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Agency Name
WINSTON-SALEM POLICE

ORI
NC NC 0340200

INCIDENT/INVESTIGATION REPORT

OCA
2441004

Date / Time Reported
 Month Day Yr Time
11 | 13 | 2024 | 16:13 Hrs.

Last Known Secure
 Month Day Yr Time
11 | 10 | 2024 | 17:20 Hrs.

At Found
 Month Day Yr Time
11 | 13 | 2024 | 16:13 Hrs.

Location of Incident
930 Hanes Mall Bv, Winston-salem NC 27103

Premise Type

Offense Tract
323

Victim Residence Type
 Single Family Multi Family

#1	Crime Incident(s) Simple Assault-non Aggravated Assault	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com	At Found Month Day Yr Time 11 13 2024 16:13 Hrs.	<input type="checkbox"/> Att <input type="checkbox"/> Com	Location of Incident 930 Hanes Mall Bv, Winston-salem NC 27103
#2	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com		<input type="checkbox"/> Att <input type="checkbox"/> Com	Premise Type
#3	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com		<input type="checkbox"/> Att <input type="checkbox"/> Com	Victim Residence Type

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 #1 Victim/Business Name (Last, First, Middle): **DATA OMITTED**

Victim of Crime #: **1,** DOB / Age: **61** 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:

V Y R | M a k e | M o d e l | S t y l e | C o l o r | L i c / L i s | V i n

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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
								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**

ID Officer: **DAWKINS, C. J. (15385)** ID#: Officer Signature: Supervisor Signature: **MCKAUGHAN, A. M. (14884)**

Complainant Signature: Case 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