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Agency Name  
**WINSTON-SALEM POLICE**

## INCIDENT/INVESTIGATION REPORT

OCA  
**2443906**

ORI  
**NC NC 0340200**

Date / Time Reported  
 Month Day Yr Time  
**12 | 06 | 2024 | 11:13 Hrs.**

#1	Crime Incident(s) <b>Larceny- All Other</b>	<input type="checkbox"/> Att	At Found	Month Day Yr Time	<input type="checkbox"/> S	<input type="checkbox"/> M	<input type="checkbox"/> T	<input type="checkbox"/> W	<input type="checkbox"/> T	<input type="checkbox"/> F	<input type="checkbox"/> S
		<input checked="" type="checkbox"/> Com	<b>12</b>	<b>06</b>	<b>2024</b>	<b>10:50</b>					

Last Known Secure  
 Month Day Yr Time  
**12 | 05 | 2024 | 11:05 Hrs.**

#2	Crime Incident	<input type="checkbox"/> Att	Location of Incident <b>2101 Peters Creek Pw, Winston-salem NC 27127</b>							Offense Tract <b>313</b>
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#3	Crime Incident	<input type="checkbox"/> Att	Premise Type							Victim Residence Type <input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family
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MO How Attacked or Committed  
**DATA OMITTED**

Forcible  
 Yes  N/A  No

Weapon / Tools

V I C T I M # 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

V I C T I M #1	Victim/Business Name (Last, First, Middle) <b>DATA OMITTED</b>	Victim of Crime # <b>1,</b>	DOB / Age	Race	Sex	Relationship To Offender	Resident Status <input type="checkbox"/> Resident <input checked="" type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown
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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
1	78	7,5			1	TOW DOLLY	UHAUL	DATA OMITTED
1	78	5			1	TOW DOLLY	UHAUL	FOR
2	78	7			1	AUTO TRANSPORT	UHAUL	INFORMATION
								SECURITY
								PURPOSES
								ONLY THE FIRST
								TWELVE PROPERTY
								ITEMS ARE
								DISPLAYED ON
								P2C REPORTS

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

Officer <b>ALLEN, S. E. (15310)</b>	Officer Signature	Supervisor Signature <b>MATTISON, G. M. (15167)</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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**Status**