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Agency Name
WINSTON-SALEM POLICE

INCIDENT/INVESTIGATION REPORT

OCA
2445158

ORI
NC NC 0340200

Date / Time Reported
 Month Day Yr Time
12 | 16 | 2024 | 18:31 Hrs.

| | | | | | |
|----|---|------------------------------|---|--|---|
| #1 | Crime Incident(s) Agg Aslt Disch Fa/occ Dwell/veh | <input type="checkbox"/> Att | <input checked="" type="checkbox"/> Com | At Found Month Day Yr Time 12 16 2024 18:31 Hrs | Last Known Secure Month Day Yr Time 12 16 2024 18:30 Hrs |
|----|---|------------------------------|---|--|---|

| | | | | | |
|----|------------------------------------|------------------------------|---|---|-----------------------------|
| #2 | Crime Incident Vandalism | <input type="checkbox"/> Att | <input checked="" type="checkbox"/> Com | Location of Incident 3887 Hartford St, Winston-salem NC 27106 | Offense Tract 114 |
|----|------------------------------------|------------------------------|---|---|-----------------------------|

| | | | | | |
|----|----------------|------------------------------|------------------------------|--------------|---|
| #3 | Crime Incident | <input type="checkbox"/> Att | <input type="checkbox"/> Com | Premise Type | Victim Residence Type <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: **4**

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 #1: Victim/Business Name (Last, First, Middle)
DATA OMITTED

Victim of Crime #: **1,2** | DOB / Age: **64** | Race: **W** | Sex: **M** | Relationship To Offender: **IRU** | 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 |
|----------|-----|--------|-------|----|-----|-----------------------|--------------|---|
| | 30 | 4 | | | 1 | STORM DOOR | | DATA OMITTED |
| | 30 | 4 | | | 2 | GLASS WINDOW | | FOR |
| | 13 | EVID | | | 1 | (9MM) SHELL CASING | BLAZER | INFORMATION |
| | 13 | EVID | | | 2 | SHELL CASING | FC | SECURITY |
| | 06 | EVID | | | 1 | CLOTHES/FURS | VICTORIA | PURPOSES |
| 4 | PCA | OTHE | | | 1 | 2003 SIL, 28822062 NC | HOND | |
| | PSU | OTHE | | | 1 | 2014 WHI, 28822062 NC | DODG Journey | ONLY THE FIRST TWELVE PROPERTY ITEMS ARE DISPLAYED ON P2C REPORTS |

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

Officer ID: **TAYLOR, C. J. (16361)** | Officer Signature: **WILLIAMS, K. A. (15631)**

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

Status