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Agency Name
WINSTON-SALEM POLICE

INCIDENT/INVESTIGATION REPORT

OCA
2441110

ORI
NC NC 0340200

Date / Time Reported
Month Day Yr Time
11 | 14 | 2024 | 12:25 Hrs.

#1 Crime Incident(s)
Trespassing

At Found
Month Day Yr Time
11 | 14 | 2024 | 12:25 Hrs.

Last Known Secure
Month Day Yr Time
11 | 14 | 2024 | 12:25 Hrs.

#2 Crime Incident

Location of Incident
1489 New Walkertown Rd, Winston-salem NC

Offense Tract
222

#3 Crime Incident

Premise Type

Victim Residence Type
 Single Family Multi Family

MO How Attacked or Committed
DATA OMITTED

Forcible
 Yes N/A
 No

Weapon / Tools

V
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of Victims: 2
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)
V1 DATA OMITTED

Victim of Crime #
1,

DOB / Age

Race

Sex

Relationship To Offender

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

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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)

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| 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 <i>LAMB, L. N. (16119)</i> | ID# | Officer Signature | Supervisor Signature (0) |
| Status | Complainant Signature | Case Status | Case Disposition: | |
| | | <input type="checkbox"/> Further Investigation <input type="checkbox"/> Inactive <input type="checkbox"/> Closed/Cleared <input type="checkbox"/> Closed/Leads Exhausted | <input type="checkbox"/> Unfounded <input type="checkbox"/> Cleared by Arrest <input type="checkbox"/> Cleared by Arrest by Another Agency <input type="checkbox"/> Death of Offender | <input type="checkbox"/> Located <input type="checkbox"/> Refuse to Cooperate <input type="checkbox"/> Extradition Declined <input type="checkbox"/> Prosecution Declined |