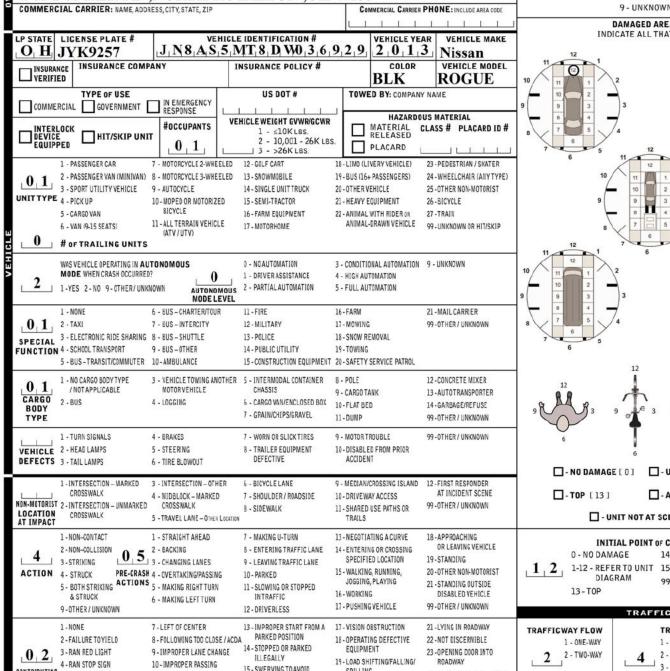
OHIO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER*							
PHOTOS TAKEN OH-2 X 0H-3	LOCAL INFORMATION		2.0.2.30.0.0.1.6.3.7.6.					
M OH-1P OTHER	REPORTING AGENCY NAME*		NCIC*	HIT/SKIP 1 - SOLVED	NUMBER OF UNITS	UNIT IN ERROR 98 - ANIMAL		
PRIVATE PROPERTY	City of Kent Police	0	6,7,0,3	L 2 - UNSOLVED	0 2 0	1 99 - UNKNOWN		
county* Locality* 1-city 6 7 1 2-village Kent	CRASH DATE / TIME* CRASH SEVERITY 1-FATAL 1-FATAL CRASH SEVERITY							
3-TOWNSHIP	LATITUDE DE	2	- SERIOUS INJURY SUSPECTED					
S - SOUTH	LOCATION ROAD NAME FRANKLIN		ROAD TYPE	41,14,5	2	- MINOR INJURY		
W-WEST	REFERENCE ROAD NAME (ROAD, I	MILEPOST. HOUSE #)	ROAD TYPE	LONGITUDE DE		SUSPECTED - INJURY POSSIBLE		
S - SOUTH E - EAST	ELM		ST	-8 ₁ 1 ₀ 3 ₆ 0	-	- PROPERTY DAMAGE		
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPE	<u> </u>		NTERSECTION RELATE	ONLY D		
2 MILE POST C. COUTH	man and the second seco		RD - ROAD	☐ WITHIN INTE	RSECTION OR ON APPROA	ACH		
3-HOUSE # L- E-EAST	I EDERAL OS ROOTE		SQ - SQUARE ST - STREET	WITHIN INTE	RCHANGE AREA NUN	MBER OF APPROACHES		
	NUMBERED COUNTY ROUTE CR -		TE - TERRACE TL - TRAIL	38	ROADWAY			
1-MILES TR-	NUMBERED TOWNSHIP DR -	- DRIVE PI - PIKE	WA - WAY	ROADWAY DIV	IDED			
3-YARDS	HE -	- HEIGHTS PL - PLACE			1			
1 - ON ROADWAY 9 - CROSSOVER		NER OF CRASH COLLISION/IMPA COLLISION 4 - REAR-TO-REAR	ACT	DIRECTION OF TRAVEI N - NORTH		N TYPE FLUSH MEDIAN		
0 1 2 - ON SHOULDER 10-DRIVEWAY/	TWO	MOTOR		S - SOUTH	(< 4 FEET			
4 - ON ROADSIDE 12-SHARED US	E PATHS OR TRAN	ISPORT 7 - SIDESWIPE, SAN		E - EAST W - WEST	(≥4 FEET			
6-OUTSIDE TRAFFIC WAY 13-BIKE LANE	2 - REAR 3 - HEAD	[448][47] *** 1 1 1 1 1 1 1 1 1				RAISED MEDIAN		
7 - ON RAMP 14-TOLL BOOTH 8 - OFF RAMP 99-OTHER / UNI					9 - OTHER/UN			
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN W	ORK ZONE	CONTOUR	CONDITIONS	SURFACE		
1-1	ANE CLOSURE ANE SHIFT/CROSSOVER	1 - BEFORE THE 1ST WARNING SIGN	WORK ZONE	_1_	_ 1	_ 2		
