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Agency Name  
**WINSTON-SALEM POLICE**

## INCIDENT/INVESTIGATION REPORT

OCA  
2444750

ORI  
NC NC 0340200

Date / Time Reported  
 Month Day Yr Time  
 12 | 13 | 2024 | 11:14 Hrs.

#1	Crime Incident(s) <i>Found Property</i>	<input type="checkbox"/> Att	At Found Month Day Yr Time	12   13   2024   11:14 Hrs.	<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									

#2	Crime Incident	<input type="checkbox"/> Att	Location of Incident	424 Barnes Rd, Winston-salem NC 27107	<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 type="checkbox"/> Com									

#3	Crime Incident	<input type="checkbox"/> Att	Premise Type		<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 type="checkbox"/> Com									

MO How Attacked or Committed  
DATA OMITTED

Forcible  
 Yes  N/A  
 No

Weapon / Tools

V # 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

V1	Victim/Business Name (Last, First, Middle) DATA OMITTED	Victim of Crime #	DOB / Age	Race	Sex	Relationship To Offender	Resident Status <input type="checkbox"/> Resident <input 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
	25	FOUN			1	PURSES/HANDBAGS/WALLETS		DATA OMITTED
1	20	FOUN			1	MONEY/CASH		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>PARKER, M. A. (15875)</b>	Officer Signature	Supervisor Signature <b>MITCHELL, J. R. (15672)</b>
Complainant Signature	Case Status <input type="checkbox"/> Further Investigation <input type="checkbox"/> Inactive <input type="checkbox"/> Closed/Cleared <input checked="" 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**