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Agency Name  
**WINSTON-SALEM POLICE**

ORI  
**NC NC 0340200**

## INCIDENT/INVESTIGATION REPORT

OCA  
**2502199**

Date / Time Reported  
 Month Day Yr Time  
**01 | 21 | 2025 | 04:35 Hrs.**

Last Known Secure  
 Month Day Yr Time  
**01 | 21 | 2025 | 04:34 Hrs.**

#1	Crime Incident(s) <b>Common Law Robbery-strongarm</b>	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com	At Found Month Day Yr Time <b>01   21   2025   04:35 Hrs</b>	<input type="checkbox"/> Att <input type="checkbox"/> Com	Location of Incident <b>100 Capitol Lodging Ct, Winston-salem NC</b>
#2	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com	Premise Type	<input type="checkbox"/> Att <input type="checkbox"/> Com	Victim Residence Type <input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family
#3	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com			

MO How Attacked or Committed  
**DATA OMITTED**

Forcible  
 Yes  N/A  
 No

Weapon / Tools

V I C T I M

# of Victims: **2**

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 #: **I,** DOB / Age: **33**

Race: **U** 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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**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
2	20	7			1	MONEY/CASH		DATA OMITTED
2	77	7			1	DEPOSIT BOX		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: **BALDWIN, M. K. (16364)** ID#:  Officer Signature:  Supervisor Signature: **REYNOLDS, S. A. (15618)**

Complainant Signature:

Status 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