I N C	Agenc	y Name		NSTON-SALE	M P	OLICE] IN	INCIDENT/INVESTIGATION REPORT							OCA 2220795						
I	ORI	NC	NC 034	10200												Reported Day		M T W 7 Time 18:08	T F ±S		
D E			ncident(s					tt I	At Found	SN	ı ı w	T F S	04					Hrs. IFS			
N	#1									Month	Day Yr	Т	'ime			n Secure Day Yr	Ţ	'ime	Hrs.		
T	#2 (#2 Crime Incident								X Com 04 30 2022 18:08 H:						rs 04 30 2022 18:08 Hrs. Offense Tract					
D A	Com 3425 Frontis St, Winston-salem NC														710.	3		323			
T	#3	#3 Crime Incident													Victim Residence Type						
A	Com														☐ Single Family ☐ Multi Family						
MO			d or Com MITTEI									Forcible Yes	X N/A	We	apon / Too	ls					
	No																				
	# of Victims Type Person Business Injury None Minor Loss of Teeth Prog/Alcohol Use:																				
V	0 Society Government Financial Institute Broken Bones Severe Lacerations Unknown Severe Lacerations No N/A																				
I		Victim/		Name (Last, First,							Victim of		B / Age	-	Sex	Relationsl	nip F	Resident	Status		
C T	V1		DA	ГА ОМІТТЕО							Crime #					To Offeno		□ Reside □ Non-R			
I			DA	IA OMITIED														☐ Unkno			
M	Home	Addre	SS			D	ATA OMI	ГТЕО)						Home Phone						
	Employer Name/Address DATA ON														Business Phone						
,	VYR Make Model Style						Color Lic/Lis Vin						Vin								
T H E R S I N V O L V E D	DATA OMITTED L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found																				
Status Codes	(Chec	k "OJ"	= Stolen column	if recovered for oth	er jur	risdiction)	Z = Seized	В = В	urnec	1 C=C	ounterreit / F	orgea	r = roun	ia							
	Victim # DCI Status Value OJ QTY						Property Description							Mal	ce/Mo	del	Seria	ıl Numbe	er		
P - R .																	DAT	A OMIT	TED		
																		FOR			
																		ORMAT			
																		ECURIT			
O P .																	P	URPOSE	£S		
Ε -																	ONL	Y THE F	прет		
R T																		E PROPE			
Y																1 **		EMS AI			
				+														PLAYED			
				+									+					REPOR			
•	Numb	er of V	ehicles S	tolen 0	Nui	mber Vehic	cles Recovere	d 0					<u> </u>								
	Office	r		ID			Officer Sig						Supervisor	Signat	ure						
ID	WILBURN, J. M. (16257)								(0)						Ç						
	Comp	lainant	Signatur	e			Case Status						— I a -	ocated Extradition Declined							
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	ive /Cleare	ed		☐ Unfoun ☐ Cleared ☐ Cleared ☐ Death of	by Ar	rest by And	Refuse other Ag	gency	ooperate	xirad	Page			

DCI-600F