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Agency Name
WINSTON-SALEM POLICE

INCIDENT/INVESTIGATION REPORT

OCA
2423099

ORI
NC NC 0340200

Date / Time Reported
 Month Day Yr Time
06 | 29 | 2024 | 06:27 Hrs.

#1	Crime Incident(s) Overdose	<input type="checkbox"/> Att	At Found	Month	Day	Yr	Time	S	M	T	W	T	F	S
		<input checked="" type="checkbox"/> Com	06	29	2024	06:27								

Last Known Secure	Month	Day	Yr	Time	S	M	T	W	T	F	S
	06	29	2024	06:26							

#2	Crime Incident	<input type="checkbox"/> Att	Location of Incident										Offense Tract
		<input type="checkbox"/> Com	5918 University Pw, Winston-salem NC 27105										124

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

MO	How Attacked or Committed	Forcible	Weapon / Tools	
	DATA OMITTED	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> No		

# of Victims 0	Type				Injury				Drug/Alcohol Use:	
	<input type="checkbox"/> Person <input type="checkbox"/> Business	<input type="checkbox"/> Society	<input type="checkbox"/> Government	<input type="checkbox"/> Financial Institute	<input type="checkbox"/> None	<input type="checkbox"/> Minor	<input type="checkbox"/> Loss of Teeth	<input type="checkbox"/> Yes	<input type="checkbox"/> Unknown	
	<input type="checkbox"/> Religious	<input type="checkbox"/> L.E. Officer	<input type="checkbox"/> Line of Duty	<input type="checkbox"/> Other/Unknown	<input type="checkbox"/> Broken Bones	<input type="checkbox"/> Severe Lacerations	<input type="checkbox"/> No	<input type="checkbox"/> N/A		

VICTIM	#	Victim/Business Name (Last, First, Middle)				Victim of Crime #	DOB / Age	Race	Sex	Relationship To Offender	Resident Status
		DATA OMITTED								<input type="checkbox"/> Resident	<input type="checkbox"/> Non-Resident

Home Address	Home Phone
DATA OMITTED	

Employer Name/Address	Business Phone
DATA OMITTED	

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
								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**

ID	Officer HORSLEY, S. A. (14880)	ID#	Officer Signature	Supervisor Signature CLARK, D. C. (15090)
Status	Complainant Signature		Case Status	Case Disposition:
			<input type="checkbox"/> Further Investigation	<input type="checkbox"/> Unfounded <input type="checkbox"/> Located <input type="checkbox"/> Extradition Declined
			<input type="checkbox"/> Inactive	<input type="checkbox"/> Cleared by Arrest <input type="checkbox"/> Refuse to Cooperate
			<input type="checkbox"/> Closed/Cleared	<input type="checkbox"/> Cleared by Arrest by Another Agency
			<input checked="" type="checkbox"/> Closed/Leads Exhausted	<input type="checkbox"/> Death of Offender <input type="checkbox"/> Prosecution Declined