I N	Agenc	y Name		NSTON-SALEN] IN	NCIDENT/INVESTIGATION						OCA 2413228							
C ·	ORI	NC				1	REPORT							Date / Time Reported SMIWTFS Month Day Yr Time					
D E	NC NC 0340200 Crime Incident(s)									│ Att │ At Found │ S M 五 W T F S │ Month Day Yr Time						Day 16 16 16 17 16 17 16 17 17			
N T	#1			, ation Of Auto L	aw-a	ıll Other	r	ı —	Com	Month 04	Da			Time $5:21$ Hrs				Time 16:20 Hrs.	
D.	#2	Crime I	ncident						Att	Location	of I	ncident		•				Offense Tract	
A T		Trima I	ncident						Com 1059 E Brookline St/sink St, Winston-salem Att Premise Type Vio								m NC Victim Resid	213	
A	#3	JIIIIC I	neident						Att Com	1 Tellise	турс							ence Type nily	
МО			d or Com						•					Forcible Yes	X N/A	We	apon / Tools		
	No															Alcohol Use:			
V I		Victim/		igious L.E. Off Name (Last, First,			ity 🔲 Othe	er/Un	know	n 🗆		ernal Victim of		scious [Other				
C T	V1	v ictiii/							Crime #	DOL	o / Age	Race	sex	To Offende	Resident				
I	` -		DA	ΓA OMITTED					1,						☐ Non-Resident				
М -	Home Address DATA OMIT									 ITED						Home Phone			
	Employer Name/Address DATA OM														Business Phone				
	VYR	Color Lic/Lis Vin						Vin											
O 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 i	R = Recovered f recovered for other	D = I r juri	Damaged sdiction)	Z = Seized	B =	Burn	ed $C = C$	Coun	nterfeit / F	orged	F = Foun	d				
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo	del S	Serial Number	
- - P - R		Troy or Fran													D	ATA OMITTED			
					_												ī	FOR NFORMATION	
					\dashv													SECURITY	
0																		PURPOSES	
Р ⁻ Е -																			
R T					_													NLY THE FIRST LVE PROPERTY	
Y ·					_												IWE	ITEMS ARE	
-					\dashv	_											т	DISPLAYED ON	
-					\dashv													P2C REPORTS	
_																			
	Numb	Number of Vehicles Stolen 0 Number Vehicles Recovered 0 Officer ID# Officer Signature Supervisor Signature																	
ID	KNI	GHT,	М. С. ((15006)	Officer Sig	Officer Signature Supervisor Signature GEDDINGS, H. L. (14851)													
	Complainant Signature Case State									Case Disposition:								tundition De 1'	
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	ive /Clea	ared				by Ar	Test by Ander] Refuse other Ag	gency	ooperate	Page 1	