I N	Agenc	y Name		NSTON-SALE	M P	POLICE	, IN	INCIDENT/INVESTIGATION							OCA 2414160				
C I	ORI				71 1	OLICL	\exists	REPORT							Date / Time Reported S M 표 W T F S				
D			NC 034												04 23 2024 16:31 Hrs.				
E N	#1	rime I	ncident(s		~			ı —	Att Com	At Foun Month	D			T F S			n Secure Day Yr	SMTWTF Time	
T		Crime I	ncident	Vandali.	sm				\rightarrow	04 Location			1 16	5:31 Hrs	04		23 2024	16:30 Hr Offense Tract	s.
D A	Com 1399 N Main St/e Fourteenth St, W															ston-	-salem	112	
T A	#3	Crime I	ncident					Att	Premise Type					Victim Residence Type ☐ Single Family ☐ Multi Family					
	How A	Attacke	d or Con	nmitted				Ш	Com					Forcible		_	apon / Tool		пу
MO			MITTEI											☐ Yes [X N/A				
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:															Alcohol Use:	П		
* 7	1			ciety Governn			Financial Instit		lenov		•	oken Bone		Severe	Lacera	tions		Yes Unknown	1
V I		Victim/		Name (Last, First,			uty 🔲 Out	21/ ()1	IKIIOW	11		Victim of		nscious B / Age	Race				ıs
C T	V1					ŕ					- 1	Crime #		37			To Offende	Resident	
I M			DA	ΓΑ OMITTED								1,			B	F		☐ Unknown	eni
IVI	Home	Addre	ess		ГТЕО								Home Phone						
	Employer Name/Address DATA OMI															Business Phone			
	VYR	l M	ake	Model	tyle	Color							Vin						
	0		ISS			PCAR	WHI			NC									4
O T H E R S I N V O L V E D	DATA OMITTED																		
Status Codes	(Chec	k "OJ"	= Stolen column	R = Recovered if recovered for oth	D = er jur	Damaged risdiction)	Z = Seized	B =	Burn	C = 0	Cou	interfeit / F	orged	F = Found	1				
	Victim #	DCI	Status	Value		Property Description							Make/Model Serial Number						
	1 03 4 1 AUT							JTOMOBILE									Ι	OATA OMITTED	\Box
P - R - O	1	PCA	TARG			1	0 WHI ,	NC							VISS			FOR INFORMATION	_
																		SECURITY	-
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P :																			
R																		ONLY THE FIRST	—
Т Ү.																	TWI	ITEMS ARE	_
•																		DISPLAYED ON	-
-																		P2C REPORTS	-
	Number of Vehicles Stolen 0 Number Vehicles Recovered 0 Officer ID# Officer Signature Supervisor Signature													_					
ID	Officer MAS		C. (16			Officer Sig	Officer Signature Superv							sor Signature GER, J. C. (14943)					
	Compl	ainant	Signatur	e			Case Statu	Status Case Disposition:						— I a	ntod.			stradition Dealis -	d
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	tive l/Clea	ared			☐ Cleared ☐ Cleared	by A	Trest by Ano	Refuse ther Ag	gency	ooperate	rtradition Decline	u —