

INCIDENT/INVESTIGATION
REPORT

Agency Name
WINSTON-SALEM POLICE

ORI
NC NC 0340200

OCA
2412778

Date / Time Reported
Month Day Yr Time
04 | 12 | 2024 | 21:10 Hrs.

Last Known Secure
Month Day Yr Time
04 | 12 | 2024 | 21:09 Hrs.

| | | | | | | |
|----|--|---|---|---|--|---|
| #1 | Crime Incident(s) Discharging Firearm | <input type="checkbox"/> Att <input checked="" type="checkbox"/> Com | At Found Month Day Yr Time 04 12 2024 21:10 Hrs | Location of Incident 4889 Sedgeview Ln, Winston-salem NC 27107 | | Offense Tract 214 |
| #2 | Crime Incident | <input type="checkbox"/> Att <input type="checkbox"/> Com | Premise Type | | | Victim Residence Type <input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family |
| #3 | Crime Incident | <input type="checkbox"/> Att <input type="checkbox"/> Com | | | | |

How Attacked or Committed
DATA OMITTED

Forcible
☐ Yes ☒ N/A
☐ No

Weapon / Tools

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

V1

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

Victim of Crime #
1,

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

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)

| 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
DAVIS, C. L. (16178)

ID#

Officer Signature

Supervisor Signature
CAFFEY, J. D. (15234)

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

Page 1