I N	Agenc	y Name		VSTON-SALEN	1 P	OLICE] IN	INCIDENT/INVESTIGATION						OCA 2410686						
C	ORI	NC	NC 034	10200			1	REPORT							Date / Time Reported SMTWTFS Month Day Yr Time					
D E		Crime I		X Att At Found SMT-WTFS Month Day Yr Time								03 27 2024 15:03 H Last Known Secure S M T H T Month Day Yr Time					Hrs. Fs			
N T	#1		, iking & Enterin	e	_	Com	Month 03				ime 1:35 Hrs				T	ime	Hrs.			
D	#2	2 Crime Incident															, , , = - =		fense Trac	
A T	Com 1523 Pleasant St, Winston-salem NC															27107 211 Victim Residence Type				
A	#3	Jillie I	ncident					☐ Att Premise Type ☐ Com						☐ Single Family ☐ Multi Family						
МО			d or Con MITTEI											Forcible Yes	N/A	We	apon / Too	ls		
	# of Victims Type None Minor Loss of Teeth Drug/Alcohol Use:															\dashv				
	2 Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow															own				
V I		liotim/		-			ity 🔲 Othe	er/Un	know	n 🗆	_				Other			No	□N/A Resident S	totus
C T	Victim/Business Name (Last, First, Middle) V1 DATA OMETERS Victim of Crime # 36														Race	sex	To Offeno	ler 🗀	Resider	nt
I	DATA OMITTED											1,			B	F			□ Non-Re □ Unknov	
M	Home Address DATA OMIT									ГТЕО						Home Phone				
	Employer Name/Address DATA OM														Business Phone					
,	VYR	Color Lic/Lis Vin						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 for other	D = I r juri	Damaged sdiction)	Z = Seized	B =	Burn	ed $C = C$	Cour	nterfeit / F	orged	F = Found	1					
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo	del	Seria	ıl Number	r
														DAT	A OMITT	ED				
P - R - O					+													INFO	FOR ORMATIO	ON
					+														ECURITY	
																		PU	URPOSES	s
P :																				
R.					_														Y THE FI	
Т Ү.					+												1 W		E PROPEI EMS AR	
					+	-+								+					PLAYED	
-					\dashv														REPOR	
			ehicles S			nber Vehic	cles Recovere		0					Cym	C: ·					
ID	Officer FER	RIS, A	A. P. (1	6003) ID	Officer Sig								or Signature Y, C. M. (15037)							
	Complainant Signature Case Stat											ase Dispos			,					
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	ive /Clea	ared				by Ar	Test by Ano	Refuse ther Ag	gency	ooperate	extrad	Page 1	ined