I N	Agenc	y Name		NSTON-SALEN	1 P	OLICE] IN	INCIDENT/INVESTIGATION						OCA 2304509				
C I	ORI	NC	NC 034				REPORT						Date / Time Reported SMTWTFS Month Day Yr Time					
D E			ncident(s				Att At Found SMTWTFS Month Day Yr Time						O1 30 2023 12:29 Hrs. Last Known Secure SMTWTFS Month Day Yr Time					
N T	#1 C	ommi	ınicatir	ng Threats -intin	nida	tion, No	n Physical	_	Com	Month 01			7:me 2:29 Hrs			Day Yr 🖰	Time 12:28 Hrs.	
D	#2	Crime I	ncident							Location	of Incide	nt			NC	1	Offense Tract 322	
A T	#3	Crime I	ncident					_	Com Att	Premise 7		еек Рw,	, Winston-	saiem		Victim Reside		
A								Com					☐ Single Family ☐ Multi Family					
МО			d or Com										Forcible Yes [No	Weapon / Tools				
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																	
V	T ☐ Religious ☐ L.E. Officer Line of Duty ☐ Other/Unknown ☐ Internal ☐ Unconscious ☐ Other Major ☐ NO ☐ N/A															s □Unknown D □N/A		
I C		Victim/	Business	Name (Last, First,	Midd	le)		Victim of DC Crime #				B / Age	· 1			Resident Status Resident		
T I	V1 DATA OMITTED										1,	"	30	$\mid_{B}\mid$	F	1RU	☐ Non-Resident	
M	Home	Addre	ss										<u>В</u>		ne Phone	Unknown		
							TA OMITTED						D : N					
	Emplo	oyer Na	me/Addı	ress	D.	ATA OMI	ATA OMITTED						Business Phone					
	VYR	M	ake	Model	Sty	yle	Color		Lic	c/Lis			Vin					
O T H E R S I N V O L V E D		DATA OMITTED																
Status Codes	(Chec	k "OJ"	= Stolen column i	R = Recovered frecovered for other	D = I r juri	Damaged sdiction)	Z = Seized	B =	Burn	C = C	Counterfei	t / Forge	d F = Foun	d 				
	Victim # DCI Status Value OJ QTY					QTY	Property Description							Mal	ke/Mo		erial Number	
- - P - R _													DA	TA OMITTED FOR				
					+											IN	FORMATION	
																	SECURITY	
O P .					_												PURPOSES	
E ·					+											ON	ILY THE FIRST	
T																TWEL	VE PROPERTY	
Υ .																	ITEMS ARE	
					_												ISPLAYED ON	
-					+											F	2C REPORTS	
•	Numb	er of V	ehicles S	tolen 0	Nun	nber Vehic	cles Recovere	d	0				<u> </u>					
ID	Office:	r PRISO	N. R. A.	ID 1. (15721)	#		Officer Sig	natur	re				Supervisor WALSI			14646)		
עו	Complainant Signature Case								ase Status Case Disposition:					WALSH, D. W. (14646)				
Status	Further Investigation Further Investigation Inactive Cleared by Arrest Refuse to Cooperate Closed/Cleared Cleared by Arrest by Another Agency												Page 1					