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Agency Name  
**WINSTON-SALEM POLICE**

## INCIDENT/INVESTIGATION REPORT

OCA  
**2425507**

ORI  
**NC NC 0340200**

Date / Time Reported  
 Month Day Yr Time  
**07 | 18 | 2024 | 05:26 Hrs.**

#1	Crime Incident(s) <b>Autobreaking And Larceny</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"/> F <input type="checkbox"/> S	Last Known Secure	Month Day Yr Time	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> F <input type="checkbox"/> S
		<input checked="" type="checkbox"/> Com	<b>07   18   2024   05:26 Hrs</b>	<b>07   18   2024   05:25 Hrs.</b>				

#2	Crime Incident	<input type="checkbox"/> Att	Location of Incident	Offense Tract
		<input type="checkbox"/> Com	<b>531 Akron Dr, Winston-salem NC 27105</b>	<b>122</b>

#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  
**DATA OMITTED**

Forcible  
 Yes  N/A  No

Weapon / Tools

V I C T I M # 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

V I C T I M #1	Victim/Business Name (Last, First, Middle) <b>DATA OMITTED</b>	Victim of Crime #	DOB / Age	Race	Sex	Relationship To Offender	Resident Status
		<b>1,</b>	<b>37</b>	<b>W</b>	<b>F</b>	<b>IRU</b>	<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <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
<b>2004</b>	<b>FORD</b>	<b>EXPEDITIO</b>	<b>MP</b>	<b>BLU</b>	<b>VX69164, NC</b>	<b>1FMRU17W84LA24526</b>

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**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
<b>1</b>	<b>77</b>	<b>7</b>			<b>1</b>	<b>UNKNOWN ITEMS</b>		<b>DATA OMITTED</b>
<b>1</b>	<b>03</b>	<b>4</b>			<b>1</b>	<b>WINDOW</b>	<b>FORD/Expedition</b>	<b>FOR</b>
<b>1</b>	<b>PCA</b>	<b>TARG</b>			<b>1</b>	<b>2004 BLU, VX69164 NC</b>	<b>FORD Expedition</b>	<b>INFORMATION SECURITY PURPOSES</b>
								<b>ONLY THE FIRST TWELVE PROPERTY ITEMS ARE DISPLAYED ON P2C REPORTS</b>

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

Officer ID# <b>SCHAEFER, B. S. (16050)</b>	Officer Signature	Supervisor Signature <b>WHITE, R. D. (15708)</b>
Complainant Signature	Case Status <input type="checkbox"/> Further Investigation <input checked="" type="checkbox"/> Inactive <input type="checkbox"/> Closed/Cleared <input type="checkbox"/> Closed/Leads Exhausted	Case Disposition: <input type="checkbox"/> Unfounded <input type="checkbox"/> Located <input type="checkbox"/> Extradition Declined <input type="checkbox"/> Cleared by Arrest <input type="checkbox"/> Refuse to Cooperate <input type="checkbox"/> Cleared by Arrest by Another Agency <input type="checkbox"/> Death of Offender <input type="checkbox"/> Prosecution Declined

**Status**