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Agency Name  
**WINSTON-SALEM POLICE**

## INCIDENT/INVESTIGATION REPORT

OCA  
2444232

ORI  
NC NC 0340200

Date / Time Reported  
Month Day Yr Time  
12 | 09 | 2024 | 13:52 Hrs.

#1	Crime Incident(s) <i>Simple Assault-non Aggravated Assault</i>	<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	12	09	2024	13:52	Hrs.	12	09	2024	13:51	Hrs.		

#2	Crime Incident	<input type="checkbox"/> Att	Location of Incident										Offense Tract
		<input type="checkbox"/> Com	2367 Bethabara Rd, Winston-salem NC 27105										114

#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

VICTIM	#	Victim/Business Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex	Relationship To Offender	Resident Status
		DATA OMITTED	I,	51	W	F	IRU	<input checked="" type="checkbox"/> Non-Resident <input type="checkbox"/> Resident <input type="checkbox"/> 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
								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

Officer <b>MOONEY, M. D. (15484)</b>	ID#	Officer Signature	Supervisor Signature <b>BOISSEY, S. G. (15475)</b>
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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"/> 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"/> Prosecution Declined