I N	Agenc	y Namo	NSTON-SALEN	. IN	NCIDENT/INVESTIGATION						OCA 2483993								
C	ORI	NC	NC 02	10200		1	REPORT							Date / Time Reported SMTWTES Month Day Yr Time					
D E	NC NC 0340200 Crime Incident(s)									☐ Att						11 22 2024 13:22 Hrs. Last Known Secure SMTWTFS SMTWTFS SMTWTFS SMTWTFS SMTWTFS SMTWTFS SMTWMTFS SMTWMTFS SMTWMTFS SMTWMTFS SMTMWTFS SMTMWTFS			
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D	#2	Crime I	ncident						Att	Locatio	n of	f Incident	•	•			_	Offense Tract	
A T		Trimo I	ncident					_	☐ Com 1281 W Fourth St, Winston-sa. ☐ Att Premise Type						em NC	m NC 27101 321 Victim Residence Type			
A	#3	Jillie I	ncident						Com	Tremise	. 1 y]	pe				- 1		ily ∏Multi Family	
МО			d or Con MITTEI						·					Forcible Yes No	X N/A	We	apon / Tools		
	# of Victims Type None Minor Loss of Teeth Drug/Alcohol Use:																		
V	1			ciety Governm ligious L.E. Of			Financial Instit		nknow		_	roken Bone		Severe	Lacera Other	tions Maio		es Unknown O N/A	
I	Victim/Business Name (Last, First, Middle) Victim of DOB / Age														Race		Relationshi	Resident Status	
C T	V1		DA	ΓΑ OMITTED					Crime #		25			To Offende	Resident ☐ Non-Resident				
I M											丄	1			W	F	RU	Unknown	
	Home Address DATA OMIT									ГТЕD						Home Phone			
	Employer Name/Address DATA OMI									ГТЕО					Business Phone				
,	VYR	Color	Color Lic/Lis Vin						Vin	I									
T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes																			
	Victim		Status		Property Description							Make/Model Serial Number							
,	"							ARTS/ACCESSORIES							leep/Cl			ATA OMITTED	
P -		SUV	TARG			1	0 GRY,	GRY,							IEEP C	Cherol		FOR	
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ID	Office RAT	Officer Sig	natuı	re 					Supervisor RATLI	Signat F <u>F,</u> K	ure . <u>D</u> . ((15687)							
	Complainant Signature Case State									Case Disposition:									
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	tive /Clea	ared				by A	Locarrest □ rrest by Ancested	Refuse ther Ag	gency	ooperate [Page 1	