I N	Agenc	y Name		VSTON-SALEN] IN	INCIDENT/INVESTIGATION							OCA 2410602							
I C	ORI	NC	NC 02	10200			1	REPORT							Date / Time Reported SMIWTFS Month Day Yr Time					
D E	10		NC 034		Att At Found SMIWTFS Month Day Yr Time								Day 11 Time 17:02 Hrs. Last Known Secure SM T W T F S Month Day Yr Time 17:02 Hrs. 17:02 Hrs.							
N T	#1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, Lost/stolen Lice	nse l	Plate		ı —	Com	Month 03				ime 7:02 Hrs					.me	
D.	#2	Crime I	ncident						_		_	Incident	f 1/	.02	7 03		20 202		ense Tract	
A		7 T						_	Com			*	d, W	inston-sa	lem N				114	
T A	#3	_rime i	ncident						Att Com	Premise	гур	pe					Victim Res		1 ype Multi Family	
МО			d or Com											Forcible Yes	X N/A	We	apon / Too	ls	-	
	□ No															CTL at Drug/Alashal User				
	# of Victims Type																			
V	0			igious 🔲 L.E. Off			ity 🔲 Othe	er/Un	know		_	ternal 🔲	Uncor	scious [Other		ajor No N/A			
I C		Victim/	Business	Name (Last, First,		Victim of DOB / Ag				Race	Sex	Relations To Offend	nip Re ler □	sident Status Resident						
T I	V1		DA	ΓA OMITTED												Non-Residen				
Μ .	Home Address DATA OMI															Home Phone Unknown				
	Employer Name/Address DATA OMI															Business Phone				
	VYR							Vin												
					Sty	,														
O T H E R S I N V O L V E D							DATA													
Status Codes																				
	Victim # DCI Status Value OJ Q1						Property Description								Mal	ake/Model Serial Number				
- - P - R															OMITTED					
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	Number of Vehicles Stolen 0 Number Vehicles Recovered 0 Officer ID# Officer Signature Supervisor Signature																			
ID	Office:	Officer Sig	natuı	re				_	Supervisor (0)	or Signature										
			Signatur				Case Status					Case Dispos								
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	ive /Clea	ared				by Ai	Test by Ander	Refuse other Ag	gency	Cooperate		ion Declined Page 1	