I N	Agenc	y Name		NSTON-SALEN	1 P	OLICE	DEDORT							OCA 2412733						
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N	#1	Crime Incident(s)							I i		Day Yr	Т	T ₹ S ime			n Secure Say Yr		Time	2	<u>:</u> 2
T	Crime Incident											4 13	:01 Hrs	04	1	2 202		13:0		lrs.
D	#2	Jrime I	ncident								cation of Incident			alam	NC 27101 Offense 7					
A T		Crime Incident Com 1501 Mount Zion Pl, Winston-sc												aiem 1	Victim Residence Type					
A	#3 Crime incident														- 1	Single F				mily
	How A	Attacke	d or Com	nmitted									Forcible			apon / Too				_
MO	DATA OMITTED See No. 1 No. 2 N/A															_				
v	# of V	ictims	Type		_	D:				Injury	□ None	TX M		Lagga	f Tool	h Dru	o/Alc	ohol l	Use:	_
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use: Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown															wn				
	1			igious 🔲 L.E. Of					nown	. –	nternal 🔲		scious \Box	Other			No			
I	Victim/Business Name (Last, First, Middle) Victim of DOB / Age Racco														ce Sex Relationship Resident Status					itus
C T	V1		DA	ΓΑ OMITTED							Crime #		29			To Offen			esident	
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	Office		7037 -	ID 11(252)	#		Officer Sig	nature					Supervisor			1.45.00				\neg
ID				W. (16352)			G ~	COLL						INŠ, A. B. (14763)						
	Comp	lainant	Signatur	e			Case Status	S Case Disposition: r Investigation ☐ Unfounded ☐ Loc						eated						
Status							☐ Closed	ive /Cleare	d		☐ Cleared	by Ar		Refuse ther Ag	gency	ooperate			ge 1	—

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