| I N | Agenc | e WIN | IN | INCIDENT/INVESTIGATION | | | | | | | OCA 2411060 | | | | | | | | |
|----------------------|--|--|-----------|------------------------|----------------------------|--------------|----------------------|----------|--|---|-------------|--------------------------|---------------|--|-----------------------|-------|--------------|--------------------------------|--|
| C · | ORI | NG | | | 02102 | 1 | REPORT | | | | | | | Date / Time Reported SMTWTFS Month Day Yr Time | | | | | |
| D E | 10 | | NC 034 | | | | | ۸ 44 ا | At Fou | nd | Islm | | | | 03 30 2024 15:2 | | | | |
| N T | #1 Crime Incident(s) **Traffic Accident-pp Or Pva** | | | | | | | | | ☐ Att At Found S M T W T F S Last Known Month Day Yr Time Last Known Month Day X Com 03 30 2024 15:25 Hrs 03 30 | | | | | | | | Time 15:25 Hrs. | |
| D . | #2 | Crime I | ncident | i aggre Heeraera j | PP | <i>31110</i> | | \vdash | Att | | | f Incident | † 1. | 0.23 1111 | 31 03 | | 0 2024 | Offense Tract | |
| A | | ~ · • | | | | | | _ | Com | | | Pattersor | ı Av, | Winston- | salem | | | 112 | |
| T A | #3 | rime I | ncident | | | | | | Att Com | Premise | гу | pe | | | | | Victim Resid | ence Type ily ∏Multi Family | |
| МО | | | d or Con | | | | | | | | | | | Forcible | NI/A | _ | apon / Tools | | |
| МО | D. | ATA O | MITTEL |) | | | | | | | | | ☐ Yes ☐ No | X N/A | | | | | |
| | # of V | ictims | ** | ☐ Person | | Business | inancial Instit | | | Inju | • | □ None | | _ |] Loss o | | | Alcohol Use: | |
| V | 0 | | | igious L.E. Off | | | | | nknow | - 1 | _ | broken Bone nternal 🏻 | | ☐ Severe | Lacera Other | | . – | es □Unknown O□N/A | |
| I C | | Victim/ | Business | Name (Last, First, | | | | | | | | | | Resident Status | | | | | |
| T I | V1 | | DA | ΓΑ OMITTED | | | | | Crime # | | | | | 10 Offender | □ Non-Residen | | | | |
| M · | Home | Addre | 288 | | | | | | | | | Hor | ne Phone | Unknown | | | | | |
| | DATA OMI | | | | | | | | | ΓΤΕD | | | | | | | | | |
| | Employer Name/Address DATA OM | | | | | | | | TTED | | | | | Business Phone | | | | | |
| • | VYR | M | ake | Model | St | tyle | Color | | Lie | c/Lis | | | | Vin | | | | | |
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| О | | | | | | | | | | | | | | | | | | | |
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| | DATA OMITTED | | | | | | | | | | | | | | | | | | |
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| V O | V O | | | | | | | | | | | | | | | | | | |
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| E | | | | | | | | | | | | | | | | | | | |
| D | | | | | | | | | | | | | | | | | | | |
| C4-4 | T _ T | ost C | _ Ctolon | R = Recovered | D - | Domoood | 7 - Saigad | D - | Dum | ad C- | Co | umtanfait / E | lounce d | E – Four | .d | | | | |
| Status Codes | (Chec | k "OJ" | column | f recovered for other | er jur | risdiction) | Z = Seized | В= | Бигп | ied C= | - Co | unterieit / F | orgea | F = Foun | ıa | | | | |
| | Victim # DCI Status Value OJ QTY | | | | | | Property Description | | | | | | | | Mal | ce/Mo | | erial Number | |
| - - P - R _ | | | | | | | | | | | | | D | ATA OMITTED FOR | | | | | |
| | | | | | | | | | | | | | | | | | I | NFORMATION | |
| | | | | | | | | | | | | | | | | | | SECURITY | |
| O P - | | | | | | | | | | | | | | | | | | PURPOSES | |
| E - R | | | | | | | | | | | | | | | | | 0 | NLY THE FIRST | |
| Т | | | | | | | | | | | | | | | | | TWE | LVE PROPERTY | |
| Υ - | | | | | | | | | | | | | | | | | | ITEMS ARE | |
| - | | | | | | | | | | | | | | | | | | P2C REPORTS | |
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| | | | ehicles S | tolen 0 | | mber Vehi | cles Recovere | | 0 | | | | - | Cumaer: | · Ci ~ | 1180 | | | |
| ID | | EEK, I | D. C. (1 | Officer Sig | Officer Signature Super (0 | | | | | | | visor Signature | | | | | | | |
| | Complainant Signature Case State | | | | | | | | Case Disposition: Investigation ☐ Unfounded ☐ L | | | | | | ated | | □ Ex | radition Declined | |
| Status | Inac | | | | | | | | | ive Cleared by Arrest | | | | | ☐ Refuse to Cooperate | | | | |
| | | | | | | | ☐ Closed | | | hausted | | □ Cleared | | | | | | Page 1 | |