Agency Name *WINSTON-SALEM POLICE*	**INCIDENT/INVESTIGATION REPORT**	**OCA** *2239870*	

INCIDENT DATA

Agency Name *WINSTON-SALEM POLICE*	**INCIDENT/INVESTIGATION REPORT**	**OCA** *2239870*	
ORI *NC NC 0340200*		**Date / Time Reported** S M T W T F S — Month 08 Day 17 Yr 2022 Time 16:06 Hrs.	

#1 Crime Incident(s) *Hit & Run Accident-pp Or Pva* — ☐ Att ☒ Com
At Found S M T W T F S — Month 08 Day 17 Yr 2022 Time 16:06 Hrs.
Last Known Secure S M T W T F S — Month 08 Day 17 Yr 2022 Time 16:06 Hrs.

#2 Crime Incident — ☐ Att ☐ Com
Location of Incident *301 Medical Center Bv, Winston-salem NC 27157* **Offense Tract** *312*

#3 Crime Incident — ☐ Att ☐ Com
Premise Type **Victim Residence Type** ☐ Single Family ☐ Multi Family

MO

How Attacked or Committed DATA OMITTED
Forcible ☐ Yes ☒ N/A ☐ No
Weapon / Tools

VICTIM

# of Victims *0*
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

	Victim/Business Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex	Relationship To Offender	Resident Status
V1	DATA OMITTED						☐ 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

OTHERS INVOLVED

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)

PROPERTY

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 *SINK, J. K. (15259)* **ID#** **Officer Signature** **Supervisor Signature** *(0)*

Status

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

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