I N	Agency Name WINSTON-SALEM POLICE								INCIDENT/INVESTIGATION						OCA 2411350				
C	ORI									REPORT						Date / Time Reported SMTWTFS Month Day Yr Time			
D E	NC NC 0340200 Crime Incident(s)									L A# At Found 인제 매 대 다 다						04 01 2024 23:49 Hrs.			
N T	#1 Violation Of Auto Law-all Other								☐ Att At Found SM T W T F S Last Month Month Day Yr Time Month Month Month 2024 23:49 Hrs 04							th Day Yr Time			
D D	#2	Crime I	ncident	arrent of Three E			<u> </u>		-		of Inciden		3.49 1111	3 04			Offense Tract		
A		~ · ·						_	Com 2999 Indiana Av/ivy Av, Winsto					on-sale	Salem NC 27105 121 Victim Residence Type				
T A	#3	rime i	ncident					☐ Att Premise Type ☐ Com						Single Family Multi Family					
МО			d or Con MITTEI						<u>'</u>				Forcible Yes	X N/A	We	apon / Tools			
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															lcohol Use:			
	X Society ☐ Government ☐ Financial Institute ☐ Broken Bones ☐ Severe Lacerations ☐ Yes ☐ Unknown															_			
V I															Majo				
C T	V1					,		Crime #					_, -, -, -, -, -, -, -, -, -, -, -, -, -,		~	To Offender	☐ Resident		
I M	DATA OWITTED											1,					☐ Non-Resident☐ Unknown		
171	Home Address DATA OMIT									ГТЕО					Home Phone				
	Employer Name/Address DATA OM								TTED					Business Phone					
,	VYR	M	ake	Model	Sty	yle	Color		Lic	e/Lis			Vin						
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 f recovered for other	D = I r juri	Damaged sdiction)	Z = Seized	B =	Burn	ed $C = C$	Counterfeit	/ Forge	d F = Four	ıd					
	Victim # DCI Status Value OJ QTY						Property Description							Mal	ce/Mc	odel S	erial Number		
- - P - R								1 7 1								DA	ATA OMITTED		
					_											IN	FOR NFORMATION		
					+											- 11	SECURITY		
ο .																	PURPOSES		
P -																			
R T					+												NLY THE FIRST LVE PROPERTY		
Y ·					\dashv											1 WLI	ITEMS ARE		
					+											D	ISPLAYED ON		
•																I	2C REPORTS		
					\prod		1 5	1											
	Numb		ehicles S	tolen 0		nber Vehic	cles Recovere Officer Sig		0 e				Supervisor	· Sjønat	ure				
ID	HIA	TT, J.	T. (160	081)								KORN			714)				
	Complainant Signature Case Stat									tion	Case Dis		: □ Loo	ated		□ Ext	radition Declined		
Status							☐ Inact	ive /Clea	ıred		☐ Clea	red by A red by A	Arrest by An] Refuse other Ag	gency	Cooperate	Page 1		