I N	Agenc	y Nam		NSTON-SALEN	CIDENT/INVESTIGATION						OCA 2411471											
C I	ORI	NC							REPORT						Date / Time Reported SMIWTFS Month Day YF Time							
D E		NC NC 0340200  Crime Incident(s)								☐ Att   At Found								04   02   2024   21:12 Hrs.  Last Known Secure S M W T F S Month Day Yr Time				
N T	#1								Att   At Found   SM = W T F S   M								Day Yr D2   202		Time 21:11 Hi			
D	#2	Crime I	-			Att Com	Locatio	n of	Incident				•	•		ffense Tract						
A T		Trimo I	ncident	Trespassi	ng				1600 N Liberty St, Winston-sal					NC 27105 222 Victim Residence Type								
A	#3	Jillie I		tion Of City/cou	☐ Att Premise Type  ☐ Com							☐ Single Family ☐ Multi Family										
МО			d or Com MITTEI								Forcible  Yes  No	X N/A	We	apon / Too	ls							
	# of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:																					
V	1			ciety  Governm ligious  L.E. Of			Financial Institution		know		_	roken Bone		Severe	Lacera Other			Yes No	Unknow	vn		
I	Victim/Business Name (Last, First, Middle)   Victim of   DOB / Age   Rac														Race	<u> </u>	Relations	hip 1	□N/A Resident Stat	tus		
C T	V1		DA	ΓΑ OMITTED				Crime #					To Offen		☐ Resident ☐ Non-Resid	deni						
I M	$\mid I$																Unl			- 1		
	Home Address DATA OMIT									ГТЕD						Home Phone						
,	Employer Name/Address DATA OMI								ГТЕD						Business Phone							
,	VYR Make Model Style Co							olor Lic/Lis Vin						Vin								
H E R S I N V O L V E D	DATA OMITTED																					
Status Codes																						
Codes	Victim	Status		Property Description							Mal	Make/Model Serial Number										
	1	"						CCOTICS EQUIPMENT								CK PIPE DATA OMITTED				D		
P - R - O																			FOR	_		
																			ORMATION ECURITY	_		
																			URPOSES	-		
Р <sup>-</sup> Е -																				-		
R																			Y THE FIRS			
Т Ү :																	TW		E PROPERT	ľΥ		
																			ΓEMS ARE PLAYED Οῖ	NI NI		
																			CREPORTS			
			ehicles S	-		mber Veh	icles Recovere		0													
ID	Officer ID# Officer S ANDERSON, B. R. (15633)								e					Supervisor SMITE	or Signature "H, D. G. (14704)							
11/			Signatur		Case Statu		Case Disposition:										$\dashv$					
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	ive /Clea	ıred				by A	Loc rrest rrest by Ander	] Refuse other Ag	gency	ooperate	Extrac	lition Decline Page 1	ed		