I N	Agenc	y Name		NSTON-SALEN	И Р	OLICE] IN	INCIDENT/INVESTIGATION REPORT							OCA 2218877					
C	ORI	NC	NC 034	40200]			KEP	JKI			Date / Mon		Reported Day	s I	M T ₩ Time	TFS	
D E			ncident(s						1	A / E 1	LeL	d 다니 1v1	THE C	04			22	<i>07:01</i> Мт¥	Hrs.	
N	#1	Jime II	ncident(s								Day Yr	Т	T F S			n Secure Say Yr	т.	Гime		
T		Crimo I	ncident	Overdos		1							04 20 2022 07:01 Hrs. Offense Tract							
D	#2	CIIIIC I	ncident				A C				P_{W}	Winston-	salem	NC	27103	01	322	ract		
A T	#3	Colore Institute												saicm	Victim Residence Type					
A	#3														☐ Single Family ☐ Multi Family					
МО			d or Con										Forcible	W NI/A	Weapon / Tools					
MO	DATA OMITTED SYN/A NO																			
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															e:				
	1																			
V I	Continuous L.E. Officer Line of Duty Other/Unknown Internal Unconscious Other Major No N/A																			
C	V1	v ictiii/	Dusiness	rvaine (East, 1 list,	IVIICIC	iic)					Crime #	DOI	31	Race	To Offender Resident					
T I	V 1		DA	TA OMITTED							1,			$\mid w \mid$	M			_	Resident	
M	Home Address															Home Phone Unknown				
	DATA OMITTED																			
	Employer Name/Address DATA OMITTED													Business Phone						
	VYR	M	Model	Color Lic/Lis Vin					Vin											
T H E R S I N V O L V E D	DATA OMITTED																			
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column	R = Recovered if recovered for other	D = er jur	Damaged risdiction)	Z = Seized	$\mathbf{B} = \mathbf{F}$	Burne	$\mathbf{d} \mathbf{C} = \mathbf{C}$	ounterfeit / F	orged	F = Found	d						
	Victim #	DCI	Value	Property Description							Mak	e/Mo	del	Seria	al Numl	oer				
P - R	π	# DCI Status Value OJ QTY						Troporty Besonption							DATA OMITTED					
																		FOR		
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O P ·																	PI	URPOS	ES	
E ·																	ON II 1	S. COLLEG	EID CE	
R.																		Y THE		
T Y					_											TW		E PROF		
																		ΓEMS Α PLAYE		
															P2C REPORTS					
-	Numh	er of V	ehicles S	Stolen 0	Nııı	mber Vebi	cles Recovere	d ()											
	Office	r		ID		7 CIII	Officer Sig					Т	Supervisor	Signati	ıre					
ID	ME	4, A. <i>l</i>	V. (152	05)	-		Ŭ	WAL.							SH, D. W. (14646)					
	Comp	lainant	Signatur	е				Case Status Case Disposition: Further Investigation						extradition Declined						
Status							☐ Further ☐ Inact ☐ Closed ☐ X Closed	ive /Clear	ed		☐ Unfoun ☐ Cleared ☐ Cleared ☐ Death o	by Ar	Test Local rest by Anomalous	Refuse ther Ag	gency	ooperate	xtrad	Page		