

I  
N  
C  
I  
D  
E  
N  
T  
I  
F  
I  
C  
A  
T  
I  
O  
N  
N  
U  
M  
B  
E  
R

Agency Name  
**WINSTON-SALEM POLICE**

## INCIDENT/INVESTIGATION REPORT

OCA  
2425709

ORI  
NC NC 0340200

Date / Time Reported  
 Month Day Yr Time  
 07 | 19 | 2024 | 18:24 Hrs.

#1	Crime Incident(s) <b>Drug Violations</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"/> T	<input type="checkbox"/> F	<input type="checkbox"/> S
		<input checked="" type="checkbox"/> Com	07	19	2024	18:24					

Last Known Secure  
 Month Day Yr Time  
 07 | 19 | 2024 | 18:23 Hrs.

#2	Crime Incident	<input type="checkbox"/> Att	Location of Incident <b>3300 N Patterson Av - BLK, Winston-salem NC</b>							Offense Tract <b>121</b>
----	----------------	------------------------------	--	--	--	--	--	--	--	-----------------------------

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

V I C T I M  
#1 Victim/Business Name (Last, First, Middle)  
DATA OMITTED

Victim of Crime #: **I,**

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
-----	------	-------	-------	-------	---------	-----

O  
T  
H  
E  
R  
S  
  
I  
N  
V  
O  
L  
V  
E  
D

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**

Officer <b>TEAGUE, J. G. (16065)</b>	ID#	Officer Signature	Supervisor Signature <b>WYLIE, D. L. (15804)</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	Page 1
-----------------------	---	---	--------