I N C I D E N T	Agency Name *WINSTON-SALEM POLICE*	**INCIDENT/INVESTIGATION REPORT**

INCIDENT DATA

Agency Name: *WINSTON-SALEM POLICE*
ORI: *NC NC 0340200*

OCA: *2423610*
Date / Time Reported — S M T **W** T F S
Month 07 | Day 03 | Yr 2024 | Time 12:36 Hrs.

#1 Crime Incident(s): *Drug Violations* — ☐ Att ☒ Com
At Found S M T **W** T F S — Month 07 | Day 03 | Yr 2024 | Time 12:36 Hrs.
Last Known Secure S M T **W** T F S — Month 07 | Day 03 | Yr 2024 | Time 12:35 Hrs.

#2 Crime Incident — ☐ Att ☐ Com
Location of Incident: *8191 North Point Bv, Winston-salem NC 27105*
Offense Tract: *121*

#3 Crime Incident — ☐ Att ☐ Com
Premise Type:
Victim Residence Type: ☐ Single Family ☐ Multi Family

MO
How Attacked or Committed: DATA OMITTED
Forcible: ☐ Yes ☐ No ☒ N/A
Weapon / Tools:

VICTIM

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

V1 Victim/Business Name (Last, First, Middle): DATA OMITTED
Victim of Crime #: *1,*
DOB / Age:
Race:
Sex:
Relationship To Offender:
Resident Status: ☐ Resident ☐ Non-Resident ☐ Unknown

Home Address: DATA OMITTED
Home Phone:

Employer Name/Address: DATA OMITTED
Business Phone:

VYR	Make	Model	Style	Color	Lic/Lis	Vin

OTHERS INVOLVED

DATA OMITTED

PROPERTY

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
1	*11*	*EVID*			*1*	*DIGITAL SCALE*	*DIGITAL/Scale*	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: *HOOKER, M. L. (16131)*   ID#:   Officer Signature:
Supervisor Signature: *JACOBS, A. P. (14962)*

Status

Complainant Signature:

Case Status:
☐ Further Investigation
☐ Inactive
☐ Closed/Cleared
☐ Closed/Leads Exhausted

Case Disposition:
☐ Unfounded ☐ Located ☐ Extradition Declined
☐ Cleared by Arrest ☐ Refuse to Cooperate
☐ Cleared by Arrest by Another Agency
☐ Death of Offender ☐ Prosecution Declined

Page 1