I N	Agenc	y Nam		NSTON-SALEN] IN	INCIDENT/INVESTIGATION								OCA 2410404							
C	ORI	NG			-	REPORT								Date / Time Reported SMTWTFS Month Day Yr Time							
D E	10		NC 034			Att At Found SMTWTFS Month Day Yr Time								Day 11 Time 125 2024 11:24 Hrs. Last Known Secure SM T W T F S Month Day Yr Time 125 1							
N T	#1	Jime 1	nerdent(s) Overdos	e			_	Com	Mont	า								T	ime	
D .	#2		03 23 2024 11:24 03 23 2024 11:25											fense Tract							
A	☐ Com 1631 W Northwest Bv - F, W														F, Wins	nston-salem NC 321 Victim Residence Type					
T A	#3	Jrime I	ncident			Att Com	Premis	e Ty	ype								e Type □Multi Family				
МО	How A	Forcible Yes							☐ Yes [Weapon / Tools											
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															hol Use:					
	O Society Government Financial Institute Broken Bones Severe Lacerations Yes Unkno															_					
V I		Victim		igious L.E. Off Name (Last, First,			uty \(\subseteq Other	er/Un	iknow	'n	□ I ₁	nternal Victim					er Major No N/A e Sex Relationship Resident Status				
C T	V1														7150	race	SUA	To Offeno	ler 🗀	☐ Resident	
I			DA	ΓΑ OMITTED																□ Non-Residen □ Unknown	
M	Home Address DATA OMIT									ГТЕD							Home Phone				
	Employer Name/Address DATA OMI															Business Phone					
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Status Codes																					
	Victim #	DCI	Status		Property Description								Mak	ake/Model Serial Number							
P -							NEEDLE										DATA OMITTED				
																			DIE	FOR	
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R O					\dashv															URPOSES	
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	Numb		ehicles S	tolen 0		nber Vehi	Cles Recovere		0 re					Ls	Supervisor	Signati	ıre				
ID	BOY	'ETTE		(16251)		MCK.								or Signature AUGHAN, A. M. (14884)							
	Comp	lainant	Case Status	1 1							□ Loca	ated		пΕ	Extrad	ition Declined					
Status	IX In									ive Cleared by Arrest Ref							use to Cooperate				
							☐ Closed			hausted					est by Ano der □					Page 1	