I N	Agency Name WINSTON-SALEM POLICE									CIDENT/INVESTIGATION					OCA 2412971			
C	ORI	NC	NC 034	10200						REP	ORT				Time	Reported S	<u>, , , , , , , , , , , , , , , , , , , </u>	
D E	C		ncident(s					Att At Found SMTWTFS Month Day Yr Time						04 14 2024 16:35 Hrs. Last Known Secure S M T W T F S Month Day Yr Time				
N T	#1			Drug Viola	tion	es.			- 1	Month 04			lime 5:35 Hrs				Time 16:34 Hrs.	
D	#2 C		ncident	1	,	• ,	. ,		Att Location of Incident Offense T								Offense Tract	
A T	из С		arapne ncident	rnalia -manufa	ctur	ing/equi	ртепт	Att	100 W Fifth St, Other County I Premise Type				/C 2/1	Victim Residence Type				
A	#3																y □Multi Family	
МО			d or Con MITTEI										Forcible Yes No	Weapon / Tools				
V	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																	
	I ☐ Religious ☐ L.E. Officer Line of Duty ☐ Other/Unknown ☐ Internal ☐ Unconscious ☐ Other Major ☐ NO ☐ N/A															s □Unknown □N/A		
I C															Sex	Relationship To Offender	Resident Status Resident	
T I	V1		DA	ΓΑ OMITTED				1,2					10 Offender	☐ Non-Resident				
M	Home Address														Hon	ne Phone	Unknown	
	DATA OMIT									ſTED								
	Employer Name/Address DATA OMI									ΓTED					Business Phone			
,	VYR Make Model Style Color							Lic/Lis Vin					Vin	•				
T H E R S I N V O L V E D	DATA OMITTED																	
Status Codes	L = Lo	st S	= Stolen	R = Recovered	D =	Damaged	Z = Seized	B =	Burn	ed C = C	Counterfeit / I	Forged	F = Foun	d				
	(Check "OJ" column if recovered for other jurisdiction) Victim # DCI Status Value OJ QTY								Property Description					Mak	e/Mo	del Se	rial Number	
P - R - O	#	# DC1 Status Value OJ Q1Y 11 6							1 7 1					17141	. C / 1110		TA OMITTED	
		23	6				CELL PHONE									n.	FOR	
		23 13	6				CELL PHONE KELTEC HANDGUN								INFORMATION SECURITY			
		13				1	KELIEC HANDGUN								PURPOSES			
P :																		
R																	LY THE FIRST	
Т Ү.																	VE PROPERTY	
1																	ITEMS ARE SPLAYED ON	
																	2C REPORTS	
			ehicles S			mber Veh	icles Recovere		0				G :	G.				
ID	Officer ID# Officer Sig ROCHELLE, M. D. (16060)								e				Supervisor BROSS			920)		
			Signatur				Case Statu		ati-		Case Dispo						adition Deed 1	
Status							☐ Furthe: ☐ Inact ☐ Closed	tive /Clea	red			l by A	Loc rrest rrest by And	Refuse other Ag	gency	ooperate	Page 1	