

INCIDENT DATE

Agency Name
KERNERSVILLE POLICE

ORI
NC 0340100

INCIDENT/INVESTIGATION REPORT

OCA
2024-004974

Date / Time Reported
Month Day Yr Time
12 | 06 | 2024 | 08:23 Hrs.

#1	Crime Incident(s) Theft Of Auto Parts & Accessories	<input type="checkbox"/> Att <input checked="" type="checkbox"/> Com	At Found Month Day Yr Time 12 06 2024 08:23 Hrs.	Last Known Secure Month Day Yr Time 12 05 2024 08:22 Hrs.	
	#2 Crime Incident	<input type="checkbox"/> Att <input type="checkbox"/> Com	Location of Incident 229 Century Blvd, Kernersville NC 27284		Offense Tract Z2
	#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
On This Date And Time The Victim Reported A Tag Stolen From Her Vehicle By An Unknown

Forcible
 Yes N/A No

Weapon / Tools

VICTIM # 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)
SPRINGS, KEISHA DENE

Victim of Crime # **1,** DOB / Age **44** Race **B** Sex **F** Relationship To Offender
Resident Status
 Resident
 Non-Resident
 Unknown

Home Address
Home Phone

Employer Name/Address
Business Phone
Mobile Phone

VYR Make Model Style Color Lic/Lis Vin

OTHERS CODES: V- Victim (Denote V2, V3) O = Owner (if other than victim) R = Reporting Person (if other than victim)

Type: Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty Other/Unknown

RP Code Name (Last, First, Middle)
SPRINGS, KEISHON AHMAD

Victim of Crime # DOB / Age **19** Race **B** Sex **M**

Home Address
Home Phone

Employer Name/Address
Business Phone
Mobile Phone

Type: Person Business Society Government Financial Institute Religious L.E. Officer Line of Duty 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)

Victim #	DCI	Status	Value	OJ	QTY	Property Description	Make/Model	Serial Number
1	38	7	\$1.00		1	LICENSE PLATES		
	PCA	TARG	\$0.00		1	2006 VAX6080 NC	MAZD 6 Da6 I	1YVFP80C865M00991

Number of Vehicles Stolen **0** Number Vehicles Recovered **0**

ID	Officer LINDSAY, A. M. (L5239)	ID#	Officer Signature	Supervisor Signature PEARSON, M. J. (P5087)
Status	Complainant Signature	Case Status <input type="checkbox"/> Further Investigation <input checked="" type="checkbox"/> Inactive <input type="checkbox"/> Closed/Cleared <input 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	Page 1