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Agency Name  
**WINSTON-SALEM POLICE**

## INCIDENT/INVESTIGATION REPORT

OCA  
2444542

ORI  
NC NC 0340200

Date / Time Reported  
Month Day Yr Time  
12 | 11 | 2024 | 19:44 Hrs.

#1	Crime Incident(s) <b>Simple Assault-non Aggravated Assault</b>	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com	At Found Month Day Yr Time 12   11   2024   19:44 Hrs	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com	Location of Incident <b>326 E Monmouth St, Winston-salem NC 27127</b>	Last Known Secure Month Day Yr Time 12   11   2024   19:43 Hrs.	Offense Tract <b>412</b>
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#2	Crime Incident <b>Vandalism</b>	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com	Premise Type	<input type="checkbox"/> Att <input type="checkbox"/> Com	Victim Residence Type <input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family
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#3	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com	Premise Type	<input type="checkbox"/> Att <input type="checkbox"/> Com	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: **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 I C T I M V1 Victim/Business Name (Last, First, Middle):  
DATA OMITTED

Victim of Crime #: **1,2**

DOB / Age: **40**

Race: **B** Sex: **F** Relationship To Offender: **IPA**

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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**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
<b>1</b>	<b>29</b>	<b>4</b>			<b>1</b>	<b>WINDOW</b>		<b>DATA OMITTED</b>
								<b>FOR INFORMATION SECURITY PURPOSES ONLY THE FIRST TWELVE PROPERTY ITEMS ARE DISPLAYED ON P2C REPORTS</b>

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

Officer <b>WITCHER, H. A. (16390)</b>	Officer Signature	Supervisor Signature <b>PERKINS, R. A. (15028)</b>
Complainant Signature	Case Status <input type="checkbox"/> Further Investigation <input 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

**Status**