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Agency Name
WINSTON-SALEM POLICE

INCIDENT/INVESTIGATION REPORT

OCA
2433447

ORI
NC NC 0340200

Date / Time Reported
 Month Day Yr Time
09 | 18 | 2024 | 11:22 Hrs.

| | | | | | | | |
|----|--|---|--|---|---|--|-----------------------------|
| #1 | Crime Incident(s) Autobreaking And Larceny | <input checked="" type="checkbox"/> Att <input type="checkbox"/> Com | At Found Month Day Yr Time 09 18 2024 11:00 Hrs | <input type="checkbox"/> Att <input checked="" type="checkbox"/> Com | Location of Incident 2743 Reynolda Rd, Winston-salem NC 27106 | Last Known Secure Month Day Yr Time 09 14 2024 10:56 Hrs. | Offense Tract 123 |
|----|--|---|--|---|---|--|-----------------------------|

| | | | | | |
|----|------------------------------------|---|--------------|--|---|
| #2 | Crime Incident Vandalism | <input type="checkbox"/> Att <input checked="" type="checkbox"/> Com | Premise Type | <input type="checkbox"/> Att <input type="checkbox"/> Com | Victim Residence Type <input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family |
|----|------------------------------------|---|--------------|--|---|

| | | | | | |
|----|----------------|--|--------------|--|---|
| #3 | Crime Incident | <input type="checkbox"/> Att <input type="checkbox"/> Com | Premise Type | <input type="checkbox"/> Att <input type="checkbox"/> Com | 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

VICTIM #1 Victim/Business Name (Last, First, Middle)
DATA OMITTED

Victim of Crime # **1,2**

DOB / Age

Race

Sex

Relationship To Offender **IRU**

Resident Status
 Resident
 Non-Resident
 Unknown

Home Address **DATA OMITTED**

Home Phone

Employer Name/Address **DATA OMITTED**

Business Phone

| | | | | | | |
|--------------------|---------------------|-------------------------|--------------------|---------------------|------------------------------|---------------------------------|
| VYR 2007 | Make CHEV | Model EXPRESS | Style PK | Color WHI | Lic/Lis CP8656, NC | Vin 1GBJG31UX71154355 |
|--------------------|---------------------|-------------------------|--------------------|---------------------|------------------------------|---------------------------------|

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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 |
|----------|------------|-------------|-------|----|----------|----------------------------|---------------------|--|
| 1 | 38 | 4 | | | 2 | DRIVER SIDE DOOR | | DATA OMITTED |
| 1 | PIC | TARG | | | 1 | 2007 WHI, CP8656 NC | CHEV Express | 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 ID# RICHARDSON, S. G. (15580) | Officer Signature | Supervisor Signature MATTISON, G. M. (15167) |
| 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