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Agency Name  
**WINSTON-SALEM POLICE**

## INCIDENT/INVESTIGATION REPORT

OCA  
**2437568**

ORI  
**NC NC 0340200**

Date / Time Reported  
 Month Day Yr Time  
**10 | 19 | 2024 | 12:47 Hrs.**

#1	Crime Incident(s) <b>Vandalism</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	<b>10</b>	<b>19</b>	<b>2024</b>	<b>12</b>	<b>47</b>									
			Last Known Secure			Month	Day	Yr	Time	S	M	T	W	T	F	S
			<b>10</b>	<b>19</b>	<b>2024</b>	<b>12</b>	<b>46</b>									

#2	Crime Incident	<input type="checkbox"/> Att	Location of Incident								Offense Tract
		<input type="checkbox"/> Com	<b>1503 Williamson St, Winston-salem NC 27107</b>								<b>211</b>

#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 **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,** DOB / Age **52** Race **W** Sex **F**

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
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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>1</b>	<b>30</b>	<b>4</b>			<b>1</b>	<b>STRUCTURES - OTHER DWELLING</b>		<b>DATA OMITTED</b>
								<b>FOR INFORMATION SECURITY PURPOSES ONLY THE FIRST TWELVE PROPERTY ITEMS ARE DISPLAYED ON P2C REPORTS</b>

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

Officer <b>AZMON, A. E. (15425)</b>	ID#	Officer Signature	Supervisor Signature <b>NAVY, C. M. (15037)</b>
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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
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**Status**