I N	Agenc	y Nam	e WIM	, IN	INCIDENT/INVESTIGATION							OCA 2484366									
C	ORI	NC	NC 02	10200			1	REPORT								Date / Time Reported SMIWTFS Month Day Yr Time					
D E		NC NC 0340200  Crime Incident(s)								☐ Att   At Found							12   24   2024   09:06 Hrs.   Last Known Secure   S M T W T F S				
N T	#1		`	Larceny- All	ı —	Month Day Yr Time Month Day Yr									Time						
D	#2	Crime I	ncident						- 1	Location	n of	Incident						Offense Tract			
A T		Trime I	ncident					_	Com	1690 Premise			Plaze	ı Dr, Win.	ston-s		<i>i NC</i> Victim Reside	322			
A	#3	crime i	neident					☐ Att Premise Type ☐ Com							☐ Single Family ☐ Multi Family						
МО			d or Con MITTEI					Forcible Yes							Weapon / Tools						
																lcohol Use:					
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow															es Unknown					
V I		Victim		igious  L.E. Of Name (Last, First,			uty   Othe	er/Un	know	'n _		victim of		nscious  B / Age	Other Race		r 🔯 No Relationship				
C T	V1	v ictiii/			Crime #					DOI	77	Nace	Sex	To Offender	□ Resident						
I	- 1		DA	ΓA OMITTED					1			$\mid U \mid$	F	RU	☐ Non-Resident						
M	Home Address DATA OMI'															Home Phone					
	Employer Name/Address DATA OMI														Business Phone						
,	VYR	Color Lic/Lis Vin							Vin												
		<u> </u>			<u> </u>																
О																					
T H																					
E																					
R S																					
							DATA	<b>(</b>	M	TTTI	ΞĪ	)									
I N	DATA OMITTED																				
V																					
O L																					
V E																					
D																					
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	ied C =	Cou	unterfeit / F	Forged	F = Found	d						
	Victim #	DCI	Status		Property Description							Mak	Make/Model Serial Number								
							PURSES/HAN	PURSES/HANDBAGS/WALLETS							Wells fo	irgo	DA	ATA OMITTED			
P -																	IN	FOR FORMATION			
				+													11	SECURITY			
R O																		PURPOSES			
P :																					
R																		NLY THE FIRST			
Т Ү.																	TWEL	VE PROPERTY			
1				+													D	ITEMS ARE ISPLAYED ON			
-																		2C REPORTS			
			ehicles S			mber Veh	Cofficer Sign		0				-	Cupanias	Cianat	tro					
ID		LIFF		(15687)	Officer Sig	Officer Signature Supervisor RATL								r Signature IFF, K. D. (15687)							
	Complainant Signature Case State									Case Disposition:							□ Evt	radition Declined			
Status	X Ina									ve Cleared by Arrest Refuse to Cooperate							addition Decilied				
							☐ Closed			hausted				rrest by Ano				Page 1			