D LAW ENERGENENT PRESENT 3-V	VORK ON SHOULDER	2 - ADVANCE WARNI 3 - TRANSITION ARE		1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE		
4-1	OR MEDIAN NTERMITTENT OR MOVING WORK	4 - ACTIVITY AREA		2 - STRAIGHT GRADE 3 - CURVE LEVEL	2 - WET 3 - SNOW	2 - BLACKTOP, BITUMINOUS,		
ACTIVE SCHOOL ZONE 5-0	THER	5 - TERMINATION AR	REA	4 - CURVE GRADE	4 - ICE	ASPHALT 3 - BRICK/BLOCK		
LIGHT CONDITION 1 - DAYLIGHT	WEATHE 1-CLEAR	R 6 - SNOW		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL,		
2 2 - DAWN/DUSK	0.1.2-CLOUDY	7 - SEVERE CROSSWINDS	NDS 6-WATER (STANDING, 5-DIRT					
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	8 - BLOWING SAND, SOIL, DIRT 9 - FREEZING RAIN OR FREEZ	G SAND, SOIL, DIRT, SNOW IG RAIN OR FREEZING DRIZZLE 7 - SLUSH 9 - OTH			9 - OTHER/UNKNOWN			
5 - DARK – UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOWN			
NARRATIVE		T				Indicate the north		
UNIT 1 WAS TRAVELING WB	ON W ELM ST ANI)				direction with an "N" on the compass diagram.		
CAME TO THE STOP SIGN A	T W ELM ST AND					20 20 20		
FRANKLIN AVE. UNIT 2 WAS	S TRAVELING NB			-				
ON FRANKLIN AVE. UNIT 1	DID NOT SEE		Ιí	FRANKLINAVE				
UNIT 2 AND BEGAN TO TUR	N RIGHT ONTO		l i	, m				
FRANKLIN AVE. UNIT 1 THE	N DID SEE UNIT		~ #		WELMST.			
2 LAST MINUTE BUT WAS A	LREADY		I IN	UNIT 1				
PARTIALLY IN THE LANE. U	NIT 2 WAS					-		
UNABLE TO AVOID UNIT 1 A	ND STRUCK UNIT	1		· [
1. UNIT 2 THEN LOST CONTROL AND RAN								
OFF THE ROAD RIGHT. UNIT 1 WAS CITED								
	DISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED I		POLICE AGENCY		
1,0,1,0,2,0,2,3,/,1,8,0,5,1,0,1, TOTAL TIME OTHER TOTAL			HECKED BY OFFI		5 ₁ / ₁ 1 ₁ 9 ₁ 0 ₁ 0 ₁	MOTORIST		
TOTAL TIME OTHER TOTAL ROADWAY CLOSED INVESTIGATION TIME MINUTE	Moore, Matthew	w J	hort, Jas	son M		SUPPLEMENT (CORRECTION OR ADDITION		
	4 2 OFFICER'S BAD	GE NUMBER*	2 1 2	Y OFFICER'S BADGE N	IUMBER*	TO AN EXISTING REPORT SENT TO COPS)		

