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Agency Name  
**WINSTON-SALEM POLICE**

## INCIDENT/INVESTIGATION REPORT

OCA  
2507449

ORI  
NC NC 0340200

Date / Time Reported  
 Month Day Yr Time  
 03 | 05 | 2025 | 15:50 Hrs.

|    |  |   |                               |                            |   |                            |                            |                            |                            |                            |                            |
|----|--|---|-------------------------------|----------------------------|---|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|----------------------------|
| #1 | Crime Incident(s)<br><b>Aggravated Assault</b> | <input type="checkbox"/> Att            | At Found<br>Month Day Yr Time | 03   05   2025   15:50 Hrs | <input type="checkbox"/> S  | <input type="checkbox"/> M | <input type="checkbox"/> T | <input type="checkbox"/> W | <input type="checkbox"/> T | <input type="checkbox"/> F | <input type="checkbox"/> S |
|    |  | <input checked="" type="checkbox"/> Com |                               |                            | Last Known Secure<br>Month Day Yr Time<br>03   05   2025   15:49 Hrs. |                            |                            |                            |                            |                            |                            |

|    |                |                              |   |  |  |  |  |                             |  |  |  |  |
|----|----------------|------------------------------|---|--|--|--|--|-----------------------------|--|--|--|--|
| #2 | Crime Incident | <input type="checkbox"/> Att | Location of Incident<br><b>1590 Bolton St, Winston-salem NC 27103</b> |  |  |  |  | Offense Tract<br><b>322</b> |  |  |  |  |
|    |                | <input type="checkbox"/> Com |   |  |  |  |  |                             |  |  |  |  |

|    |                |                              |              |  |  |  |  |   |  |  |  |  |
|----|----------------|------------------------------|--------------|--|--|--|--|---|--|--|--|--|
| #3 | Crime Incident | <input type="checkbox"/> Att | Premise Type |  |  |  |  | Victim Residence Type<br><input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family |  |  |  |  |
|    |                | <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: **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: **21** Race: **B** Sex: **F**

Relationship To Offender: 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   |
|----------|-----|--------|-------|----|-----|----------------------|------------|---|
|          | VAN | OTHE   |       |    | 1   | 2018 GRV, HET9152 NC | DODG Grand | 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**

|   |     |                   |   |
|---|-----|-------------------|---|
| Officer<br><b>PHILLIPS, C. K. (16316)</b> | ID# | Officer Signature | Supervisor Signature<br><b>MCKAUGHAN, A. M. (14884)</b> |
|---|-----|-------------------|---|

|                       |   |   |        |
|-----------------------|---|---|--------|
| Complainant Signature | Case Status<br><input type="checkbox"/> Further Investigation<br><input checked="" type="checkbox"/> Inactive<br><input type="checkbox"/> Closed/Cleared<br><input type="checkbox"/> Closed/Leads Exhausted | Case Disposition:<br><input type="checkbox"/> Unfounded <input type="checkbox"/> Located <input type="checkbox"/> Extradition Declined<br><input type="checkbox"/> Cleared by Arrest <input type="checkbox"/> Refuse to Cooperate<br><input type="checkbox"/> Cleared by Arrest by Another Agency<br><input type="checkbox"/> Death of Offender <input type="checkbox"/> Prosecution Declined | Page 1 |
|-----------------------|---|---|--------|