | | | | |
| МО | | | d or Com MITTEI | | | | | | | | | | | Forcible Yes | Weapon / Tools | | | | |
| | # of Victims Type Person X Business Injury None Minor Loss of Teeth Drug/Alcohol Use: | | | | | | | | | | | | | | | Alcohol Use: | | | |
| | 1 | | | | | | | | | | | | | | | | | | |
| V I | Τ, | Victim/ | | Name (Last, First, | | | ину 🔲 Онн | 21/ ()11 | ikilow | ^{/11} [|] In | Victim of | | S / Age | Race | <u> </u> | | | |
| C T | VI DATA OMITTED | | | | | | | | | | | | | | | | To Offende | Resident | |
| I M | | | DA | IA OMITIED | | | | | | | | 1 | | | | | | ☐ Non-Resident | |
| IVI · | Home Address DATA OMI | | | | | | | | | ГТЕО | | | | | | Home Phone | | | |
| • | Employer Name/Address DATA OM | | | | | | | | TTED | | | | | | | Business Phone | | | |
| • | VYR | M | Color Lic/Lis Vin | | | | | | | Vin | | | | | | | | | |
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| Status Codes | L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found (Check "OJ" column if recovered for other jurisdiction) | | | | | | | | | | | | | | | | | | |
| Coucs | Victim | | | | Ĺ | Property Description | | | | | | | | Mal | Make/Model Serial Number | | | | |
| | # DCI Status Value OJ QTY 1 36 7 1 | | | | | | TOOLS - POWER & HAND | | | | | | | | Kobalt/ | | | ATA OMITTED | |
| P . | | | | | | | | | | | | | | | | | | FOR | |
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| _ | | | ehicles S | - | | nber Vehi | cles Recovere | | 0 | | | | | | | | | | |
| ID | Office ALE | | DER, J. | C. (15741) | Officer Sig | Officer Signature Supervisor Signature ALEXANDER, J. C. (15741) | | | | | | | | | |) | | | |
| | Complainant Signature Case Sta | | | | | | | | | s Case Disposition: | | | | | | , | | | |
| Status | | | | | tive | estiga | tion | | ☐ Unfoun | by A | rrest Loc |] Refus | e to C | Cooperate | tradition Declined | | | | |
| J | ☐ Closed/Cleared | | | | | | | | | | | Cleared by Arrest by Another Agency Death of Offender Prosecution Declined Page 1 | | | | | | | |