

I
N
C
I
D
E
N
T
D
A
T
A

Agency Name
WINSTON-SALEM POLICE

INCIDENT/INVESTIGATION REPORT

OCA
2502079

ORI
NC NC 0340200

Date / Time Reported
Month Day Yr Time
01 | 19 | 2025 | 18:29 Hrs.

#1	Crime Incident(s) Aggravated Assault	<input type="checkbox"/> Att	At Found	Month Day Yr Time	<input type="checkbox"/> M	<input type="checkbox"/> T	<input type="checkbox"/> W	<input type="checkbox"/> T	<input type="checkbox"/> F	<input type="checkbox"/> S	Last Known Secure	Month Day Yr Time
		<input checked="" type="checkbox"/> Com		01 19 2025 18:29 Hrs							01 19 2025 18:28 Hrs.	

#2	Crime Incident	<input type="checkbox"/> Att	Location of Incident 3088 High Point Rd, Winston-salem NC 27107							Offense Tract 213
----	----------------	------------------------------	---	--	--	--	--	--	--	-----------------------------

#3	Crime Incident	<input type="checkbox"/> Att	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 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 #1 Victim/Business Name (Last, First, Middle):
DATA OMITTED

Victim of Crime #: **1** | DOB / Age: **42** | Race: **W** | Sex: **F** | Relationship To Offender: **IPA** | 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
-----	------	-------	-------	-------	---------	-----

O
T
H
E
R
S

I
N
V
O
L
V
E
D

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
								DATA OMITTED
								FOR
								INFORMATION
								SECURITY
								PURPOSES
								ONLY THE FIRST
								TWELVE PROPERTY
								ITEMS ARE
								DISPLAYED ON
								P2C REPORTS

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

ID Officer: **CRIDER, M. D. (15720)** | ID#: | Officer Signature: | Supervisor Signature: **PARKER, M. J. (15308)**

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