I N	Agenc	y Name		NSTON-SALEN	1 P	OLICE] IN	INCIDENT/INVESTIGATION							OCA 2411738					
C	OKI NC NC 0340200														Date / Time Reported S M T W T F S Month Day Yr Time					
D E		Crime Incident(s)						Att At Found SMTWTFS Month Day Yr Time								O4 O5 2024 O5:34 Hrs				
N T	#1			Trespassi	ng			_	Com	Month 04				ime :34 Hrs					Time 05:33	Hrs.
D	Com 5024 Dayon Dd Wington galom M														NC 2	710	.	C	Offense T	ract
A T	#3	Crime I	ncident					☐ Com 5034 Raven Rd, Winston-salem ☐ Att Premise Type						IVC Z	Victim Residence Type					
A		. 441	1 C		Com							☐ Single Family ☐ Multi Family Weapon / Tools								
MO			d or Com										Forcible Yes No							
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																			
V	2 Society Government Financial Institute Broken Bones Severe Lacerations Ves Unknown Internal Unconscious Other Major No NA															I				
I C	Victim/Business Name (Last, First, Middle) Victim of DOB / A														Race	Sex	Relations To Offen	hip der	Resident	t Status
T I	V1 DATA OMITTED Crime # 1,																To offen		Non-	Resident
M	Home	Addre	SS									Home Phone Unknow					iown			
	Employer Name/Address DATA OM DATA OM														Business Phone					
	VYR	ATA OMITTED Color						Vin												
				Model		yle														
O T H E R S I N V O L V E D	DATA OMITTED																			
Status Codes	(Chec	k "OJ"	= Stolen column i	R = Recovered if recovered for other	D = I er juri	Damaged isdiction)	Z = Seized	В=	Burn	ed C=0	Cour	nterfeit / F	orged	F = Foun	d					
	Victim # DCI Status Value OJ QTY					QTY	Property Description								Mak	ake/Model Serial Number				
- P - R _														DAT	FOR	TTED_				
					\dashv													INI	FORMAT	ΓΙΟΝ
																			SECURI	
O P .																			PURPOS	ES
E - R																		ONI	Y THE	FIRST
T.																	TW		E PROP	
Υ .																	ITEMS ARE			
																			SPLAYE	
																		P2	C REPO	RTS
-	Numb	er of V	ehicles S	tolen 0	Nun	nber Vehi	cles Recovere	d	0											—
	Office	r		ID		V CIII	Officer Sig		_				T	Supervisor			1500=			-
ID				S. (16050)	Cons Stat	ŴHE							LAÑ, L. T. (15232)							
Status	Comp	ашапі	Signatur				☐ Inact									ooperate	_	dition De		