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Agency Name  
**WINSTON-SALEM POLICE**

ORI  
**NC NC 0340200**

## INCIDENT/INVESTIGATION REPORT

OCA  
**2439364**

Date / Time Reported  
 Month Day Yr Time  
**11 | 01 | 2024 | 16:36 Hrs.**

Last Known Secure  
 Month Day Yr Time  
**11 | 01 | 2024 | 16:35 Hrs.**

At Found  
 Month Day Yr Time  
**11 | 01 | 2024 | 16:36 Hrs.**

Location of Incident  
**1430 E Twenty-second St, Winston-salem NC**

Premise Type

Offense Tract  
**223**

Victim Residence Type  
 Single Family  Multi Family

#1	Crime Incident(s) <b>Possessing/concealing Stolen Property</b>	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com	At Found Month Day Yr Time <b>11   01   2024   16:36 Hrs.</b>	<input type="checkbox"/> Att <input type="checkbox"/> Com	Location of Incident <b>1430 E Twenty-second St, Winston-salem NC</b>	Offense Tract <b>223</b>
#2	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com	Location of Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com	Premise Type	Victim Residence Type
#3	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com		<input type="checkbox"/> Att <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

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

Victim of Crime #  
**1,**

DOB / Age

Race

Sex

Relationship To Offender  
**1RU,2R**

Resident Status  
 Resident  
 Non-Resident  
 Unknown

Home Address  
**DATA OMITTED**

Home Phone

Employer Name/Address  
**DATA OMITTED**

Business Phone

VYR <b>0</b>	Make <b>JOHN</b>	Model <b>GATOR</b>	Style <b>FE</b>	Color <b>GRN/YEL</b>	Lic/Lis <b>, NC</b>	Vin <b>1M0HPXGSVDM110906</b>
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**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>ATV</b>	<b>5</b>			<b>1</b>	<b>0 GRN/YEL NC</b>	<b>JOHN Gator</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 **1**

Officer <b>CARDWELL, D. C. (16283)</b>	ID#	Officer Signature	Supervisor Signature <b>MULLINS, B. H. (15079)</b>
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

**Status**