LOCAL REPORT NUMBER 2 . 0 . 2 . 3 . - . 0 . 0 . 0 . 1 . 6 . 3 . 7 . 6 . OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER) Redacted per ORC 149.43(A)(1) DAMAGE GORMAN, VICTORIA, MARIE DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 2 4981 BUNKER RD ,NORTH ROYALTON ,OH 44133 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE DAMAGED AREA(S) INDICATE ALL THAT APPLY **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE J. N 8 A S 5 MT 8 D WO 3 6 9 2 9 2 0 1 3 Nissan INSURANCE COMPANY INSURANCE POLICY # COLOR VEHICLE MODEL INSURANCE BLKROGUE TYPE OF USE US DOT # TOWED BY: COMPANY NAME HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS MATERIAL CLASS # PLACARD ID # 1 - ≤10KLBS. HIT/SKIP UNIT 2 - 10,001 - 26K LBS. $0_{\perp}1$ PLACARD 」 3 - >26K LBS. 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 13-SNOWMOBILE 19-RUS (16+ PASSENGERS) 24 - WHEFI CHAIR (ANY TYPE)



- UNDERCARRIAGE [14] - ALL AREAS [15] - UNIT NOT AT SCENE [16] INITIAL POINT OF CONTACT 14 - UNDERCARRIAGE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE

99 - UNKNOWN TRAFFIC TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 3 - FLASHER

6 - NO CONTROL CONTRIBUTING 5 - UNSAFE SPEED SPILLING 99-OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING # of THROUGH LANES RAIL GRADE CROSSING 6-IMPROPERTURN 12 - IMPROPER BACKING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS 2 2 - INVOLVED-ACTIVE CROSSING NON-COLLISION 1 2 0 1 - OVERTURNIROLLOVER 3 - INVOLVED-PASSIVE CROSSING 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE

OPPOSITE DIRECTION OF EQUIPMENT 17 - ANIMAL - FARM 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS UNIT / NON-MOTORIST DIRECTION TRAVEL 23 - STRUCK BY FALLING, 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 18-ANIMAL - DEER 12 - DOWNHILL RUNAWAY SHIFTING CARGOOR 1 - NORTH 5 - NORTHEAST 19-ANIMAL - OTHER J 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT ANYTHING SET IN MOTION 13 - OTHER NON-COLLISION 2 - SOUTH 6 - NORTHWEST 20 - MOTOR VEHICLE IN 5 - CARGO / EQUIPMENT BY A MOTOR VEHICLE 10 - CROSS MEDIAN 14-PEDESTRIAN FROM | 3 | TO | 1 | TRANSPORT 7 - SOUTHEAST 3 - EAST LOSS OR SHIFT 24 - OTHER MOVABLE OBJECT 15 - PEDAL CYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 8 - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 25 - IMPACT ATTENUATOR 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43-CURB 50 - WORK ZONE MAINTENANCE

9 - OTHER / UNKNOWN EQUIPMENT / CRASH CUSHION 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH UNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 51-WALL 33 - MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 45 - EMBANKMENT 1 - STATED / ESTIMATED SPEED STRUCTURE 34 - MEDIAN GUARDRAIL SUPPORT 52 - BUILDING 0,0,5 46-FENCE 27 - BRIDGE PIER ORABUTMENT BARRIER 40 - UTILITY POLE 53-TUNNEL 2 - CALCULATED / EDR 47 - MAILBOX 28-BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54 - OTHER FIXED OR JECT 48-TREE 3 - UNDETERMINED POSTED SPEED _ 29-BRIDGE RAIL OR SUPPORT 99 - OTHER / UNKNOWN 49-FIRE HYDRANT 36 - MEDIAN OTHER BARRIER 30-GUARDRAIL FACE 42 - CULVERT 2 | 5 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

