

INCIDENT REPORT

INCIDENT/INVESTIGATION REPORT

OCA		2443353	
Date / Time Reported		S M T W T F S	
Month	Day	Yr	Time
12	01	2024	18:20 Hrs.
Last Known Secure		S M T W T F S	
Month	Day	Yr	Time
11	30	2024	18:00 Hrs.

Agency Name	WINSTON-SALEM POLICE
ORI	NC NC 0340200

#1	Crime Incident(s)	<input type="checkbox"/> Att	At Found	S M T W T F S	Last Known Secure	S M T W T F S
	Autobreaking And Larceny	<input checked="" type="checkbox"/> Com	Month Day Yr Time		Month Day Yr Time	
			12 01 2024 11:00	Hrs	11 30 2024 18:00	Hrs.
#2	Crime Incident	<input type="checkbox"/> Att	Location of Incident			Offense Tract
		<input type="checkbox"/> Com	1525 Woods Rd, Winston-salem NC 27106			123
#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

How Attacked or Committed	Forcible	Weapon / Tools
DATA OMITTED	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> No	

# of Victims	Type	Injury	Drug/Alcohol Use:
2	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown	<input checked="" type="checkbox"/> None <input type="checkbox"/> Minor <input type="checkbox"/> Loss of Teeth <input type="checkbox"/> Broken Bones <input type="checkbox"/> Severe Lacerations <input type="checkbox"/> Internal <input type="checkbox"/> Unconscious <input type="checkbox"/> Other Major	<input type="checkbox"/> Yes <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
V1	Victim/Business Name (Last, First, Middle)	Victim of Crime #	DOB / Age
	DATA OMITTED	1,	69
Home Address		Race	Sex
DATA OMITTED		A	M
Employer Name/Address		Relationship To Offender	Resident Status
DATA OMITTED		IRU	<input checked="" type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown
VYR	Make	Model	Style
2015	LEXU	RX350	SUV
			Color
			BLK
			Lic/Lis
			TMR8366, NC
			Vin
			2T2ZK1BA7FC149769

OTHERS INVOLVED

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
1	20	7			1	US CURRENCY		DATA OMITTED
1	09	7			1	DEBIT CARD	WELLS FARGO	FOR
1	09	7			1	DEBIT CARD	TRUIST	INFORMATION
1	25	7			1	WALLET		SECURITY
1	65	7			1	DRIVERS LICENSE	NC	PURPOSES
1	77	7			1	COSTCO CARD		
1	77	7			1	SAMS BUSINESS CARD		ONLY THE FIRST
1	77	7			1	MEDICARE CARD		TWELVE PROPERTY
2	65	7			1	DRIVERS LICENSE	NC	ITEMS ARE
1	SUV	TARG			1	2015 BLK, TMR8366 NC	LEXU Rx350	DISPLAYED ON
								P2C REPORTS

Number of Vehicles Stolen		Number Vehicles Recovered	
0		0	
Officer	ID#	Officer Signature	Supervisor Signature
ALLEN, S. E. (15310)			RANKIN, K. L. (15100)
Complainant Signature		Case Status	Case Disposition:
		<input type="checkbox"/> Further Investigation <input checked="" type="checkbox"/> Inactive <input type="checkbox"/> Closed/Cleared <input type="checkbox"/> Closed/Leads Exhausted	<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