

INCIDENT/INVESTIGATION
REPORT

Agency Name
WINSTON-SALEM POLICE

ORI
NC NC 0340200

OCA
2411910

Date / Time Reported
Month Day Yr Time
04 | 06 | 2024 | 12:59 Hrs.

Last Known Secure
Month Day Yr Time
04 | 06 | 2024 | 12:59 Hrs.

| | | | | | | |
|----|----------------------------|---|--|--|--|--|
| #1 | Crime Incident(s) | <input type="checkbox"/> Att | At Found Month Day Yr Time | <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 | | |
| | Traffic Accident-pp Or Pva | <input checked="" type="checkbox"/> Com | 04 06 2024 12:59 Hrs | | | |
| | | | | | | |
| #2 | Crime Incident | <input type="checkbox"/> Att | Location of Incident | | Offense Tract | |
| | | <input type="checkbox"/> Com | 636 Waughtown St, Winston-salem NC 27107 | | 211 | |
| #3 | Crime Incident | <input type="checkbox"/> Att | Premise Type | | Victim Residence Type | |
| | | <input type="checkbox"/> Com | | | <input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family | |

How Attacked or Committed
DATA OMITTED

Forcible
☐ Yes ☒ N/A
☐ No

Weapon / Tools

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

V1

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

Victim of Crime #

DOB / Age

Race

Sex

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

OTHERS

INVOLED

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
TIPPETT, A. T. (16299)

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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