I N	Agenc	y Name		STON-SALEN	1 P	OLICE] IN	CIDENT/INVESTIGATION						OCA 2413164					
C I	ORI	NG				1	REPORT						Date / Time Reported SMIWTFS Month Day Yr Time						
D E			NC 034		☐ Att						Day 17 Time								
N T	#1		, Assault-non Agg	ı —	Com	Month 04	Γ			Time 1:54 Hrs			Day Yr	Time $04:53$ Hrs.					
D	#2		ncident				Location	n of	Incident				•		Offense Tract				
A T	Crime Incident Com 665 W Fourth St, Winston-salem																01 Victim Reside	111	
A	#3	Jime 1	nerdent						Com	Tremise	1 7 1	ρC						ily □Multi Family	
МО			d or Com MITTEI											Forcible Yes	X N/A	We	apon / Tools		
	# of Victims Type No Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															Alcohol Use:			
**	Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknow															_			
V I		Victim/		Name (Last, First,			ity U Otne	er/Un	iknow	'n _		ternal Victim of		ascious B / Age	Race				
C T	V1		DΛ	ΓA OMITTED					Crime #		27			To Offender					
I M				TA OMITTED								1,			W	M	1RU	Unknown	
	Home Address DATA OMIT									TTED						Home Phone			
,	Employer Name/Address DATA OMI								ГТЕD						Business Phone				
1	VYR	M	ake	Model	St	yle	Color		Lic	:/Lis				Vin	l				
T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes	L = L (Chec	ost S k "OJ"	= Stolen column	R = Recovered f recovered for other	D = i	Damaged isdiction)	Z = Seized	B =	Burn	ed C=	Coı	unterfeit / F	orged	F = Found	d				
	Victim # DCI Status Value OJ QTY						Property Description							Mak	ce/Mo	del S	erial Number		
- - P - R													D.	ATA OMITTED					
					_												T)	FOR NFORMATION	
																		SECURITY	
O .																		PURPOSES	
E ·																	0	NLY THE FIRST	
R T					\dashv													VE PROPERTY	
Υ .																		ITEMS ARE	
																	Ε	ISPLAYED ON	
					-]	P2C REPORTS	
-	Numb	er of V	ehicles S	tolen 0	Nor	nher Vebi	rles Recovera	d	0										
	Officer ID# Officer Signature Supervisor Signature																		
ID			A. T. (1 Signatur			c	ČHU						E, V. N. (15139)						
Status	Comp	iamalli	Signatur	-			Case Status Further Inact Closed	r Inve tive /Clea	ared			☐ Unfoun☐ Cleared☐ Cleared☐	ded by Ai by Ai	Locarrest Locarrest Locarrest Locarrest Locarrest by Ano	Refuse ther Ag	gency	ooperate F	Page 1	