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Agency Name  
**WINSTON-SALEM POLICE**

## INCIDENT/INVESTIGATION REPORT

OCA  
**2482381**

ORI  
**NC NC 0340200**

Date / Time Reported  
 Month Day Yr Time  
**07 | 09 | 2024 | 12:53 Hrs.**

#1 Crime Incident(s)  
**All Other Fraud**

At Found  
 Att  
 Com  
 Month Day Yr Time  
**07 | 09 | 2024 | 12:35 Hrs.**

Last Known Secure  
 Month Day Yr Time  
**07 | 09 | 2024 | 12:35 Hrs.**

#2 Crime Incident

Location of Incident  
 Att  
 Com  
**2823 S Bitting Rd, Winston-salem NC 27104**

Offense Tract  
**321**

#3 Crime Incident

Premise Type  
 Att  
 Com

Victim Residence Type  
 Single Family  Multi Family

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 Victim/Business Name (Last, First, Middle)  
**DATA OMITTED**

Victim of Crime #  
**1**

DOB / Age  
**58**

Race  
**W**

Sex  
**M**

Relationship To Offender  
**RU**

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
<b>1</b>	<b>20</b>	<b>7</b>			<b>1</b>	<b>MONEY/CASH</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**

ID Officer **RATLIFF, K. D. (15687)** ID# \_\_\_\_\_ Officer Signature \_\_\_\_\_ Supervisor Signature **RATLIFF, K. D. (15687)**

Complainant Signature \_\_\_\_\_

**Status**

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
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