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Agency Name
WINSTON-SALEM POLICE

INCIDENT/INVESTIGATION REPORT

OCA
2439122

ORI
NC NC 0340200

Date / Time Reported
 Month Day Yr Time
10 | 30 | 2024 | 16:17 Hrs.

#1 Crime Incident(s)
Larceny- All Other

At Found
 Month Day Yr Time
 Att Com
10 | 30 | 2024 | 16:17 Hrs

Last Known Secure
 Month Day Yr Time
 Single Family Multi Family
10 | 30 | 2024 | 16:16 Hrs.

#2 Crime Incident

Location of Incident
854 W Fourth St, Winston-salem NC 27101

Offense Tract
411

#3 Crime Incident

Premise Type

Victim Residence Type

MO How Attacked or Committed
DATA OMITTED

Forcible
 Yes N/A
 No

Weapon / Tools

V
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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

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

Victim of Crime #
1,

DOB / Age
31

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)

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| Victim # | DCI | Status | Value | OJ | QTY | Property Description | Make/Model | Serial Number |
|----------|-----|--------|-------|----|-----|----------------------|------------|-----------------|
| 1 | 09 | 7 | | | 3 | CREDIT/DEBIT CARDS | | DATA OMITTED |
| 1 | 65 | 7 | | | 1 | SOCIAL SECURITY CARD | | FOR |
| 1 | 65 | 7 | | | 1 | DRIVER LICENSE | | INFORMATION |
| 1 | 25 | 7 | | | 1 | WALLET | KATE SPADE | SECURITY |
| | | | | | | | | PURPOSES |
| | | | | | | | | ONLY THE FIRST |
| | | | | | | | | TWELVE PROPERTY |
| | | | | | | | | ITEMS ARE |
| | | | | | | | | DISPLAYED ON |
| | | | | | | | | P2C REPORTS |

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

| | | |
|--|---|---|
| Officer GRABS, D. M. (16310) | Officer Signature | Supervisor Signature CROKE, B. K. (15602) |
| 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 |