I N	Agenc	y Nam		NSTON-SALEN	IN	INCIDENT/INVESTIGATION							OCA 2321022								
C	ORI	NC	NC 02	10200			1	REPORT								Date / Time Reported SMTWTFS Month Day Yr Time					
D E	NC NC 0340200 Crime Incident(s)						│ │ │ │ Att │ At Found │ │ │ │ N │ T ॴ T F S									Day IF Time					
N T	#1		`	Discharging H	_	☐ Att   At Found   S M T W T F S   Yr Time								Month Day Yr Time 05   24   2023   20:33   Hrs.							
D	#2	Crime I	ncident		_	Att Com	Locatio	n o	f Incident				•	•		Offense Tract	_				
A T		Trime I	ncident			338 N Cameron Av, Winston-					lem NC 27101 222 Victim Residence Type										
A	#3	Jime i	nerdent					☐ Att Premise Type ☐ Com							☐ Single Family ☐ Multi Family						
МО			d or Con					•					Forcible Yes	X N/A	We	apon / To	ols				
		ictims	l	☐ Person		Business				Inju	rv	☐ None		Inor F	I oss o	of Teeth Drug/Alcohol Use:					
			IX So	ciety   Governm	ent	□ F	inancial Instit			[	•	Broken Bone	_	□ Severe	_			-	Unknow	n	
V I	$\frac{I}{I}$	Viotim		igious L.E. Off			uty   Othe	er/Un	know	n [	] Ir	victim of		nscious [	Other Race	<del>.</del>		No	□N/A Resident Statu		
C T	V1	v ictiii/			whice	iie)						Crime #		o / Age	Race	sex	To Offe	nder	☐ Resident		
I	1	DA	ΓA OMITTED		1,										☐ Non-Resid☐ Unknown	ent					
M	Home Address DATA OMI'									 ITED						Home Phone					
•	Employer Name/Address DATA OM								 ITTED						Business Phone						
,	VYR	M	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	D = i er jur	Damaged isdiction)	Z = Seized	B =	Burn	ied C=	: Co	ounterfeit / I	Forged	F = Four	ıd						
	Victim #	Property Description								Mal	Make/Model Serial Number										
							PMM) SPENT SHELL CASINGS								HORNA	NADY/WNA/ DATA OMITTED					
P - R - O																		INI	FOR FORMATION	_	
														+					SECURITY	-	
																			PURPOSES	-	
P :																					
R T Y																			LY THE FIRS'	—	
																	T		/E PROPERT` ITEMS ARE	<u>Y</u>	
					_														SPLAYED ON	<u>_</u>	
														+					C REPORTS	$\vdash$	
			ehicles S	tolen 0		nber Veh	cles Recovere		0												
ID	Office PER	Officer Sig	Officer Signature Supervisor STUM								or Signature MP, J. K. (14922)										
	Complainant Signature Case Sta								s Case Disposition:												
Status							☐ Further  ☐ Inact ☐ Closed ☐ Closed	tive /Clea	ared				l by A	Loc rrest [ rrest by Ander [	] Refuse other Ag	gency	Cooperate		dition Decline Page 1	:d	