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Agency Name  
**WINSTON-SALEM POLICE**

ORI  
**NC NC 0340200**

## INCIDENT/INVESTIGATION REPORT

OCA  
**2434518**

Date / Time Reported  
 Month Day Yr Time  
**09 | 26 | 2024 | 12:36 Hrs.**

Last Known Secure  
 Month Day Yr Time  
**09 | 26 | 2024 | 12:35 Hrs.**

|    |   |                              |   |  |   |                              |
|----|---|------------------------------|---|--|---|------------------------------|
| #1 | Crime Incident(s)<br><b>Communicating Threats -intimidation, Non Physical</b> | <input type="checkbox"/> Att | <input checked="" type="checkbox"/> Com | At Found<br>Month Day Yr Time<br><b>09   26   2024   12:36 Hrs</b>         | <input type="checkbox"/> Att  | <input type="checkbox"/> Com |
| #2 | Crime Incident  | <input type="checkbox"/> Att | <input type="checkbox"/> Com            | Location of Incident<br><b>1712 S Stratford Rd, Winston-salem NC 27103</b> | Offense Tract<br><b>322</b>   |                              |
| #3 | Crime Incident  | <input type="checkbox"/> Att | <input type="checkbox"/> Com            | Premise Type   | Victim Residence Type<br><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/Business Name (Last, First, Middle)  
**DATA OMITTED**

Victim of Crime # **1,** DOB / Age **32** Race **W** Sex **F** Relationship To Offender **IRU** 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 |
|-----|------|-------|-------|-------|---------|-----|

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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          |
|----------|-----|--------|-------|----|-----|----------------------|------------|------------------------|
|          |     |        |       |    |     |                      |            | <b>DATA OMITTED</b>    |
|          |     |        |       |    |     |                      |            | <b>FOR</b>             |
|          |     |        |       |    |     |                      |            | <b>INFORMATION</b>     |
|          |     |        |       |    |     |                      |            | <b>SECURITY</b>        |
|          |     |        |       |    |     |                      |            | <b>PURPOSES</b>        |
|          |     |        |       |    |     |                      |            | <b>ONLY THE FIRST</b>  |
|          |     |        |       |    |     |                      |            | <b>TWELVE PROPERTY</b> |
|          |     |        |       |    |     |                      |            | <b>ITEMS ARE</b>       |
|          |     |        |       |    |     |                      |            | <b>DISPLAYED ON</b>    |
|          |     |        |       |    |     |                      |            | <b>P2C REPORTS</b>     |

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

|        |   |   |   |   |
|--------|---|---|---|---|
| ID     | Officer<br><b>PHILLIPS, C. K. (16316)</b> | ID#   | Officer Signature   | Supervisor Signature<br><b>MCKAUGHAN, A. M. (14884)</b> |
| Status | Complainant Signature                     | Case Status<br><input type="checkbox"/> Further Investigation<br><input checked="" type="checkbox"/> Inactive<br><input type="checkbox"/> Closed/Cleared<br><input type="checkbox"/> Closed/Leads Exhausted | Case Disposition:<br><input type="checkbox"/> Unfounded <input type="checkbox"/> Located <input type="checkbox"/> Extradition Declined<br><input type="checkbox"/> Cleared by Arrest <input type="checkbox"/> Refuse to Cooperate<br><input type="checkbox"/> Cleared by Arrest by Another Agency<br><input type="checkbox"/> Death of Offender <input type="checkbox"/> Prosecution Declined | <b>Page 1</b>   |