I N	Agency Name WINSTON-SALEM POLICE								NCIDENT/INVESTIGATION						OCA 2410894			
I 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						Day 17 Time 11:20 Hrs.			
N T	#1			, ation Of Auto L	aw-a	ıll Other	r	ı —	Com	Month 03			fime $1:20$ Hrs			Day Yr 🗀	Time $11:20$ Hrs.	
D.	#2	Crime I	ncident	<u> </u>					Att	Location	of Incident	•	•				Offense Tract	
A T		Trima I	ncident					_	Com	1253 S Premise T		ek Pw,	Winston-	salem		27127 Victim Resider	ngo Turno	
A	#3	Jillie I	neident						Att Com	riennse i	уре				- 1		lce Type ly	
МО			d or Com MITTEI					Forcible ☐ Yes ☐ No					Weapon / Tools					
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															lcohol Use:		
3.7	1 Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown Internal Unconscious Other Major No NA															_		
V I	Victim/Business Name (Last, First, Middle) Victim of 1													Race	<u> </u>		□N/A Resident Status	
C T	V1							Victim of Crime # DOB / Age					. 8			To Offender	☐ Resident ☐ Non-Resident	
I M	DATA OMITTED										1,						Unknown	
IVI ·	Home Address DATA OMI									ГТЕО					Home Phone			
	Employer Name/Address DATA OMI													Business Phone				
	VYR	Model							Vin									
O T H E R S I N V O L V E D	DATA OMITTED																	
Status Codes	(Chec	k "OJ"	= Stolen column	R = Recovered for other	D = D r juris	Damaged sdiction)	Z = Seized	B =	Burn	ed $C = C$	Counterfeit	/ Forgeo	l F = Foun	ıd				
	Victim # DCI Status Value OJ Q					QTY	Property Description							Mal	ce/Mc	odel Se	rial Number	
- - P - R															DATA OMITTED			
					+											IN	FOR FORMATION	
					+												SECURITY	
0																	PURPOSES	
Р ⁻ Е -																		
R					_												LY THE FIRST	
Т Ү -					+												VE PROPERTY ITEMS ARE	
-					+												SPLAYED ON	
-																	2C REPORTS	
	Numb		ehicles S	tolen 0		ber Vehic	cles Recovere		0				Cuparvisa	Signat	ure			
ID	TES	Officer Sig	Officer Signature Superv (0)						sor Signature									
	Complainant Signature Case State								Case Disposition:						D Eve	adition Declined		
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	ive /Clea	ıred		☐ Clear ☐ Clear	ed by A ed by A	rrest C	Refuse other Ag	gency	Cooperate	Page 1	