*

00

5 - YIELD SIGN

LOCAL REPORT NUMBER 2 . 0 . 2 . 3 . - . 0 . 0 . 0 . 1 . 6 . 3 . 7 . 6 . OWNER NAME: LAST, FIRST, MIDDLE (((I SAME AS DRIVER)) OWNER PHONE: INCLUDE ALEA CODE (I SAME AS DRIVER) OGUNMILUYI, IYANUOLUWA, OMOLO (124). 43(A)(1) DAMAGE DAMAGE SCALE 3 - FUNCTIONAL DAMAGE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 1 - NONE 1968 SIOUX PL ,Kent ,OH 44240 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE 9 - UNKNOWN DAMAGED AREA(S) INDICATE ALL THAT APPLY **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE LP STATE LICENSE PLATE # 2 0 1 3 Hyundai KMHD3.5,LE3,DU0.5,0,7,8,5 O H JVN5311 INSURANCE VERIFIED INSURANCE COMPANY INSURANCE POLICY # COLOR VEHICLE MODEL BLK ELANTRA DIRECT AUTO INS 2019485346 TYPE OF USE US DOT# TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE **Bakers Towing** HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS INTERLOCK DEVICE EQUIPPED MATERIAL CLASS # PLACARD ID # - ≤10KLBS RELEASED HIT/SKIP UNIT 2 - 10.001 - 26K LBS 0,2 PLACARD J 3 - >26K LBS 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 0 1 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST UNITTYPE 4 - PICKUP 10 - MOPED OR MOTORIZED 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE BICYCLE 5 - CARGO VAN 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 -TRAIN 11 - ALL TERRAIN VEHICLE ANIMAL-DRAWN VEHICLE 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP (ATV/UTV) 00 # OF TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 0 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 1-YES 2-NO 9-0THER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS MODE LEVEL 16-FARM 1 - NONE 6 - BUS - CHARTER/TOUR 11-FIRE 21 - MAIL CARRIER 0 1 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18-SNOW REMOVAL FUNCTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19-TOWING 5 - BUS - TRANSIT/COMMUTER 10-AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 8 - POLE 12 - CONCRETE MIXER 0.1 / NOTAPPLICABLE MOTORVEHICLE CHASSIS 9 - CARGO TANK 13-AUTOTRANSPORTER CARGO 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE BODY * 7 - GRAIN/CHIPS/GRAVEL 11-DUMP 99-OTHER / UNKNOWN 0 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN 8 - TRAILER EQUIPMENT 10-DISABLED FROM PRIOR VEHICLE 2 - HEAD LAMPS 5 - STEERING DEFECTIVE ACCIDENT DEFECTS 3 - TAIL LAMPS 6 - TIRE BLOWOUT -NO DAMAGE [0] - UNDERCARRIAGE [14] 3 - INTERSECTION - OTHER 9 - MEDIAN/CROSSING ISLAND 1 - INTERSECTION - MARKED 6 - BICYCLE LANE 12 - FIRST RESPONDER CROSSWALK AT INCIDENT SCENE ☐-TOP [13] - ALL AREAS [15] 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS NON-MOTORIST 2-INTERSECTION - UNMARKED 99 - OTHER / UNKNOWN CROSSWALK B - SIDEWALK 11 - SHARED USE PATHS OR LOCATION CROSSWALK - UNIT NOT AT SCENE [16] 5 - TRAVEL LANE - OTHER LOCATION TRAILS AT IMPACT 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING INITIAL POINT OF CONTACT OR LEAVING VEHICLE 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 0 1 3 - CHANGING LANES 3___ 3-STRIKING 0 - NO DAMAGE 14 - UNDERCARRIAGE 19-STANDING SPECIFIED LOCATION 9 - LEAVING TRAFFIC LANE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10-PARKED DIAGRAM JOGGING, PLAYING 99 - UNKNOWN 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN 21 - STANDING OUTSIDE 11 - SLOWING OR STOPPED 13-TOP 16-WORKING DISABLED VEHICLE & STRUCK INTRAFFIC 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN 9-OTHER/UNKNOWN 12 - DRIVERLESS TRAFFIC 1-NONE 13 - IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 -LYING IN ROADWAY 7 - LEFT OF CENTER TRAFFIC CONTROL TRAFFICWAY FLOW PARKED POSITION 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 18-OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14 - STOPPED OR PARKED EQUIPMENT 23 - OPENING DOOR INTO 2 - TWO-WAY 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE 0_1 2 - SIGNAL 5 - YIELD SIGN ILLEGALLY 19 - LOAD SHIFTING/FALLING/ ROADWAY 4 - RAN STOP SIGN 10-IMPROPER PASSING 3 - FLASHER 6 - NO CONTROL CONTRIBUTING 5 - UNSAFE SPEED 15 - SWERVING TO AVOID SPILLING 99-OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING # of THROUGH LANES RAIL GRADE CROSSING 6-IMPROPERTURN 12 - IMPROPER BACKING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS 2 2 - INVOLVED-ACTIVE CROSSING NON-COLLISION 1 2 0 1 - OVERTURNIROLLOVER 3 - INVOLVED-PASSIVE CROSSING 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE OPPOSITE DIRECTION OF EQUIPMENT 17 - ANIMAL - FARM 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS TRAVEL 23 - STRUCK BY FALLING, **UNIT / NON-MOTORIST DIRECTION** 3 - IMMERSION 8 - BAN OFF ROAD RIGHT 18-ANIMAL - DEER

