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Agency Name  
**WINSTON-SALEM POLICE**

## INCIDENT/INVESTIGATION REPORT

OCA  
2422869

ORI  
NC NC 0340200

Date / Time Reported  
Month Day Yr Time  
06 | 27 | 2024 | 11:13 Hrs.

|    |   |                              |          |                        |                            |                            |                            |                            |                             |                            |                            |
|----|---|------------------------------|----------|------------------------|----------------------------|----------------------------|----------------------------|----------------------------|-----------------------------|----------------------------|----------------------------|
| #1 | Crime Incident(s)<br><b>Obtaining Money By False Pretense</b> | <input type="checkbox"/> Att | At Found | Month Day Yr Time      | <input type="checkbox"/> S | <input type="checkbox"/> M | <input type="checkbox"/> T | <input type="checkbox"/> W | <input type="checkbox"/> Th | <input type="checkbox"/> F | <input type="checkbox"/> S |
|    | <input checked="" type="checkbox"/> Com                       | 06   27   2024   11:13       | Hrs.     | 06   27   2024   11:12 | Hrs.                       |                            |                            |                            |                             |                            |                            |

|    |                |                              |  |  |  |  |  |  |                             |
|----|----------------|------------------------------|--|--|--|--|--|--|-----------------------------|
| #2 | Crime Incident | <input type="checkbox"/> Att | Location of Incident<br><b>1205 Silas Creek Pw, Winston-salem NC 27127</b> |  |  |  |  |  | Offense Tract<br><b>313</b> |
|----|----------------|------------------------------|--|--|--|--|--|--|-----------------------------|

|    |                |                              |              |  |  |  |  |  |   |
|----|----------------|------------------------------|--------------|--|--|--|--|--|---|
| #3 | Crime Incident | <input type="checkbox"/> Att | Premise Type |  |  |  |  |  | Victim Residence Type<br><input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family |
|----|----------------|------------------------------|--------------|--|--|--|--|--|---|

MO How Attacked or Committed  
DATA OMITTED

Forcible  
 Yes  N/A  No

Weapon / Tools

V # of Victims: **1**

Type:  Person  Business  
 Society  Government  Financial Institute  
 Religious  L.E. Officer Line of Duty  Other/Unknown

Injury:  None  Minor  Loss of Teeth  
 Broken Bones  Severe Lacerations  
 Internal  Unconscious  Other Major

Drug/Alcohol Use:  
 Yes  Unknown  
 No  N/A

|        |   |                                |                        |                  |                 |                          |  |
|--------|---|--------------------------------|------------------------|------------------|-----------------|--------------------------|--|
| VICTIM | Victim/Business Name (Last, First, Middle)<br><b>DATA OMITTED</b> | Victim of Crime #<br><b>1,</b> | DOB / Age<br><b>19</b> | Race<br><b>B</b> | Sex<br><b>F</b> | Relationship To Offender | Resident Status<br><input checked="" type="checkbox"/> Resident<br><input type="checkbox"/> Non-Resident<br><input type="checkbox"/> Unknown |
|--------|---|--------------------------------|------------------------|------------------|-----------------|--------------------------|--|

Home Address: **DATA OMITTED** Home Phone:

Employer Name/Address: **DATA OMITTED** Business Phone:

|     |      |       |       |       |         |     |
|-----|------|-------|-------|-------|---------|-----|
| VYR | Make | Model | Style | Color | Lic/Lis | Vin |
|-----|------|-------|-------|-------|---------|-----|

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### DATA OMITTED

**Status Codes** L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found  
(Check "OJ" column if recovered for other jurisdiction)

| Victim # | DCI | Status | Value | OJ | QTY | Property Description | Make/Model | Serial Number   |
|----------|-----|--------|-------|----|-----|----------------------|------------|---|
|          | 77  | 7      |       |    | 1   | FURNITURE            |            | DATA OMITTED  |
|          |     |        |       |    |     |                      |            | FOR INFORMATION SECURITY PURPOSES ONLY THE FIRST TWELVE PROPERTY ITEMS ARE DISPLAYED ON P2C REPORTS |

Number of Vehicles Stolen: **0** Number Vehicles Recovered: **0**

|  |                   |   |
|--|-------------------|---|
| Officer ID#<br><b>SIMON, S. T. (15870)</b> | Officer Signature | Supervisor Signature<br><b>BURKS, C. M. (15216)</b> |
|--|-------------------|---|

|                       |   |   |
|-----------------------|---|---|
| Complainant Signature | Case Status<br><input checked="" type="checkbox"/> Further Investigation<br><input type="checkbox"/> Inactive<br><input type="checkbox"/> Closed/Cleared<br><input type="checkbox"/> Closed/Leads Exhausted | Case Disposition:<br><input type="checkbox"/> Unfounded <input type="checkbox"/> Located <input type="checkbox"/> Extradition Declined<br><input type="checkbox"/> Cleared by Arrest <input type="checkbox"/> Refuse to Cooperate<br><input type="checkbox"/> Cleared by Arrest by Another Agency<br><input type="checkbox"/> Death of Offender <input type="checkbox"/> Prosecution Declined |
|-----------------------|---|---|

**Status**