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Agency Name
WINSTON-SALEM POLICE

ORI
NC NC 0340200

INCIDENT/INVESTIGATION REPORT

OCA
2444702

Date / Time Reported
 Month Day Yr Time
12 | 13 | 2024 | 02:16 Hrs.

Last Known Secure
 Month Day Yr Time
12 | 13 | 2024 | 02:15 Hrs.

At Found
 Month Day Yr Time
12 | 13 | 2024 | 02:16 Hrs.

Location of Incident
295 Akron Dr, Winston-salem NC 27105

Premise Type

Victim Residence Type
 Single Family Multi Family

#1	Crime Incident(s) Simple Assault-non Aggravated Assault	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com	At Found Month Day Yr Time 12 13 2024 02:16 Hrs.	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com	Location of Incident 295 Akron Dr, Winston-salem NC 27105	Offense Tract 121
#2	Crime Incident Larceny- All Other	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com		<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com		
#3	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com		<input type="checkbox"/> Att <input type="checkbox"/> Com		

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

V I C T I M
#1 Victim/Business Name (Last, First, Middle)
DATA OMITTED

Victim of Crime # **1,2**

DOB / Age **40**

Race **W** Sex **F** Relationship To Offender **IAQ**

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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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	74	7			1	CAMERA		DATA OMITTED
1	75	7			1	SPEAKER		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 REED, E. D. (16105)	ID#	Officer Signature	Supervisor Signature MITCHELL, J. R. (15672)
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

Status