2∟		4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	9 - RAN OFF ROAD LIGHT 10 - CROSS MEDIAN	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE	19-ANIMAL — OTHER 20-MOTOR VEHICLE IN TRANSPORT 21-PARKED MOTOR VEHICLE	SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24-OTHER MOVABLE OBJECT	FROM 2 TO 1	1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST
			COLLISIO	NWITH FIXED OBJE	CT - STRUCK	i i		9 - OTHER / UNKNOWN
4∟		25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST	43 - CURB 44 - DITCH	50-WORK ZONE MAINTENANCE - EQUIPMENT	UNIT SPEED	DETECTED SPEED
5∟		26 - BRIDGE OVERHEAD STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER	39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE	45 - EMBANKMENT 46 - FENCE 47 - MAILBOX	51 - WALL 52 - BUILDING 53 - TUNNEL	$\begin{bmatrix} 0 & 0 & 2 \end{bmatrix}$	1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR
6∟	ب	28 - BRIDGE PARAPET 29 - BRIDGE RAIL 30 - GUARDRAIL FACE	35 - MEDIAN CONCRETE BARRIER 36 - MEDIAN OTHER BARRIER	41 - OTHER POST, POLE OR SUPPORT 42 - CULVERT	48-TREE 49-FIRE HYDRANT	54-OTHER FIXED OBJECT 99-OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED
L	1	FIRST HARMFUL EVEN	NT 1 MOST H	HARMFUL EVENT			2 5	

