I N	Agenc	y Name	e WIN] IN	INCIDENT/INVESTIGATION							OCA 2411541							
C ·	ORI	NC			1	REPORT								Date / Time Reported SMTHTFS Month Day Yr Time					
D E			NC 034					Λ++ I	At Four	nd	ISIM	l Tl-W	TI FI SI	04		03 20	7 Time 24 13:02 Hrs. SMT#TFS		
N T	#1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, raffic Accident- _l	on O	r Pva		ı —	Com	Month 04	Da			T F S Time 3:02 Hrs			yn Secure Day Yr 03 202	Time 4 13:02 Hrs	
D.	#2	Crime I	ncident	1	T				-	Location			F 13	.02	7 04		13 202	Offense Tract	
A		7 T	: 1					_	Com				Bv, W	inston-so	alem N			322	
T A	#3	Jillie I	ncident						Com	Premise	турс	е						dence Type mily	
МО			d or Com			Forcible ☐ Yes							Weapon / Tools						
	No No															^ T	, Denu	/Alashal Hass	
	# of Victims Type																		
V	<i>0</i>			igious 🔲 L.E. Off			ity 🔲 Othe	er/Un	know	. –	•	ernal 🔲	Uncor	scious [Other		or	No □N/A	
I C	Victim/Business Name (Last, First, Middle) Victim of DOB / Age Crime #														Race	Sex	Relationsh To Offend		
T I	V1		DA	ΓA OMITTED											☐ Non-Residen				
М -	Home Address DATA OMI									TTED						Home Phone Unknown			
	F.,1															Business Phone			
	VYR	ATA OMITTED Color Lic/Lis						Vin											
			ake	Model	Sty														
O T H E R S I N V O L V E D	DATA OMITTED L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found																		
Status Codes	(Chec	k "OJ"	= Stolen column i	R = Recovered f recovered for othe	D = L r juri:	Damaged sdiction)	Z = Seized	В=	Burn	ed C=	Cour	nterfeit / F	orged	F = Foun	ıd				
	Victim # DCI Status Value OJ QTY						Property Description								Mal	ce/Mo	odel	Serial Number	
-														DATA OMITTED					
P - R																		FOR INFORMATION	
																		SECURITY	
0																		PURPOSES	
Р ⁻ Е -																			
R.																		ONLY THE FIRST	
Т Ү																	1 W	ELVE PROPERTY ITEMS ARE	
-					-	+												DISPLAYED ON	
-																		P2C REPORTS	
_																			
			ehicles S	tolen 0		nber Vehic	cles Recovere		0					g ;	u.				
ID	Office:	Officer Sig	natur	e					Supervisor (0)	or Signature									
-	PHILLIPS, C. K. (16316) Complainant Signature Case Stat								Case Disposition:										
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	ive /Clea	ıred				by Ar	Test by Ander	Refuse other Ag	gency	ooperate	xtradition Declined Page 1	