I N	Agenc	y Name		NSTON-SALEN	. IN	CIE	CIDENT/INVESTIGATION						OCA 2320916						
C I	ORI	NG			-		REPORT						Date / Time Reported SMTWTFS Month Day Yr Time						
D E	10		NC 034					l —	A 44   I	At Four	nd.	I slav	l Tl W		05		24   2023	$8 \mid \stackrel{\text{Time}}{08:12} \text{ Hrs.}$	
N T	#1	Jime I		ning Money By .	Fals	se Prete	nse	_	Att Com	Month 05	D			T F S  Time D:00  Hrs			Day Yr 🖰	Time $11:36$ Hrs.	
D D	#2	Crime I	ncident	ung money by	- 000	<i>ye 1 rever</i>	, isc	_	Att	Location			<u>)   UC</u>	7.00   1113	1 03		/	Offense Tract	
A		~ · ·						_	Com				d, W	inston-sa	lem N			321	
T A	#3	rime I	ncident				Att Com	Premise	Тур	be				- 1	Victim Reside Single Fami	nce Type ly ∏Multi Family			
МО			d or Con						Forcib					Forcible					
МО	DATA OMITTED See In No.																		
	# of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:																		
V	1			igious   L.E. Off					know		•			Severe	Lacera Other	tions Majo		es Unknown O N/A	
I C	Victim/Business Name (Last, First, Middle)  Victim of DO Crime #														Race	Sex	Relationship To Offender	Resident Status	
T I	VI DATA OMITTED											1,		85	W	M	10 Official	☐ Non-Resident	
M	Home	ess						1,			"		ne Phone	Unknown					
	DATA OMIT									(TED									
	Employer Name/Address DATA OMI									ΓΤΕD						Business Phone			
,	VYR	M	ake	Model	St	yle	Color		Lic	c/Lis				Vin					
O 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 isdiction)	Z = Seized	B =	Burn	ied C=	Cou	ınterfeit / F	orged	F = Found	d				
	Victim #	DCI	Property Description								Mal	ce/Mo	odel Se	erial Number					
-	1								LOSS								DA	ATA OMITTED	
P - R					$\dashv$									-			IN	FOR FORMATION	
																		SECURITY	
O P -																		PURPOSES	
E ·					$\dashv$												ON	ILY THE FIRST	
R T					$\dashv$													VE PROPERTY	
Y ·					$\dashv$													ITEMS ARE	
																		ISPLAYED ON	
					_												F	2C REPORTS	
-	Numh	er of V	ehicles S	tolen 0	Nur	mber Vehi	cles Recovere	d	0										
	Office	r		ID			Officer Sig		-					Supervisor	Signat	ure	120)		
ID			. <i>E.</i> (15)			Case Status	s	Case Disposition:						<u>V. N. (15139)</u>					
Status	Comp		Signatul)	_			☐ Further ☐ Closed ☐ Closed	r Inve tive /Clea	ared			☐ Unfoun☐ Cleared☐ Cleared☐	ded by Ai by Ai	Locarrest   Locarr	Refuse ther Ag	gency	ooperate	radition Declined Page 1	