OFF PUBLIC SAFETY MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER							
Maria							2 0 2 3 - 0 0 0 1 6 3 7 6							
UNIT#	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER						
0,1	GORMAN, VICTORIA, MARIE								0 + 7 + 3 + 1 + 2 + 0 + 0 + 2 2 + 1 F					
	S: STREET, CITY, STATE, ZIP BUNKER RD ,NORTH ROYALTON ,OH 44133							CONTACT PHONE - INCLUDE AREA CODE Redacted per ORC 149.43(A)(1)						
INJURIES		EMS AGENCY (NAME)		INJUREDI	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	— DOT C	SEATING PO	OSITION AIR	BAG USAGE	EJECTION	TRAPPED
2 5	TAKEN BY							USED 0 4	□MC HE	LMET 0	1	1	_1_	_1_
OL STATE		LICENSE NUMBER		OFFENS	E CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CI	TATION N	NUMBER	
O H	REDAC	TED PER ORC 450	1:1-12	331.1	9		X	Operation of	Vehicle		26	6288		
OL CLASS	ENDORSEMEN SELECT UP TO 2			VER TRACTED		OHOL / DRUG SUSPE		CONDITION		YPE VALUE	STATU		E RESULT	SELECTUPTO4
. 4 .			BY	1	=	LCOHOL MAR	RIJUANA	1	1	1	. 1	1	7-14 ESS-1	
UNIT #	NAME-LAST	FIRST, MIDDLE			υ۰	THER DRUG				DATE OF BIR			AGE	GENDER
. 0 . 2 .		MILUYI, IYANU	OLUV	VA. O	MO	LOLA			0.5	2 5 1		1	3 2	F
	STREET, CITY, S		OLU	111, 0	IVIO	LOLA			7.5	PHONE - INCLUDE		1	5 2	I
=		PL ,Kent ,OH 442	40							acted per		149).43(A	λ)(1) .
INJURIES	INJURED	EMS AGENCY (NAME)	••	INJUREDI	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT		SEATING DO			E EJECTION	
2 5	TAKEN BY							USED 0 4	□MC HE		1	1	1 1	1
OL STATE		LICENSE NUMBER		OFFENS	SE CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CI	CITATION NUMBER		
O, H,	REDAC	TED PER ORC 450)1:1-12	337.2	26		CODE	Child Restrai	nt Syst		26	6289		
OL CLASS	ENDORSEMEN SELECT UP TO 2			VER TRACTED	_	OHOL / DRUG SUSPE		CONDITION	STATUS T	YPE VALUE	STATU		IG TEST(S E RESULT	SELECTUPTO4
1			BY	1	=	_	RIJUANA	. 1 .	1	1	1		R SHEETEN	
UNIT#	NAME. LAST	FIRST, MIDDLE		1	Цο	THER DRUG				DATE OF BIR			AGE	GENDER
OILT #	NAME. CAST	, rikai, middet							DATE OF BIRTH					
ADDRESS:	STREET, CITY, S	TATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE					
ORI									Solitari Molecula Mila Vode					
INJURIES		EMS AGENCY (NAME)		INJUREDI	AKEN TO	MEDICAL FACILITY	(NAME, CITY)			SEATING PO	OSITION AIR	BAG USAGE	E EJECTION	TRAPPED
NON	TAKEN BY							USED	MC HE				111 1	1 1
OL STATE	OPERATOR	LICENSE NUMBER		OFFENS	SE CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CI	NOITATI	NUMBER	
							CODE							
OL CLASS	ENDORSEMEN SELECT UP TO 2			VER TRACTED		OHOL / DRUG SUSPE		CONDITION	STATUS T	YPE VALUE	STATI		E RESULT	SELECTOPIO4
			BY	12	=	LCOHOL MAF THER DRUG	RIJUANA				als	5865	100	
INJU	RIES	SEATING POSITION	A	IR BAG		OL CLASS	5	OL RESTRIC	TION(S)	DRIVER DIST	RACTION		TEST STA	TUS
1 - FATAL		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1-NOT DEP			1 - CLASS A		1 - ALCOHOL INTER		1 - NOT DISTRACTE			NE GIVEN	
