| I N | Agency Name WINSTON-SALEM POLICE | | | | | | | INCIDENT/INVESTIGATION | | | | | | OCA 2442788 | | | | |
|--|---|--|---------------------------------------|-----------|-----------------------|-------------------------|--------------------------|------------------------|--|----------------|--------------------------------|---|--------------------|--------------------------------|--|---------------------------------|--|--|
| C I | ORI | | | 1 | REPORT | | | | | | | Date / Time Reported SMTWTFS Month Day Yr Time | | | | | | |
| D E | NC NC 0340200 Crime Incident(s) | | | | | | | | ☐ Att | | | | | | 11 27 2024 03:51 Hrs. | | | |
| N T | #1 Rec. Stolen Property From Another Jurisdiction | | | | | | | | ☐ Att At Found SM TH TFS Month Day Yr Time Month Day Yr Time Month Day Att Day | | | | | | ast Known Secure SM T된 TFS onth Day Yr Time 11 27 2024 03:50 Hrs. | | | |
| D | | me Inciden | | | | | | - 1 | Location | of Incident | | | | | • | Offense Tract | | |
| A T | Crime Incident Com 299 Thurston St/ricks Dr, Winston | | | | | | | | | | | | | | NC Victim Resid | dence Type | | |
| A | #3 Cn | ine meiden | · | | □ Com | | | | | | ☐ Single Family ☐ Multi Family | | | | | | | |
| МО | | acked or Co | | | | | Forcible ☐ Yes ☐ No | | | | | Weapon / Tools | | | | | | |
| V | # of Vic | tims Type | Person | | Business | | | | Injury | ☐ None | | | Loss o | f Teet | h Drug/ | Alcohol Use: | | |
| | 0 Society Government Financial Institute Broken Bones Severe Lacerations Yes Unknown Religious L.E. Officer Line of Duty Other/Unknown Internal Unconscious Other Major | | | | | | | | | | | | | | | _ | | |
| I | | | | | | | | | | | | | | Sex | Relationshi | p Resident Status | | |
| C T | V1 DATA OMITTED Crime # | | | | | | | | | | | | | | To Offende | Resident Non-Resident | | |
| I M | | | | | | | | | | | | | | | - Fri | Unknown | | |
| | Home Address DATA OMI | | | | | | | | ГТЕD | | | | | Home Phone | | | | |
| | Employer Name/Address DATA OMI | | | | | | | ГТЕО | | | | | Business Phone | | | | | |
| | VYR Make Model Style Color | | | | | | Lic/Lis Vin | | | | | Vin | | | | | | |
| H E R S I N V O L V E D | | DATA OMITTED | | | | | | | | | | | | | | | | |
| Status Codes | L = Los | S = Stole | en R = Recovere n if recovered for | d D= | Damaged risdiction | Z = Seized | B = | Burne | ed $C = C$ | ounterfeit / F | Forged | F = Foun | ıd | | | | | |
| | Victim | DCI Statu | | | Property Description | | | | | | | Make/Model Serial Number | | | | | | |
| - - P - | -" | # DCI Status Value OJ QTY Pro 36 5 1 20 V BATTERY | | | | | | | Topotty Besonption | | | | | T/201 | | DATA OMITTED | | |
| | | 36 5 PCA OTH | E | | - | 20 V BATTERY | | | | | | | DEWAL | | | FOR | | |
| | | PCA OTH | E | | 1 | 2007 GRY/WHI EJF5931 NC | | | | | | | HOND ! | ND Accord INFORMATION SECURITY | | | | |
| R O | | | | | | | | | | | | | | | | PURPOSES | | |
| Р ⁻ Е - | | | | | | | | | | | | | | | | | | |
| R T Y | | | | + | | | | | | | | | | | | ONLY THE FIRST ELVE PROPERTY | | |
| | | | | + | | | | | | | | | | | 1 1 1 1 | ITEMS ARE | | |
| | | | | | | | | | | | | | | | | DISPLAYED ON | | |
| | | | | | | | | | | | | | | | | P2C REPORTS | | |
| - | Nr. 100 1 | of Vah:-1 | Stolon | N.T. | mbor W-1 | iolos Door | .d | 0 | | | | | | | | | | |
| | Number Officer | of Vehicles | s Stolen 0 | Nu ID# | mber Veh | Officer Sig | | 0 e | | | 1 | Supervisor | | | | | | |
| ID | SOME | | T. J. (16036) | | | | | | Т | C D' | | | | | . (15618) | | | |
| Status | Complai | nant Signat | ure | | | Case Statu Furthe Inac | r Inve tive l/Clea | red | | | ided I by Ai I by Ai | rrest by And | Refuse other Ag | ency | ooperate | xtradition Declined | | |
| | | | | | | ☐ Closed | l/Lead | s Exh | austed | □ Death o | of Offe | nder 🗆 | 7 Prosec | ution | Declined | Page 1 | | |