I N	Agenc	y Name		NSTON-SALEN	CIDENT/INVESTIGATION						OCA 2505096									
C I	ORI	NC				1	REPORT						Date / Time Reported SMTWIFS Month Day Yr Time							
D E	<u> </u>		NC 034		☐ Att │ At Found │ S M T W 五 F S						02 13 2025 17:01 Hrs.									
N T	#1			, ty/county Ord	arm Re	lated	_	☐ Att At Found SMTWIFS Last K Month Day Yr Time Month Day Yr Time Month Day 13 2025 17:01 Hrs 02								th Day Yr Time				
D	#2		ncident	<i>y,</i>	-				_	Location) 1/	.01	1 02			Offense Tract		
A	Com 3638 S Main St, Winston-salem NC																	313		
T A	#3	Jillie 1	ncident						Com	Premise	тур	е				- 1	Victim Reside Single Fam	ly □Multi Family		
МО			d or Con						Forcible Yes			Weapon / Tools								
1110	No No																			
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use: Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown																			
V	1		Rel	igious 🔲 L.E. Off	icer	Line of D			know	. –	•			severe scious	Cacera Other	nons Majo		_		
I C	Crime # 40														Race	Sex	Relationship To Offender	Resident Status Resident		
T I	V1 DATA OMITTED											1,			W	M		Non-Residen		
M	Home	Addre	ess											Home Phone Unknown						
	Employer Name/Address DATA OMIT Employer Name/Address															Business Phone				
	DATA OWI															Business Fhone				
	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																				
	Victim #	Property Description								Mal	Iake/Model Serial Number									
		# DCI Status Value OJ QTY PCA TARG						* * *							ГОҮТ С	Camry	Le DA	ATA OMITTED		
P -																	IN	FOR NFORMATION		
					-												11	SECURITY		
R O																		PURPOSES		
P .																				
R																		VE PROPERTY		
Т Ү.					-												IWEL	VE PROPERTY ITEMS ARE		
					\dashv												D	ISPLAYED ON		
•																	I	2C REPORTS		
-					\Box															
	Numb Office:		ehicles S	-		nber Vehi	Cles Recovere		0 re				ı	Supervisor	Signat	ure				
ID	Officer ID# Office NOLETTE, J. P. (16289)																or Signature KS, C. M. (15216)			
	Comp	lainant	Signatur	e	Case Status		Case Disposition: Investigation ☐ Unfounded ☐ Located ☐ Extradition								radition Declined					
Status							☐ Inact	ive /Clea	ared			☐ Cleared ☐ Cleared	by A	rrest Dance	Refuse ther Ag	gency	ooperate	Page 1		