

I N C I D E N T D A T A	Agency Name KERNERSVILLE POLICE		INCIDENT/INVESTIGATION REPORT				OCA 2022-004724		
	ORI NC 0340100						Date / Time Reported Month Day Yr Time 11 18 2022 12:40 Hrs.		
	#1	Crime Incident(s) All Other Larceny	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com	At Found Month Day Yr Time 11 18 2022 10:00 Hrs.		Last Known Secure Month Day Yr Time 11 18 2022 10:00 Hrs.			
	#2	Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com	Location of Incident 485 Veterans Way, Kernersville NC 27284			Offense Tract Z4		
#3	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			
MO	How Attacked or Committed Victims Item Was Taken.					Forcible <input type="checkbox"/> Yes <input checked="" type="checkbox"/> N/A <input type="checkbox"/> No	Weapon / Tools		
V I C T I M	# of Victims 1	Type <input checked="" type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown		Injury <input type="checkbox"/> None <input type="checkbox"/> Minor <input type="checkbox"/> Loss of Teeth <input type="checkbox"/> Broken Bones <input type="checkbox"/> Severe Lacerations <input type="checkbox"/> Internal <input type="checkbox"/> Unconscious <input type="checkbox"/> Other Major		Drug/Alcohol Use: <input type="checkbox"/> Yes <input type="checkbox"/> Unknown <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A			
	V1	Victim/Business Name (Last, First, Middle) HARTZOG, DIANE ATTKISSON		Victim of Crime # 1,	DOB / Age 74	Race W	Sex F		
	Home Address					Home Phone			
	Employer Name/Address					Business Phone	Mobile Phone		
	VYR	Make	Model	Style	Color	Lic/Lis	Vin		
O T H E R I N V O L V E D	CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)								
	Type: <input type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown								
	Code	Name (Last, First, Middle)				Victim of Crime #	DOB / Age	Race Sex	
	Home Address					Home Phone			
	Employer Name/Address				Business Phone	Mobile Phone			
	Type: <input type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input type="checkbox"/> Government <input type="checkbox"/> Financial Institute <input type="checkbox"/> Religious <input type="checkbox"/> L.E. Officer Line of Duty <input type="checkbox"/> Other/Unknown								
	Code	Name (Last, First, Middle)				Victim of Crime #	DOB / Age	Race Sex	
Home Address					Home Phone				
Employer Name/Address				Business Phone	Mobile Phone				
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)								
P R O P E R T Y	Victim #	DCI	Status	Value	OJ	QTY	Property Description	Make/Model	Serial Number
	1	17	7,5	\$15,000.00		1	RINGS		
	1	17	5	\$15,000.00		1	RINGS		
Number of Vehicles Stolen 0 Number Vehicles Recovered 0									
ID	Officer GORDON, D. L. (G5149)				ID#	Officer Signature WEMYSS, D. T. (W5078)			
Status	Complainant Signature				Case Status <input type="checkbox"/> Further Investigation <input type="checkbox"/> Inactive <input type="checkbox"/> Closed/Cleared <input checked="" type="checkbox"/> Closed/Leads Exhausted		Case Disposition: <input type="checkbox"/> Unfounded <input type="checkbox"/> Located <input type="checkbox"/> Extradition Declined <input type="checkbox"/> Cleared by Arrest <input type="checkbox"/> Refuse to Cooperate <input type="checkbox"/> Cleared by Arrest by Another Agency <input type="checkbox"/> Death of Offender <input type="checkbox"/> Prosecution Declined		