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Agency Name
WINSTON-SALEM POLICE

INCIDENT/INVESTIGATION REPORT

OCA
2434881

ORI
NC NC 0340200

Date / Time Reported
 Month Day Yr Time
09 | 29 | 2024 | 04:04 Hrs.

#1	Crime Incident(s) Agg Aslt Disch Fa/occ Dwell/veh	<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	09 29 2024 04:04 Hrs	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"/> T	<input type="checkbox"/> F

#2	Crime Incident	<input type="checkbox"/> Att	Location of Incident 2805 Indiana Av, Winston-salem NC 27105					<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 type="checkbox"/> Com	Offense Tract 121											

#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 # 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	#	Victim/Business Name (Last, First, Middle) DATA OMITTED	Victim of Crime # 1	DOB / Age 25	Race B	Sex F	Relationship To Offender	Resident Status <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown
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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
	13	EVID			29	FIREARMS/AMMUNITION		DATA OMITTED
2	PCA	TARG			1	2018 WHI, VDM3336 NC	HOND Civic Ex	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 TUCKER, C. R. (16056)	Officer Signature	Supervisor Signature DAVENPORT, P. A. (15030)
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Complainant Signature	Case Status <input checked="" 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	Page 1
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