OF PUBLIC SAFETY TRAFFIC CRASH	REPORT *DENOTES	MANDATORY FIELD FOR SUPPL	EMENT REPORT	ı,	OCAL REPORT NUMBER	k				
□ 0H-2 □ 0H-3	LOCAL INFORMATION			2.0.2.4	- 10 10 10 1 2	2,0,5,0,				
PHOTOS TAKEN OH-1P OTHER	REPORTING AGENCY NAME*		NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR				
SECONDARY CRASH PRIVATE PROPERTY	City of Kent Poli	ce	0,6,7,0,3	1-SOLVED 0,2 98-ANIMAL 0,2 99-UNKNOWN						
COUNTY* LOCALITY* LOCATION: CIT	Y, VILLAGE, TOWNSHIP*			CRASH DATE /	17 Marin 100 (100 (100 (100 (100 (100 (100 (100	SH SEVERITY				
6 7 1 2-VILLAGE Kent				0.8172024	/1013 5	FATAL SERIOUS INJURY				
A N NORTH	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DE		SUSPECTED				
S-SOUTH S-SOUTH S-WWEST	WATER		$S \setminus T$	41,14,1	1 0 1	MINOR INJURY				
W-WEST	REFERENCE ROAD NAME (RO	AD MILEPOST HOUSE #)	ROAD TYPE	LONGITUDE		SUSPECTED INJURY POSSIBLE				
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST	BOWMAN	,		35 5 635 435 735		PROPERTY DAMAGE				
	DOWNAN		$D_{\perp}R_{\parallel}$	-8 ₁ ₀ 3 ₅ 7	<u> U_U_B_</u>	ONLY				
REFERENCE POINT DIRECTION 1 - INTERSECTION FROM REFERENCE IR	ROUTE TYPE - INTERSTATE ROUTE(TP)	ROAD TYPE AL - ALLEY HW- HIGHWAY	RD - ROAD		INTERSECTION RELATED					
1 2-MILE POST 2 S-SOUTH US	- FEDERAL US ROUTE	AV - AVENUE LA - LANE	SQ - SQUARE	X WITHIN INTE	RSECTION OR ON APPROA	CH . 4 .				
3-H005E # E-EAST	STATE ROUTE	BL - BOULEVARD MP - MILEPOST	ST - STREET	☐ WITHIN INTE	RCHANGE AREA NUM	BER OF APPROACHES				
DISTANCE DISTANCE CR	NUMBERED COUNTY ROUTE	CR - CIRCLE OV - OVAL CT - COURT PK - PARKWAY	TE - TERRACE TL - TRAIL		ROADWAY					
1 - MILES TR	NUMBERED TOWNSHIP ROUTE	DR - DRIVE PI - PIKE	WA - WAY	ROADWAY DIV	/IDED					
1 5 2 3-YARDS	NOOTE	HE - HEIGHTS PL - PLACE		L KOADWAT DIT						
LOCATION OF FIRST HARMFUL EVEN		IANNER OF CRASH COLLISION/IM		DIRECTION OF TRAVE	L MEDIAN	TYPE				
1 - ON ROADWAY 9 - CROSSOVER 2 - ON SHOULDER 10 - DRIVEWAY	ALLEY ACCESS	NOT COLLISION 4 - REAR-TO-REA BETWEEN 5 - BACKING	.R	N - NORTH	1 - DIVIDED F (< 4 FEET	LUSH MEDIAN				
1.0.1.	DADE ODOCCING L Z 1	TWO MOTOR 6-ANGLE		S - SOUTH E - EAST	2 - DIVIDED F	LUSH MEDIAN				
4 - ON ROADSIDE 12-SHARED U 5 - ON GORE TRAILS	F94888844468	TRANSPORT 7 - SIDESWIPE, S REAR-END 8 - SIDESWIPE, 0		W-WEST	(≥4 FEET 3 - DIVIDED, D	EPRESSED MEDIAN				
6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	3-H	HEAD-ON 9 - OTHER / UNKI			4 - DIVIDED, R	RAISED MEDIAN				
7 - ON RAMP 14-TOLL BOOT					9 - OTHER/UN	A Parameter and the Control of the C				
8-OFF RAMP 99-OTHER/OF			2000 200 ADV 902 A	AANTAUR	COMPATIONS	0005105				
WORK ZONE RELATED	WORK ZONE TYPE LANE CLOSURE	1 - BEFORE THE 1:		CONTOUR	CONDITIONS	SURFACE				
	LANE SHIFT/CROSSOVER	WARNING SIGN	N	_1_	_1_					
LAW ENFORCEMENT PRESENT 3-	WORK ON SHOULDER OR MEDIAN	2 - ADVANCE WAR 3 - TRANSITION AF								
The state of the s	INTERMITTENT OR MOVING WO	ORK 4 - ACTIVITY AREA	4	3 - CURVE LEVEL	3 - SNOW	2 - BLACKTOP, BITUMINOUS,				
ACTIVE SCHOOL ZONE 5-	OTHER	5 - TERMINATION	AREA	4 - CURVE GRADE	4 - ICE	ASPHALT 3 - BRICK/BLOCK				
LIGHT CONDITION	WEA	THER		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT,	4 - SLAG, GRAVEL,				
1 - DAYLIGHT 1 2 - DAWN/DUSK	1-CLEAR 0 1 2-CLOUDY	6 - SNOW 7 - SEVERE CROSSWINDS			OIL, GRAVEL 6 - WATER (STANDING,	STONE				
3 - DARK - LIGHTED ROADWAY	TO THE PERSON NAMED IN COLUMN 1	OKE 8 - BLOWING SAND, SOIL, DI	RT. SNOW MOVING)							
4 - DARK - ROADWAY NOT LIGHTED	4 - RAIN	9 - FREEZING RAIN OR FRE	EZING DRIZZLE		7 - SLUSH	9 - OTHER/UNKNOWN				
5 - DARK – UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN	5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOWN					
NARRATIVE		1				Indicate the north				
					4	direction with				
UNIT 2 WAS STOPPED IN TR	AFFIC HEADED				1	compass diagram.				
