I N	Agenc	y Name		NSTON-SALEN] IN	INCIDENT/INVESTIGATION							OCA 2414389						
C	ORI	NG				1	REPORT								Date / Time Reported SMTWFFS Month Day Yr Time				
D E			NC 034		Att At Found							TIFISI	Day 11 Time 11 O4 Hrs. Last Known Secure S M T W T F S Month Day Yr Time 11 O4 Hrs. 12 O5						
N T	#1			, raffic Accident- _i	pp C	or Pva		ı —	Com	Month 04				ime :04 Hrs				Time ! 11:04 Hrs.	
D	#2	Crime I	ncident	, -,,,, ,	F				-	Location			- 11	.04	7 04		.5 2029	Offense Tract	
A		7 T	: 1 4					_	☐ Com 5200 University Pw - BLK, Win						ston-salem NC 123 Victim Residence Type				
T A	#3	Jime I	ncident						Com	Piemise	Type					- 1		nily ∏Multi Family	
МО			d or Com					Forci							e Weapon / Tools				
	No No															6 m	ı Dena/	Alachal Haar	
	# of Victims Type																		
V	<i>0</i>			igious 🔲 L.E. Off			ity 🔲 Othe	er/Un	know	. –		rnal 🔲	Uncor	scious [Other	Majo	r _1	No □N/A	
I C		Victim/	Business	Name (Last, First,	Victim of Crime #					3 / Age	Race	Sex	Relationshi To Offende	P Resident Status Resident					
T I	V1 DATA OMITTED																	☐ Non-Residen	
M	Home Address DATA OMI									TTED						Home Phone Unknown			
	Employer Name/Address DATA ON															Business Phone			
	VYR	Color Lic/Lis						Vin											
					Sty	Ź													
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 for other	D = I er juri	Damaged isdiction)	Z = Seized	B =	Burn	ed $C = C$	Count	terfeit / F	orged	F = Foun	d				
	Victim # DCI Status Value OJ QTY						Property Description								Mak	e/Mo	del	Serial Number	
- P - R															OATA OMITTED				
					\dashv													FOR INFORMATION	
					\dashv													SECURITY	
ο .																		PURPOSES	
P :																			
R.					_													NLY THE FIRST	
T Y					-	-								+			IWE	ITEMS ARE	
					\dashv									+				DISPLAYED ON	
																		P2C REPORTS	
			ehicles S			nber Vehic	cles Recovere		0					<u> </u>	G.				
ID	Office:		G. S. (1	5871)	Officer Sig	natur	e					Supervisor (0)	or Signature						
	Complainant Signature Case Sta								s Case Disposition:										
Status							☐ Further ☐ Inact ☐ Closed ☐ Closed	ive /Clea	ıred				by Ar	□ Loc rest □ rest by And	Refuse other Ag	gency	ooperate	Page 1	