I N	Agency Name WINSTON-SALEM POLICE								INCIDENT/INVESTIGATION						OCA 2222210				
C .	ORI	NC			1	REPORT							Date / Time Reported S M T W T F S Month Day Yr Time						
D E	NC NC 0340200 Crime Incident(s)									│ Att │ At Found │ - S M T W T F S						05   08   2022  15:50 Hrs.			
N T	#1			, ation Of Auto L	ı —	☐ Att   At Found   SMTWTFS   Last Mon CM Com   05   08   2022   15:50   Hrs   05							th Day Yr Time						
D.	#2	Crime I	ncident						$\rightarrow$	Location			13.	.50	1 03			Offense Tract	
A	A ☐ Com Nb 52/e Clem														nston-			212	
T A	#3	Jillie I	ncident						Att Com	Premise 7	уре					- 1	Victim Reside  Single Fami	nce Type ly	
МО			d or Com					•					Forcible Yes	X N/A	We	apon / Tools			
	# of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Us															lcohol Use:			
	Society																		
V I		Victim/		igious  L.E. Off  Name (Last, First,			ity   Othe	er/Un	know	n 🗆					Other			N/A Resident Status	
C T	V1	v ictiii/			Victim of Crime # DOB / Ag					/ Age	Race	Sex	To Offender	☐ Resident					
I	, ]		DA	ΓA OMITTED	1,										☐ Non-Resident				
М -	Home Address DATA OMIT									TTED						Home Phone			
	Employer Name/Address DATA OM														Business Phone				
•	VYR	Model	Color Lic/Lis Vin						Vin										
O T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes																			
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo	del Se	erial Number	
- - P - R	"						Tr. V I											TA OMITTED	
					_												IN	FOR FORMATION	
					-												11	SECURITY	
0																		PURPOSES	
Р <sup>-</sup> Е -																			
R T					$\dashv$													VE PROPERTY	
Y ·					$\dashv$												1 WEL	ITEMS ARE	
					-												D	ISPLAYED ON	
-																	I	2C REPORTS	
_					$\Box$														
	Numb	Number of Vehicles Stolen 0 Number Vehicles Recovered 0  Officer ID# Officer Signature Supervisor Signature																	
ID			R, C. J.	(16239)	Officer Sig	Officer Signature Supervi $(0)$							sor Signature						
	Complainant Signature Case State									Case Disposition:    Unfounded   Locate								adition Declined	
Status							☐ Inact	ive /Clea	ared			eared by eared by	y Arı y Arı	rest by Ano	Refuse ther Ag	ency	ooperate	Page 1	