2 - SUSPECTED 3 - SUSPECTED	SERIOUS INJURY MINOR INJURY	2 - FRONT - MIDDLE	2 - DEPLOYE 3 - DEPLOYE			2 - CLASS B 3 - CLASS C		2 - CDL INTRASTAT 3 - CORRECTIVE LE		2 - MANUALLY OPE ELECTRONIC CO	MMUNICATIO	M	ST REFUSED ST GIVEN, CON	ITAMINATED
4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE		D BOTH FRO	NT/SIDE	4 - REGULAR CLASS		4 - FARM WAIVER		DEVICE (TEXTING)	NG, TYPING,	SAI	MPLE / UNUSA	ABLE
5 - NO APPAREN	IT INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5-NOTAPP		14/81	(OHIO = D) 5 - M/C MOPED ONLY		5 - EXCEPT CLASS		3 - TALKING ON HAI COMMUNICATIO			ST GIVEN, RES ST GIVEN, RES	
	TAKEN BY	5 - SECOND - MIDDLE	9- UEPLUTI	MENT UNKNO	AAIA	6 - NO VALID OL		6 - EXCEPT CLASS A & CLASS B BUS		4 - TALKING ON HA	ND-HELD		KNOWN	
1 - NOT TRANSP /TREATED A	and the same of th	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	EJ	ECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE		5 - OTHER ACTIVITY		Compression of the last of the	OHOL TES	ST TYPE
2 - EMS		(MOTORCYCLE SIDE CAR) 8 - THIRD - MIDDLE	1-NOTEJE			H - HAZMAT		RESTRICTIONS		ELECTRONIC DE	VICE	1 - N0 2 - BL		
3 - POLICE 9 - OTHER / UNK	(NOWN	9 - THIRD - RIGHT SIDE	2 - PARTIAL 3 - TOTALLY			M - MOTORCYCLE P - PASSENGER		9 - LEARNER'S PER RESTRICTIONS	MII	6 - PASSENGER 7 - OTHER DISTRAC	CTION	3 - UR	INE	
	QUIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4-NOTAPP			N-TANKER		10 - LIMITED TO DAY 11 - LIMITED TO EMI		INSIDE THE VEH 8 - OTHER DISTRAC		4 - BR		
1 - NONE USED	GOTPMENT	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	TI	RAPPED		Q - MOTOR SCOOTER R - THREE-WHEEL MO	TORCYCLE	12 - LIMITED TO EMI		THE VEHICLE			RUG TEST	TVDE
2 - SHOULDER E		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1-NOTTRA			S - SCHOOL BUS	101101022	13 - MECHANICAL DI (SPECIAL BRAK		9 - OTHER / UNKNO	WN	1 - NO		1075
3 - LAP BELT ON 4 - SHOULDER 8	ILY USED Lap belt used	12 - PASSENGER IN UNENCLOSED	2 - EXTRICA MECHAN	ICAL MEANS		T - DOUBLE & TRIPLE		CONTROLS, OR O	THER	CONDIT	EATTER CO.	2 - BL		
	RAINT SYSTEM -	CARGO AREA 13 - TRAILING UNIT	3- FREED B NON-MEG	Y Chanical Mi	EANS	X - TANKER / HAZMAT	new hove	14 - MILITARY VEHI		1 - APPARENTLY NO 2 - PHYSICAL IMPA		3 - UR 4 - OTI		
6 - CHILD REST	RAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR				GENDER F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	S WITHOUT	3 - EMOTIONAL (E.G ANGRY, DISTURBED			G TEST RE	SULT(S)
REAR FACING 7 - BOOSTER SE		(NON-TRAILING UNIT) 15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRRO		4 - ILLNESS		100000000	PHETAMINES	
8 - HELMET US		99 - OTHER / UNKNOWN				U -OTHER / UNKNOWN		17 - PROSTHETIC AII 18 - OTHER)	5 - FELL ASLEEP, FA FATIGUED, ETC.	AINTED,		RBITURATES	Ec.
9 - PROTECTIVE (ELBOW, KNE								10-VIIIEN		6 - UNDERTHE INFL			NZODIAZEPIN NNABINOIDS	E2
10 - REFLECTIVE										OF MEDICATION: /ALCOHOL		5 - C00	CAINE	
11 - LIGHTING - I / BICYCLE OF										9- OTHER/UNKNO	WN	6 - OP	IATES / OPIOID HER	20
99 - OTHER / UNK													GATIVE RESUI	LTS

