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Agency Name  
**WINSTON-SALEM POLICE**

## INCIDENT/INVESTIGATION REPORT

OCA  
**2442908**

ORI  
**NC NC 0340200**

Date / Time Reported  
 Month Day Yr Time  
**11 | 28 | 2024 | 00:38 Hrs.**

#1	Crime Incident(s) <b>Drug Violations</b>	<input type="checkbox"/> Att	At Found	<input type="checkbox"/> M	<input type="checkbox"/> T	<input type="checkbox"/> W	<input type="checkbox"/> F	<input type="checkbox"/> S	Last Known Secure
		<input checked="" type="checkbox"/> Com	Month Day Yr Time						Month Day Yr Time
			<b>11   28   2024   00:38 Hrs</b>						<b>11   28   2024   00:37 Hrs.</b>

#2	Crime Incident <b>Violation Of City/county Ordinance</b>	<input type="checkbox"/> Att	Location of Incident <b>700 Granville Dr, Winston-salem NC 27101</b>					Offense Tract <b>412</b>
		<input checked="" type="checkbox"/> Com						

#3	Crime Incident	<input type="checkbox"/> Att	Premise Type					Victim Residence Type
		<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 Victim/Business Name (Last, First, Middle): **DATA OMITTED**

V Victim of Crime #: **I,**

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

**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
	<i>PCA</i>	<i>OTHE</i>			<i>1</i>	<i>2011 GRY, JMK5332 NC</i>	<i>HOND Civic U.s.</i>	<i>DATA OMITTED</i>
								<i>FOR INFORMATION SECURITY PURPOSES ONLY THE FIRST TWELVE PROPERTY ITEMS ARE DISPLAYED ON P2C REPORTS</i>

Number of Vehicles Stolen: **0** Number Vehicles Recovered: **0**

Officer <b>GILHAM, T. L. (16374)</b>	Officer Signature <b>ROBERTSON, C. K. (15636)</b>
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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
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