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Agency Name  
**WINSTON-SALEM POLICE**

## INCIDENT/INVESTIGATION REPORT

OCA  
**2446516**

ORI  
**NC NC 0340200**

Date / Time Reported  
 Month Day Yr Time  
**12 | 27 | 2024 | 18:58 Hrs.**

#1	Crime Incident(s) <b>Vandalism</b>	<input type="checkbox"/> Att	At Found Month Day Yr Time <b>12   27   2024   18:58 Hrs</b>	<input checked="" type="checkbox"/> Com	Last Known Secure Month Day Yr Time <b>12   27   2024   18:57 Hrs.</b>
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#2	Crime Incident	<input type="checkbox"/> Att	Location of Incident <b>4117 Villa Club Dr, Winston-salem NC 27106</b>		Offense Tract <b>123</b>
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#3	Crime Incident	<input type="checkbox"/> Att	Premise Type	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 #: **I,** DOB / Age: **48** Race: **B** Sex: **M**

Relationship To Offender:  Resident  
 Non-Resident  
 Unknown

Home Address: **DATA OMITTED** Home Phone:

Employer Name/Address: **DATA OMITTED** Business Phone:

VYR <b>2017</b>	Make <b>CHEV</b>	Model <b>TRAVERSE</b>	Style <b>4D</b>	Color <b>BLK</b>	Lic/Lis <b>, NC</b>	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
<b>1</b>	<b>PCA</b>	<b>4</b>			<b>1</b>	<b>2017 BLK, NC</b>	<b>CHEV Traverse</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>BOVARD, M. J. (16275)</b>	Officer Signature	Supervisor Signature <b>BRUNER, K. M. (15921)</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**