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Agency Name
WINSTON-SALEM POLICE

INCIDENT/INVESTIGATION REPORT

OCA
2438517

ORI
NC NC 0340200

Date / Time Reported
 Month Day Yr Time
10 | 26 | 2024 | 11:12 Hrs.

| | | | | | | | | | | | |
|----|---|---|-----------|-------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| #1 | Crime Incident(s) Drug Violations | <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 | 10 | 26 | 2024 | 11:12 | | | | | |

Last Known Secure
 Month Day Yr Time
10 | 26 | 2024 | 11:11 Hrs.

| | | | | | | | | |
|----|----------------|------------------------------|--|--|--|--|--|--|
| #2 | Crime Incident | <input type="checkbox"/> Att | Location of Incident 4010 Fargo Dr, Winston-salem NC 27106 | | | | | <input type="checkbox"/> Offense Tract 114 |
|----|----------------|------------------------------|--|--|--|--|--|--|

| | | | | | | | | |
|----|----------------|------------------------------|--------------|--|--|--|--|--|
| #3 | Crime Incident | <input type="checkbox"/> Att | Premise Type | | | | | <input type="checkbox"/> 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 I C T I M # 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

V I C T I M V1 Victim/Business Name (Last, First, Middle)
DATA OMITTED

Victim of Crime # **I,** DOB / Age Race Sex 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 |
|----------|-----------|----------|-------|----|----------|---------------------------------|------------|--|
| 1 | 77 | 6 | | | 3 | MARIJUNANA PARAPHERNALIA | | 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 SEREIKA, A. J. (16078) | ID# | Officer Signature | Supervisor Signature BOGER, J. C. (14943) |
|--|-----|-------------------|---|

| | | |
|-----------------------|--|---|
| 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 |
|-----------------------|--|---|