I N	Agenc	y Name	e WIM	. IN	INCIDENT/INVESTIGATION								OCA 2414289						
C	ORI				1	REPORT								Date / Time Reported SMTHTFS Month Day Yr Time					
D E	10		NC 034						A 1	A + E		ГеГм	त ना ज	[메 티 인	04		24 202	Time 4 14:40 Hrs. SMTWTFS	
N	#1	Jillie I) Larceny From 1	ı —	☐ Att At Found SM TH TFS Last Known Secundary Att Found Sm TH TFS Last Known Secundary Att Com 04 24 2024 14:40 Hrs 04 22 22 23 24 24 26 26 26 26 26 26									Time				
T	#2	Crime I	ncident	Lurceny From I	<i>рин</i>	uing			\rightarrow	04 Location			7 14	1:40 Hrs	04		2024	06:00 Hrs Offense Tract	
D A	□ Com 1925 Silas Creek Pw, Winston-sa																	312	
T A	#3	Crime I	ncident						Att Com	Premise '	Туре	e					Victim Reside	ence Type ily ∏Multi Family	
	How A	Attacke	d or Con	nmitted				Forcible						Forcible	Weapon / Tools				
МО	D.	ATA O	MITTEL)										☐ Yes [☐ No	X N/A				
	# of Victims Type Person Business Injury None Minor Loss of Teeth Drug/Alcohol Use:																		
V	1 Society Government Financial Institute Broken Bones Severe Lacerations Unknown Internal Unconscious Other Major Yes Unknown															_			
I	Victim/Business Name (Last, First, Middle) Victim of DOB / Age														Race		Relationship	Resident Status	
C T	V1		DA	ΓΑ OMITTED					Crime #		58			To Offender	□ Resident □ Non-Residen				
I M									1,			В	F		Unknown				
	Home Address DATA OMIT									ГТЕD						Home Phone			
	Employer Name/Address DATA OMI									ГТЕО					Business Phone				
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P .	1	1 07 7 1 COMPUTER HARDWARE/SOFTWARE													FOR				
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ID	Office JOY	r NER	S. W. (ID 16313)	Officer Sig	natur	e					Supervisor DAY, T	or Signature T. A. (15478)						
ıν	JOYNER, S. W. (16313) Complainant Signature Case State											ase Dispos				J 17			
Status										Investigation Unfounded Located						DExtooperate	radition Declined		
Janus	Is ☐ Inactive ☐ Cleared by Arrest☐ Closed/Cleared☐ Cleared by Arrest☐ Closed/Leads Exhausted☐ ☐ Death of Offender												rest by Ano	ther Ag	gency	Г	Page 1		