

I  
N  
C  
I  
D  
E  
N  
T  
D  
A  
T  
A

Agency Name  
**WINSTON-SALEM POLICE**  
ORI  
**NC NC 0340200**

# INCIDENT/INVESTIGATION REPORT

OCA  
**2440151**  
Date / Time Reported  
Month Day Yr Time  
**11 | 06 | 2024 | 17:00** Hrs.

#1	Crime Incident(s) <b>Obtaining Money By False Pretense</b>	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com	At Found Month Day Yr Time <b>11   06   2024   17:00</b> Hrs	Last Known Secure Month Day Yr Time <b>11   06   2024   16:59</b> Hrs.
#2	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com	Location of Incident <b>3800 Reynolda Rd, Winston-salem NC 27106</b>	Offense Tract <b>114</b>
#3	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com	Premise Type	Victim Residence Type <input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family

MO How Attacked or Committed  
**DATA OMITTED**

# 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 Name: **DATA OMITTED**

Victim of Crime #: **1,**

DOB / Age: \_\_\_\_\_ Race: \_\_\_\_\_ Sex: \_\_\_\_\_

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: \_\_\_\_\_

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>20</b>	<b>7</b>			<b>1</b>	<b>MONEY/CASH</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 ID: **PENN, A. L. (15808)** ID#: \_\_\_\_\_ Officer Signature: \_\_\_\_\_ Supervisor Signature: **MATTISON, G. M. (15167)**

Complainant Signature: \_\_\_\_\_

Status:  Further Investigation  Inactive  Closed/Cleared  Closed/Leads Exhausted

Case Disposition:  
 Unfounded  Located  Extradition Declined  
 Cleared by Arrest  Refuse to Cooperate  
 Cleared by Arrest by Another Agency  
 Death of Offender  Prosecution Declined