I N	Agenc	y Name		STON-SALEN	1 P	OLICE	IN	CIDENT/INVESTIGATION					OCA 2410709						
C ·	ORI	NG				02102	-	REPORT					Date / Time Reported SMTWTFS Month Day Yr Time						
D E	NC NC 0340200  Crime Incident(s)															03   27   2024  18:35 Hrs.			
N T	#1 Simple Assault-non Aggravated Assault									$\square$ Att   At Found   SMTMTFS   Last Known Secure   STM   Time   Month Day Yr Time   Last Known Secure   STM   Time   Month Day Yr Time   O3   27   2024   18:35   Hrs   O3   27   2024   18									
D .	#2		ncident	15541111 11011 1188	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				$\rightarrow$	Location			0.33   1111	<u>, 03</u>			18:16 Hrs. Offense Tract		
A	☐ Com 301 Medical Center Bv, Winston-sal																312		
T A	#3	rime I	ncident					☐ Att Premise Type ☐ Com						Victim Residence Type  ☐ Single Family ☐ Multi Family					
МО			d or Com										Forcible Yes	X N/A	We	apon / Tools			
																cohol Use:			
	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown																		
V I		Listims/		igious L.E. Off Name (Last, First,			ity 🔲 Othe	er/Un	know	n _			onscious [	Other	Majo		□N/A Resident Status		
C T	V1	v icuiii/			WHOO	ne)					Victin Crime		OB / Age 32	Race	Sex	Relationship To Offender	Resident     Resident		
I	DATA OMITTED										1,			$\mid B \mid$	F	1RU	☐ Non-Resident ☐ Unknown		
М -	Home	Addre	ess			D	ATA OMI	 TTED							Home Phone				
	Employer Name/Address DATA OMI													Business Phone					
	VYR	Model	Color   Lic/Lis   '						Vin	n									
									1										
О																			
T H																			
E	E																		
R S																			
	DATA OMITTED																		
I N																			
V																			
O L																			
V E																			
D																			
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column	R = Recovered for other	D = l r juri	Damaged isdiction)	Z = Seized	B =	Burn	C = C	Counterfe	it / Forge	d F = Foun	d					
	Victim # DCI Status Value OJ QTY						Property Description							Mal	ce/Mo	odel Se	rial Number		
- - P -																DA	TA OMITTED		
					$\dashv$											IN	FOR FORMATION		
					$\dashv$												SECURITY		
R O					$\dashv$												PURPOSES		
Р <sup>-</sup> Е -																			
R					$\Box$												LY THE FIRST		
Т Ү -					_												VE PROPERTY		
٠.					$\dashv$												ITEMS ARE SPLAYED ON		
-					$\dashv$												2C REPORTS		
-																			
			ehicles S			nber Vehic	cles Recovere		0					G.					
ID	Officer ID# Officer KELLOGG, T. N. (16218)								icer Signature Supervis						or Signature CE, R. D. (15708)				
	Complainant Signature Case State									Case Disposition:							adition Deed 1		
Status						☐ Further	ive		tion	□Cle	founded ared by A	Arrest Loc	Refus	e to C	ooperate	adition Declined			
								☐ Closed/Cleared ☐ Cleared by Arrest b						y Another Agency Prosecution Declined Page 1					