I N	Agenc	y Name		NSTON-SALEN	CIDENT/INVESTIGATION						OCA 2147072							
C ·	ORI	NG					REPORT						Date / Time Reported SMTWIFS Month Day Yr Time					
D E			NC 034				☐ Att   At Found							09   02   2021   14:17 Hr				
N T	#1		, Assault-non Agg	_	1 · 2 · · · · · · · · · · · · · · · · ·									Time				
D.	#2		ncident		,			<del></del>	Att			f Incident	1   15	F. 17   112 0	1 09			Offense Tract
A	Com 1830 S Hawthorne Rd, Winston-sa																C 27103 Victim Resider	312
T A	#3	Jillie 1	ncident						Com	Premise	I y	pe						lce Type ly
МО			d or Con											Forcible Yes	X N/A	We	apon / Tools	
																cohol Use		
	# of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:    Society   Government   Financial Institute   Broken Bones   Severe Lacerations   Ves   Unknown   Internal   Unconscious   Other Major   No   NA																	
V I		17: -4:		igious  L.E. Off			aty   Othe	er/Ur	nknow	/n _				iscious [	Other	Majo		□N/A Resident Status
C T	V1	v ictiiii/			iie)						Victim of Crime #	DOI	3 / Age 50	Race	Sex	Relationship To Offender	Resident     Resident	
I	* 1	DA				1,			W	F	10K	☐ Non-Resident ☐ Unknown						
М -	Home	Addre	ess		TTED							l	Home Phone					
	Employer Name/Address DATA OMI														Business Phone			
	VYR	Color	Color Lic/Lis Vin						Vin									
				1														
О																		
T H																		
E	E																	
R S	R S																	
_							DATA	(	)M	ITTI	ΕĪ	)						
I N	N V																	
V O																		
L																		
V E																		
D																		
a	us $L = Lost$ $S = Stolen$ $R = Recovered$ $D = Damaged$ $Z = Seized$ $B = Burned$ $C = Counterfeit / Forged$ $F = Found$																	
Status Codes	(Chec	k "OJ"	= Stolen column	R = Recovered if recovered for other	D = er jur	risdiction)	Z = Seized	В=	= Burr	ned C =	Coi	unterfeit / F	orged	F = Foun	d 			
	Victim # DCI Status Value OJ QT					QTY	Property Description							Mak	e/Mo	del Se	rial Number	
- - P - R													DA	TA OMITTED				
																	IN	FOR FORMATION
																		SECURITY
0																		PURPOSES
Р <sup>-</sup> Е -																		
R T					_													LY THE FIRST VE PROPERTY
Y ·																		ITEMS ARE
-														+				SPLAYED ON
																	P	2C REPORTS
-					$\Box$			1										
	Numb		ehicles S	tolen 0		mber Vehi	cles Recovere Officer Sig		0 re				1	Supervisor	Signati	ıre		
ID	BURGE, W. T. (15143)										_			REYNO	old Signature of the state of t			
	Comp	lainant	Signatur	e	s r Inv	estiga	tion		Case Dispos		□ Loca	ated		□ Extr	adition Declined			
Status					ive				Cleared	by A	rrest $\square$	Refuse	e to C	ooperate				
							☐ Closed			hausted				rrest by And				Page 1