I N	Agenc	y Name		NSTON-SALEN	OLICE	INCIDENT/INVESTIGATION							OCA 2412221							
C	ORI	NC	NC 034	10200			1	REPORT								Date / Time Reported SMTWTFS Month Day Yr Time				
D E			ncident(s					Att	tt   At Found   SI센 T				TFS	04			Time   22:14 Hrs.   M T W T F S			
N T	#1			, Suspicious P	erso	n		ı —	Com	Month 04	D			T F S Time 2:14  Hrs			yn Secui Day 08   2	ğr — 2024	Time $22:13$ Hrs.	
D	#2	Crime I	ncident	1				Att	Location	n of	Incident				•			Offense Tract		
A T		Trima I	ncident					_	☐ Com 628 E Sprague St, Winston-sale ☐ Att Premise Type							VC 27107 212 Victim Residence Type				
A	#3	Jillie i	neident					Com	Tiennse	тур	DE .							ce Type y		
МО			d or Com MITTEI					Forcible Yes							Weapon / Tools					
	# of Victims   Type   Person   Business   Injury   None   Minor   Loss of Teeth   Drug/Alcohol Use:															cohol Use:				
	O Society Government Financial Institute Broken Bones Severe Lacerations Yes															Unknown				
V I		Victim/		igious  L.E. Off Name (Last, First,			ity   Othe	er/Un	know	n _		ternal   Victim of		nscious [	<del>-</del>	r Major No N/A Sex Relationship Resident Status				
C T	V1	· ictiii							Crime #	DOI	o / Age	Race	SCA	To Off	ender	☐ Resident				
I	' -		DA	ΓA OMITTED												☐ Non-Residen ☐ Unknown				
M	Home Address DATA OMI									TTED						Home Phone				
	E1 N/A 11							TA OMITTED								Business Phone				
,	VYR	Color Lic/Lis Vin							Vin											
T H E R S I N V O L V E D	DATA OMITTED																			
Status Codes																				
	Victim #		Property Description								Mak	ake/Model Serial Number								
P - R - O	π	# DCI Status Value OJ QTY Property De							2 cscript.	Seription					10, 1110	, 401		TA OMITTED		
																		TNII	FOR	
					_														FORMATION SECURITY	
					_														PURPOSES	
P :																				
R																			LY THE FIRST	
T Y					_												7		/E PROPERTY	
					_														SPLAYED ON	
					+														C REPORTS	
-																				
			ehicles S			nber Vehic	cles Recovere		0											
ID	Office:		F. I (1	ID 6280)	Officer Sig	natur	re					Supervisor			15814)	)				
ענ	GARCIA, F. I. (16280)  Complainant Signature  Case								Status Case Disposition:						COBS, T. R. (15814)					
Status			-				☐ Further ☐ Inact ☐ Closed	ive /Clea	ared			☐ Unfoun☐ Cleared☐ Cleared☐	ded by Ai by Ai	Loc rrest [ rrest by Ander [	] Refuse other Ag	gency	Cooperat	ē —	Page 1	