I N	Agenc	y Name		VSTON-SALEN] IN	INCIDENT/INVESTIGATION							OCA 2412366								
I C	ORI	NC	NC 034	10200			1	REPORT								Date / Time Reported SMTWTFS Month Day Yr Time					
D E			ncident(s		Att At Found SMTHTFS Month Day Yr Time								04 10 2024 00:13 Hrs. Last Known Secure S M T W T F S Month Day Yr Time								
N T	#1		ı —										Time 00:12	Hrs.							
D	D #2 Crime Incident													Winston	salom	NC	27105	C	Offense Trac 124	t	
A T	#3	Crime I	ncident		☐ Com 235 Summit Point Ln, Winston ☐ Att Premise Type						·saiem	Victim Residence Type									
A								Com								☐ Single Family ☐ Multi Family					
МО			d or Com MITTEI										Forcible Yes No								
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																				
V	0			ciety Government Gious L.E. Off			inancial Institu ity Othe		know	- 1	_	roken Bone nternal 🏻		☐ Severe	Lacera Other		–	Yes No	□ Unkno	own	
I C		Victim/		Name (Last, First,	Victim of DOB / A						Race	Sex		hip	Resident St						
T I	DATA OMITTED																10 Offen		☐ Non-Re	siden	
M ·	Home Address																Home Phone				
	Employer Name/Address DATA OMI								TTED												
	Emplo	me/Addi	ATA OMI	TA OMITTED							Business Phone										
	VYR	M	ake	Model	Sty	/le	Color		Lic	:/Lis				Vin							
T H E R S I N V O L V E D	DATA OMITTED																				
Status Codes	(Chec	k "OJ"	= Stolen column	R = Recovered for other	D = I r juri:	Damaged sdiction)	Z = Seized	B =	Burn	ed C=	: Coı	unterfeit / I	Forged	F = Foun	ıd						
	Victim # DCI Status Value OJ QTY						Property Description								Mal	ake/Model Serial Number					
P - R - O p -														DA	FOR	ED_					
																		INI	FORMATIC	ON	
																			SECURITY		
					_]	PURPOSES	-	
E - R																		ONI	LY THE FII	RST	
Т																	TV		E PROPER		
Y]	TEMS ARI	E	
-																DISPLAYED ON					
-					\dashv													P2	C REPORT	1S	
-	Numb	er of V	ehicles S	tolen 0	Num	nber Vehic	cles Recovere	d	0											—	
ID	Office	r // DD	MI	ID		Officer Sig	Officer Signature Supervis								or Signature						
ID			M. J. (Signatur	(16275) e	Case Status	s			10	Case Dispos	ER, K. M. (15921)					-					
Status	r		<u> </u>				☐ Further☐ Inact☐ Closed									Cooperate		dition Decl	ined		