

Agency Name  
UNCG Police Department  
ORI  
NC0410500

# INCIDENT/INVESTIGATION REPORT

OCA  
1205-009573  
Date / Time Reported  
Month Day Yr Time  
05 11 2012 14:32 Hrs

INCIDENT DATA

#1	Crime / Incident(s) 061 - LARCENY - ALL OTHER	<input type="checkbox"/> Attempt <input checked="" type="checkbox"/> Complete	At Found Month Day Yr Time 05 11 2012 14:32 Hrs	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> T <input checked="" type="checkbox"/> F <input type="checkbox"/> S	Last Known Secure Month Day Yr Time 05 21 2011 14:32 Hrs
#2	Crime Incident	<input type="checkbox"/> Attempt <input type="checkbox"/> Complete	Location of Incident Facility Services - 800 Oakland Ave, Greensboro, NC 27402		Offense Tract 118
#3	Crime Incident	<input type="checkbox"/> Attempt <input type="checkbox"/> Complete	Premise Type 38 - School/College		Victim Residence Type <input type="checkbox"/> Single Family <input type="checkbox"/> Multi Family

MO

How Attacked or Committed  
By taking a Sharp Projector from unsecured room

Forcible  
 Yes  No

Weapon / Tools  
99 - Unknown/Not Stated

VICTIM

# of Victims 1	Type: <input type="checkbox"/> Person <input type="checkbox"/> Business <input type="checkbox"/> Society <input checked="" 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/Unk	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 type="checkbox"/> No <input type="checkbox"/> N/A				
V1	Victim/Business Name (Last, First, Middle)	Victim of Crime # 1	DOB / Age	Race	Sex	Relationship To Offender	Resident Status <input type="checkbox"/> Resident <input type="checkbox"/> Non-Resident <input type="checkbox"/> Unknown
Home Address				Home Phone			
Employer Name/Address				Business Phone			
VYR	Make	Model	Style	Color	Lic/Lis	Vin	

OTHERS INVOLVED

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

Code	Name (Last, First, Middle)	Victim of Crime #	DOB / Age	Race	Sex
Home Address		Home Phone			
Employer Name/Address		Business 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			

PROPERTY

Victim #	DCI	Status	Value	QTY	Property Description	Make/Model	Serial Number
1	33	S	5572.12	1	Office-Type Equipment	Sharp/C30XU	102317591

Number of Vehicles Stolen \_\_\_\_\_ Number of Vehicles Recovered \_\_\_\_\_

ID

Officer Name  
T/C Little M. Williams

ID#  
292

Officer Signature \_\_\_\_\_

Supervisor Signature \_\_\_\_\_

STATUS

Complainant Signature \_\_\_\_\_

Case Status  
 Further Investigation  
 Inactive  
 Closed/Cleared  
 Closed/Leads Exhausted

Case Disposition:  
 Unfounded  Juvenile/No Custody  Extradition Declined  
 Cleared by Arrest  Refuse to Cooperate  Located  
 Cleared by Arrest by Another Agency  
 Death of Offender  Prosecution Declined

Page 1 of 3

TAC # 063999 0000

# INCIDENT/INVESTIGATION REPORT

OCA 1205-009573
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Status Codes: L = Lost S = Stolen R = Recovered D = Damaged Z = Seized B = Burned C = Counterfeit / Forged F = Found

DRUGS	DCI	Status	Quantity	Type Measure	Suspected Type	Check up to 3 types of activity for each						
						Possess	Buy	Sale	Mfg.	Importing	Operating	

OFFENDER	Offender Used Alcohol/Drugs		Age: Race: Sex:			Age: Race: Sex:			Age: Race: Sex:			Primary Offender Resident Status		
	Yes	Unk	No	N/A										

SUSPECT	Name (Last, First, Middle)				Alias or Nickname				Home Address				
	Occupation				Business Address								
	DOB / Age	Race	Sex	Height	Weight	Build	Hair Color	Hair Style	Hair Length	Eye Color	Glasses		
	Scars, Marks, Tattoos, or other distinguishing features (i.e. limp, foreign accent, voice characteristics)												
	Hat	Jacket	Shirt/Blouse	Tie/Scarf	Coat/Suit	Pants/Dress/Skirt	Socks	Shoes					

WITNESS	Name (last, first, middle)				DOB / Age		Race	Sex	OCA

Suspect Hate / Bias Motivated: Yes  No

NARRATIVE	Narrative
	OCA = TO BE ASSIGNED
	Inc_Date = 5/11/2012
	Inc_Time = 2:35 p.m.
	Amount = 5,572.12
	Nature = Missing Projector
	Location = Campus Supply Training room
	Victim's Name = Hoyte Phiifer
	Victim's HMPH =
	Victim's WKPH = 336 256-0430
	Victim's FXPH =
	Victim's ADDRESS = 800 Oakland Ave
	Victim's CITY = Greensboro
	Victim's STATE = NC
Victim's ZIP = 27410	
Victim's E-MAIL = hdphiifer@uncg.edu	
Witness Name =	
Witness HMPH =	
Witness WKPH =	

**CONTINUATION PAGE**

1. AGENCY UNCG Police Department	2. ORI NC0410500	3. CONTINUATION TO: <input checked="" type="checkbox"/> INVESTIGATION <input type="checkbox"/> ARREST <input type="checkbox"/> SUPPLEMENTARY INV.	4. OCA FILE NO. 1205-009573
Narrative			
Witness FXPH =			
Witness ADDRESS =			
Witness CITY =			
Witness STATE =			
Witness ZIP =			
Witness E-MAIL =			
Suspect's Name =			
Suspect's HMPH =			
Suspect's WKPH =			
Suspect's FXPH =			
Suspect's ADDRESS =			
Suspect's CITY =			
Suspect's STATE =			
Suspect's ZIP =			
Suspect's E-MAIL =			
Suspect's RACE =			
Suspect's SEX =			
Suspect's HGT =			
Suspect's WGT =			
<p>Details = A Sharp C30XU ceiling project (serial# 102317591) was taken down and replaced in the Campus Supply Training room by ITS over a year ago. The last time I saw the projector was when I inventoried it on April 21, 2011. This project had been place behind the computer equipment and left by ITS along with a couple DVD players they had taken out of service also. No one knew what plans they had for this projector so these things had just set in the corner knowing it still was UNCG inventory. The Training room is locked daily.</p>			
<p align="center">During the April 2012 Fixed Asset inventory the projector could not be found.</p>			
<p>We have asked employees about the possiblity of relocation of the item and nothing has turned up.</p>			
<p>Submit = SEND</p>			
<p>Article entered NCIC:</p>			
<p>03HG00001W.NC2K.EA.20120513071106.</p>			
<p>TO: NCG        -089432 20120513 07:11:06    000643A012</p>			
<p>FROM: NC2K                                    20120513 07:11:06</p>			
<p>1L0117160037433EA</p>			
<p>NC0410500</p>			
<p>NIC/A070226915 SER/102317591</p>			
<p>OCA/1205-009573</p>			
Officer Name / ID T/C Little M. Williams - 292	Officer Signature	Date / Time Submitted	Page <u>3</u> of <u>3</u>