



**Winthrop University  
Police Department**

***Daily Case Log***

Month of December, 2026



|                          |                          |
|--------------------------|--------------------------|
| <b>Incident #:</b>       |                          |
| <b>Date Reported:</b>    | <b>Time Reported:</b>    |
| <b>Date(s) Occurred:</b> | <b>Time(s) Occurred:</b> |
| <b>Location:</b>         |                          |
| <b>Incident Type:</b>    |                          |
| <b>Synopsis:</b>         |                          |
| <b>Disposition:</b>      |                          |

|                          |                          |
|--------------------------|--------------------------|
| <b>Incident #:</b>       |                          |
| <b>Date Reported:</b>    | <b>Time Reported:</b>    |
| <b>Date(s) Occurred:</b> | <b>Time(s) Occurred:</b> |
| <b>Location:</b>         |                          |
| <b>Incident Type:</b>    |                          |
| <b>Synopsis:</b>         |                          |
| <b>Disposition:</b>      |                          |

|                          |                          |
|--------------------------|--------------------------|
| <b>Incident #:</b>       |                          |
| <b>Date Reported:</b>    | <b>Time Reported:</b>    |
| <b>Date(s) Occurred:</b> | <b>Time(s) Occurred:</b> |
| <b>Location:</b>         |                          |
| <b>Incident Type:</b>    |                          |
| <b>Synopsis:</b>         |                          |
| <b>Disposition:</b>      |                          |

|                          |                          |
|--------------------------|--------------------------|
| <b>Incident #:</b>       |                          |
| <b>Date Reported:</b>    | <b>Time Reported:</b>    |
| <b>Date(s) Occurred:</b> | <b>Time(s) Occurred:</b> |
| <b>Location:</b>         |                          |
| <b>Incident Type:</b>    |                          |
| <b>Synopsis:</b>         |                          |
| <b>Disposition:</b>      |                          |

|                          |                          |
|--------------------------|--------------------------|
| <b>Incident #:</b>       |                          |
| <b>Date Reported:</b>    | <b>Time Reported:</b>    |
| <b>Date(s) Occurred:</b> | <b>Time(s) Occurred:</b> |
| <b>Location:</b>         |                          |
| <b>Incident Type:</b>    |                          |
| <b>Synopsis:</b>         |                          |
| <b>Disposition:</b>      |                          |