HSY8306 OH1M 1/19 [760-1500] PAGE 4 OF 6

Ū	OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER							
_							2,0,2,3,-,0,0,1,6,3,7,6,							
	UNIT # NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER					
Ŀ	02 OGUNMILUYI, DANIEL								1,2,1,9,2,0,2,1,0,1,M					
PAN	ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE					
OCCUPANT	STATE OF THE PARTY		PL ,Kent ,OH	44240										
	_	INJURED TAKEN BY 1	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	TY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG		TRAPPED		
Ц	5	вт	Kent Fire				0,5	☐MC HELMET	0 6	1_	1 1			
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
5								سسب				ш		
OCCUPAN.	ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INGLUDE AREA CO	DE				
000	THUDIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	== (mme ees)	SAFETY EQUIPMENT	T SEATING POSITION AIR BAG USAGE EJECTION TRAPPED						
É	INJURIES	TAKEN BY	EMIS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL PACILI	DOT-COMPLIANT MC HELMET	SEATING PUSITION	AIR BAG USAG	EJECTION	TRAPPED				
۹											1			
ř	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAI	E OF BIRTH		AGE	GENDER		
ķ	ADDRESS:	: STREET, CITY,	STATE ZIP					CONTACT PHONE	- INCLUDE AREA CO	05				
OCCUPAN.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		, 2						MOCODE AREA OF					
20	INJURIES	INJURED	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACILI	TY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED		
		TAKEN BY					USED	DOT-COMPLIANT MC HELMET		•				
۲	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
			, ,								F F 7			
ANT	ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE				
OCCUPAN														
ŏ	INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY	TY (NAME, CITY)		DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED		
		TAKEN BY					USED	MC HELMET		L	ر ا			
		INJU	JRIES	SAFET	Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG L	SAGE			
ľ	1 - FATA	AL		1 - NONE US	ED - OCCUPANT		T – LEFT SIDE ORCYCLE DRIV	1 - NOT DEPLOYED						
			RIOUS INJURY		ER BELT ONLY USED	2 FRONT MIRRIE			2 - DEPLOYED FRONT					
		PECTED MI SIBLE INJU	INOR INJURY		T ONLY USED		T - RIGHT SIDE							
		PPARENT		4 - SHOULDI	ER & LAP BELT USED		ND – LEFT SIDE ORCYCLE PASS	-						
					ESTRAINT SYSTEM -		ND - MIDDLE	5 - NOT APPLICABLE						
	1 NOT	TRANSPOR	TAKEN BY		D FACING ESTRAINT SYSTEM –		ND – RIGHT SIC D – LEFT SIDE	9 - DEPLOYMENT UNKNOWN						
		EATED AT S		REAR FA		(MOT	ORCYCLE SIDE	CAR) EJECTION						
b	2- EMS			7 - BOOSTER	RSEAT		D – MIDDLE D – RIGHT SIDE		ECTED					
	3 - POLI			8 - HELMET			PERSECTION	2 PARTIALLY ELECTED						
	9- OTH	ER / UNKNO	OWN		TVE PADS USED KNEES, ETC.)		ENGER IN OTH	CALL INC. UNIT						
			NDER	10- REFLECT	TVE CLOTHING	BUS, F	PICK-UP WITH CAP	P) THOTAT ELGABLE						
	F - FEMA M - MALI				G - PEDESTRIAN		ENGER IN UNE							
		R / UNKNO	WN	/ BICYCL 99 - OTHER /		13 - TRAI	LING UNIT	1 - NOT TRAPPED			BY MECHANICAL			
í				99- UIHEK/	ONKNOWN		NG ON VEHICLE TRAILING UNIT)	EXTERIOR	S					
							MOTORIST		3 - FREED BY NON-MECHANIC MEANS			AL		
IJ						99 - OTHE	R / UNKNOWN							
SS		ST, FIRST, MIDD	SAMANTHA,	IO				0 2 2 DAT	E OF BIRTH	Q 1	4.2	GENDER F		
WITNESS		STREET, CITY,		JO				CONTACT PHONE			4 2	r		
M	983 SANCTUARY VIEW DR ,Brimfield Twp, ,OH 44240							Redacte	d per O	RC 14	9.43(A)(1),		
٦	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER						
ESS														
WITNESS	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE							
S	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER						
WITNESS	Annese	· SIDEET CITY	STATE 71D					CONTACT PHONE - INCLUDE AREA CODE						
W	ADDRESS: STREET, CITY, STATE, ZIP							VOLTAVI FILVILE - INCLUDE AREA CUDE						
												B		

HSY 8355 OH1P 3/19 [760-1500] PAGE **5** OF **6**



OF PUBLIC SAFETY Narrative Continuation

LOCAL REPORT NUMBER

	\[\(\frac{2}{1} \text{U} \cdot \frac{2}{1} \text{U} \cdot \frac{2}{1} \text{U} \cdot \frac{1}{1} \text{U} \cdot \frac{1}{1} \text{U} \cdot \frac{3}{1} \text{U} \cdot \frac{1}{1} \text{U} \cdot \frac{1}{1} \text{U} \cdot \frac{3}{1} \text{U} \cdot \frac{1}{1} \text{U} \cdot \frac{1}{1} \text{U} \cdot \frac{3}{1} \text{U} \cdot \frac{1}{1} \text{U} \cdot \frac{1} \text{U} \cdot \frac{1}{1} \text{U} \cdot \frac{1}{1}						
FOR FTY AT STOP SIGN AND UNIT 2 WAS							
CITED FOR NOT HAVING THEIR CHILD RESTRAINT SYSTEM BUCKLED DOWN TO THE							
VEHICLES CHILD RESTRAINT HOOKS.							