

I
N
C
I
D
E
N
T
D
A
T
A

Agency Name
WINSTON-SALEM POLICE

INCIDENT/INVESTIGATION REPORT

OCA
2431474

ORI
NC NC 0340200

Date / Time Reported
 Month Day Yr Time
09 | 03 | 2024 | 08:38 Hrs.

#1 Crime Incident(s)
Trespassing

Att
 Com
At Found
Month Day Yr Time
09 | 03 | 2024 | 08:38 Hrs.

Last Known Secure
Month Day Yr Time
09 | 03 | 2024 | 08:37 Hrs.

#2 Crime Incident

Att
 Com
Location of Incident
736 Faircloth Av, Winston-salem NC 27106

Offense Tract
114

#3 Crime Incident

Att
 Com
Premise Type

Victim Residence Type
 Single Family Multi Family

MO How Attacked or Committed
DATA OMITTED

Forcible
 Yes N/A
 No

Weapon / Tools

V # of Victims
2
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 #1 Victim/Business Name (Last, First, Middle)
DATA OMITTED

Victim of Crime #
1,

DOB / Age
56

Race
B

Sex
M

Relationship To Offender
INE

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

DATA OMITTED

I
N
V
O
L
V
E
D

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 FIELD, I. O. (15835) | ID# | Officer Signature | Supervisor Signature MATTISON, G. M. (15167) |
| Complainant Signature | | Case Status <input type="checkbox"/> Further Investigation <input 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