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Agency Name  
**WINSTON-SALEM POLICE**

## INCIDENT/INVESTIGATION REPORT

OCA  
2444615

ORI  
NC NC 0340200

Date / Time Reported  
 Month Day Yr Time  
 12 | 12 | 2024 | 13:04 Hrs.

|    |   |                              |   |   |  |
|----|---|------------------------------|---|---|--|
| #1 | Crime Incident(s)<br><i>Lost/stolen License Plate</i> | <input type="checkbox"/> Att | <input checked="" type="checkbox"/> Com | At Found<br>Month Day Yr Time<br>12   12   2024   12:00 Hrs | Last Known Secure<br>Month Day Yr Time<br>12   12   2024   08:30 Hrs |
|----|---|------------------------------|---|---|--|

|    |                |                              |                              |  |                             |
|----|----------------|------------------------------|------------------------------|--|-----------------------------|
| #2 | Crime Incident | <input type="checkbox"/> Att | <input type="checkbox"/> Com | Location of Incident<br><i>3325 Thomasville Rd, Winston-salem NC 27107</i> | Offense Tract<br><i>213</i> |
|----|----------------|------------------------------|------------------------------|--|-----------------------------|

|    |                |                              |                              |              |   |
|----|----------------|------------------------------|------------------------------|--------------|---|
| #3 | Crime Incident | <input type="checkbox"/> Att | <input type="checkbox"/> Com | Premise Type | Victim Residence Type<br><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 I C T I M # of Victims: 0

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): DATA OMITTED

Victim of Crime #, 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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**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   |
|----------|-----|--------|-------|----|-----|----------------------|------------|---|
|          | SUV | TARG   |       |    | 1   | 2010 GRY, AHS5590 NC | CHEV Hhr   | DATA OMITTED  |
|          |     |        |       |    |     |                      |            | FOR INFORMATION SECURITY PURPOSES ONLY THE FIRST TWELVE PROPERTY ITEMS ARE DISPLAYED ON P2C REPORTS |

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Number of Vehicles Stolen: 0 Number Vehicles Recovered: 0

ID Officer: ALLEN, S. E. (15310) ID#: Officer Signature: Supervisor Signature: STUMP, J. K. (14922)

Status Complainant Signature: Case Status:  Further Investigation  Inactive  Closed/Cleared  Closed/Leads Exhausted

Case Disposition:  Unfounded  Located  Extradition Declined  Cleared by Arrest  Refuse to Cooperate  Cleared by Arrest by Another Agency  Death of Offender  Prosecution Declined