I N	Agene	y Ivain		STON-SALE	M P	POLICE	INCIDENT/INVESTIGATION						2411468				
C · I	ORI						REPORT					F	Date / Time Reported S M J W T F S Month Day Yr Time				
D			NC 034										04	02	2024	4 20:18 Hrs.	
E N	#1		ncident(s	·				□ Att	At Four Month	nd SM Day Yr	1 <u>-</u> Tim	F S ie	Last K Month	nown Sec 1 Day	ure L	SM <u></u> TFS Time	
Т			1	Assault-non Ag	gra	vated Ass	ault	X Com	04		4 20:1	8 Hrs	04	02		20:17 Hrs.	
D	Com 2150 Purks Mill Dd Winston ag															Offense Tract 323	
A T	шр (Crime I	ncident						Premise		ision-su	Victim Residence Type					
А	#3							Com		••				Sing	gle Fami	ly ∏Multi Family	
МО			d or Con								F	orcible] Yes []	T N/A	Weapon	/ Tools		
MO	DATA OMITTED																
v	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																
	Image: Society in Government in Financial Institute Image: Broken Bones in Severe Image: Society in Government in Financial Institute Image: Broken Bones in Severe Image: Society in Government in Financial Institute Image: Broken Bones in Severe Image: Society in Government in Financial Institute Image: Broken Bones in Severe Image: Society in Government in Financial Institute Image: Broken Bones in Severe Image: Society in Government in Financial Institute Image: Broken Bones in Severe Image: Society in Government in Financial Institute Image: Broken Bones in Severe Image: Society in Financial Institute Image: Broken Bones in Severe Image: Society in Financial Institute Image: Broken Bones in Severe Image: Society in Financial Institute Image: Broken Bones in Severe Image: Society in Financial Institute Image: Broken Bones in Severe Image: Society in Financial Institute Image: Broken Bones in Severe Image: Society in Financial Institute Image: Broken Bones in Severe Image: Society in Financial Institute Image: Broken Bones in Severe Image: Society in Financial Institute Image: Broken Bones in Severe Image: Society in Financial Institute Image: Broken Bones in Severe Image: Society in Severe Image															unknown	
v I	1	Victim/		Name (Last, First				.17 OIIKIIOW		Victim of	DOB / A		Other M Race		ionship		
C T	V1					,				Crime #	/ -	65		To O	ffender	🛛 Resident	
Ι			DA	FA OMITTED						1,			W	F 1S	Т	□ Non-Residen □ Unknown	
M ·	Home Address												1	Home Pho	one		
	Empl	Nor No	ume/Add	200				TA OMITTED									
	Empic	Jyei Ina	une/Auu	less		D	ATA OMI	ATA OMITTED					Business Phone				
	VYR	M	ake	Model	S	tyle	Color	Li	c/Lis		V	ïn	•				
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L																	
V E																	
D																	
Status	L = L	ost S	= Stolen	R = Recovered	D_=	Damaged	Z = Seized	B = Burr	ned C =	Counterfeit / F	Forged F	⁷ = Found	l				
Codes	(Chec Victim		column	if recovered for oth	ier ju	risdiction)											
- - - R	#	# DCI Status Value OJ QTY					Property Description						Make	/Model		rial Number	
															DA	TA OMITTED FOR	
															IN	FORMATION	
																SECURITY	
0 P -																PURPOSES	
P E -																	
R. T.																ILY THE FIRST	
Y ·															TWEE	ITEMS ARE	
-															D	ISPLAYED ON	
_															Р	2C REPORTS	
-	Number of Vehicles Stolen 0 Number Vehicles Recovered 0																
	Numb Officer		enicles S	0	Nu D#	mber Vehic	Officer Sig	. 0			Su	pervisor	Signatur	e			
ID	WAS	SZCZI		, L. (15222)			WELLS, Š. S. (15941)										
	Compl	lainant	Signatur	e				Case Status Case Disposition: ☐ Further Investigation ☐ Unfounded ☐ Lo						cated			
Status							Inact	☐ Inactive ☐ Cleared by Arrest ☐					Refuse to Cooperate				
							Closed		hausted	Cleared				ncy tion Decl	ined [Page 1	