

I  
N  
C  
I  
D  
E  
N  
T  
I  
F  
I  
C  
A  
T  
I  
O  
N

Agency Name  
**WINSTON-SALEM POLICE**

## INCIDENT/INVESTIGATION REPORT

OCA  
**2439165**

ORI  
**NC NC 0340200**

Date / Time Reported  
 Month Day Yr Time  
**10 | 31 | 2024 | 08:27 Hrs.**

|    |   |   |           |                   |                            |                            |                            |                            |                            |                            |                            |
|----|---|---|-----------|-------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| #1 | Crime Incident(s)<br><b>Larceny From Auto</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>31</b>         | <b>2024</b>                | <b>07:30</b>               |                            |                            |                            |                            |                            |

|                   |                   |                            |                            |                            |                            |                            |                            |                            |
|-------------------|-------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| 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 | <input type="checkbox"/> S |
|                   |                   | <b>10</b>                  | <b>30</b>                  | <b>2024</b>                | <b>20:00</b>               |                            |                            |                            |

|    |                |                              |  |               |
|----|----------------|------------------------------|--|---------------|
| #2 | Crime Incident | <input type="checkbox"/> Att | Location of Incident                               | Offense Tract |
|    |                | <input type="checkbox"/> Com | <b>8131 North Point Bv, Winston-salem NC 27105</b> | <b>121</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

|                          |   |   |   |
|--------------------------|---|---|---|
| # of Victims<br><b>1</b> | Type<br><input type="checkbox"/> Person <input checked="" type="checkbox"/> Business<br><input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute<br><input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown | Injury<br><input type="checkbox"/> None <input type="checkbox"/> Minor <input type="checkbox"/> Loss of Teeth<br><input type="checkbox"/> Broken Bones <input type="checkbox"/> Severe Lacerations<br><input type="checkbox"/> Internal <input type="checkbox"/> Unconscious <input type="checkbox"/> Other Major | Drug/Alcohol Use:<br><input type="checkbox"/> Yes <input type="checkbox"/> Unknown<br><input checked="" type="checkbox"/> No <input type="checkbox"/> N/A |
|--------------------------|---|---|---|

|              |   |                                |           |      |     |                          |   |
|--------------|---|--------------------------------|-----------|------|-----|--------------------------|---|
| VICTIM<br>#1 | Victim/Business Name (Last, First, Middle)<br><b>DATA OMITTED</b> | Victim of Crime #<br><b>1,</b> | DOB / Age | Race | Sex | Relationship To Offender | Resident Status   |
|              |   |                                |           |      |     |                          | <input checked="" type="checkbox"/> Resident<br><input type="checkbox"/> Non-Resident<br><input type="checkbox"/> Unknown |

Home Address  
**DATA OMITTED**

Home Phone

Employer Name/Address  
**DATA OMITTED**

Business Phone

|                    |                     |                        |                    |                     |                               |                                 |
|--------------------|---------------------|------------------------|--------------------|---------------------|-------------------------------|---------------------------------|
| VYR<br><b>2021</b> | Make<br><b>TOYT</b> | Model<br><b>TACOMA</b> | Style<br><b>PK</b> | Color<br><b>WHI</b> | Lic/Lis<br><b>JHM4258, NC</b> | Vin<br><b>3TYRX5GN8MT031876</b> |
|--------------------|---------------------|------------------------|--------------------|---------------------|-------------------------------|---------------------------------|

O  
T  
H  
E  
R  
S  
  
I  
N  
V  
O  
L  
V  
E  
D

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>38</b>  | <b>7</b>    |       |    | <b>1</b> | <b>CATALYTIC CONVERTER</b>  | <b>CHEVY/Colorado</b> | <b>DATA OMITTED</b>    |
| <b>1</b> | <b>38</b>  | <b>7</b>    |       |    | <b>1</b> | <b>CATALYTIC CONVERTER</b>  | <b>TOYOTA/Tacoma</b>  | <b>FOR</b>             |
|          | <b>PTR</b> | <b>TARG</b> |       |    | <b>1</b> | <b>2018 WHI, JJ3506 NC</b>  | <b>CHEV Colorado</b>  | <b>INFORMATION</b>     |
| <b>1</b> | <b>PTR</b> | <b>TARG</b> |       |    | <b>1</b> | <b>2021 WHI, JHM4258 NC</b> | <b>TOYT Tacoma</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**

|  |   |
|--|---|
| Officer<br><b>ALLEN, S. E. (15310)</b> | Officer Signature<br><b>RANKIN, K. L. (15100)</b> |
|--|---|

|                       |  |  |
|-----------------------|--|--|
| Complainant Signature | Case Status  | Case Disposition:  |
|                       | <input type="checkbox"/> Further Investigation<br><input checked="" type="checkbox"/> Inactive<br><input type="checkbox"/> Closed/Cleared<br><input type="checkbox"/> Closed/Leads Exhausted | <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 |

**Status**