I N	Agenc	y Name		NSTON-SALEN	IN	INCIDENT/INVESTIGATION							OCA 2412589							
C	ORI	NC	NC 034	40200		REPORT							Date / Time Reported SMTWIFS Month Day YF Time							
D E		Crime I	☐ Att At Found								04 11 2024 16:04 Hrs									
N T	#1				_	Com	Month 04	1			Time 5:00 Hrs					Time	Hrs.			
D	D #2 Crime Incident													•			•		ffense Tra	
A T	Crime Incident Com 201 N Church St, Winston-salem NC																01 Victim Res	idona	111	
A	#3	Jillie I	ncident					Com	Tienns	СТУ	pe				- 1	Single F		• 1	amily	
МО			d or Con MITTEI		Forcible ☐ Yes ☐ No						Weapon / Tools									
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																			
37	0			ciety Governm			inancial Institu		knou		_	Broken Bon		Severe	Lacera Other		–		Unkn	own
V I	Unconscious Victim/Business Name (Last, First, Middle) Other/Unknown Internal Unconscious Victim of DOB / Age														Race	<u> </u>		No hip	□N/A Resident S	Status
C T	V1		DA	ΓΑ OMITTED								Crime #		C			To Offen	der [☐ Resider	
I M			DA	TA OMITTED															☐ Unknov	
141	Home Address DATA OMI									TTED						Home Phone				
	Employer Name/Address DATA OM								TTED						Business Phone					
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D																				
Status Codes																				
	Victim		Property Description								Mak	re/Mo	ndel	Seri	al Number					
,	# DCI Status Value OJ QTY							Troperty Description							IVICE	Ake/Model Serial Number DATA OMITTED				
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ID		N, O.	L. (149		Officer Sig								sor Signature KIN, K. L. (15100)							
	Complainant Signature Case State									Case Disposition:								Extra	dition Dec	lined
Status				Inact	tive	ve Cleared by Arrest Refuse to Cooperate							au al	aruon Dec	incu					
							☐ Closed			hausted				rrest by Ander					Page 1	