NORTH ON SOUTH WATER	STREET. UNIT 1				€: 35-					
REAR ENDED UNIT 2.										
REAR ENDED UNIT 2.				F 7 IF	7 1	î				
				!	Not To	Ň o <i>Scale</i>				
				J	во	WMANDR				
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				1 . 11	1 _ (
					1					
1				WATERST	Thursday.					
				SOUTHWATERST	-Unit 2Unit 1					
				SOUTHWITERST						
				SOUHWATEST						
				SOUTHWATERST	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE /TI	ME	SCENE CLEARED		EPORT TAKEN BY				
		ARRIVAL DATE / TII			I⊽	POLICE AGENCY				
0 8 1 7 2 0 2 4 / 1 0 1 3 0 8 1 TOTAL TIME OTHER TOTAL	17.2.0.2.4./.1.0.2.1. OFFICER'S NAME*	0, 0, 8, 1, 7, 2, 0, 2, 4, /	1 0 2 3 0	0.8.1.7.2.0.2.4 CER'S NAME*	I⊽					
$ \begin{array}{c c} 0_{1}8_{1}1_{1}7_{1}2_{1}0_{1}2_{1}4_{1}/_{1}1_{1}0_{1}1_{1}3_{1} \\ 0_{1}8_{1}1_{1} \end{array} $	17.2.0.2.4./.1.0.2.1. OFFICER'S NAME*	0, 0, 8, 1, 7, 2, 0, 2, 4, /	1,0,2,3	0.8.1.7.2.0.2.4 CER'S NAME*	I⊽	POLICE AGENCY				
0 8 1 7 2 0 2 4 / 1 0 1 3 0 8 1 TOTAL TIME OTHER TOTAL	OFFICER'S NAME* Kunka, Leon OFFICER'S	0, 0, 8, 1, 7, 2, 0, 2, 4, / ard B BADGE NUMBER*	1 0 2 3 0 CHECKED BY OFFI Ennemos	0,8,1,7,2,0,2,4 cer's name* er, James	4,/,1,0,4,4,	POLICE AGENCY MOTORIST SUPPLEMENT				

LOCAL REPORT NUMBER

\sim	O IVII					$2 \cdot 0 \cdot 2 \cdot 4 \cdot - 0$	$10_{\scriptscriptstyle \perp}0_{\scriptscriptstyle \perp}0_{\scriptscriptstyle \perp}1_{\scriptscriptstyle \perp}2_{\scriptscriptstyle \perp}0_{\scriptscriptstyle \perp}5_{\scriptscriptstyle \perp}0_{\scriptscriptstyle \perp}$
UNIT #	OWNER NAME: LAST, FIRE	REBECCA, N	ИАЕ	OWNER PHONE: INC. REDACTED PE	UDE AIEA CODE (TRI SAMEAS DRIVER) R ORC 149.43(A)(1)		DAMAGE MAGE SCALE
OWNER AT	DDRESS: STREET, CITY, STATE	, ZIP (X SAME AS DRIVER)		1 - NONE	3 - FUNCTIONAL DAMAGE		
	SKOADVIEW CIAL CARRIER: NAME, ADDR	RD, Tallmad	ge ,OH 442/8	COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	Z-WINOR DAN	MAGE 4 - DISABLING DAMAGE - UNKNOWN
							MAGED AREA(S) TE ALL THAT APPLY
	KBV8124		IDENTIFICATION # $(\mathbf{K2} \mathbf{HU3} 1 0)$	8 ₂ 1 VEHICLE YEAR		12	12
INSURAI VERIFI			SURANCE POLICY #	SIL	VEHICLE MODEL CAMRY	11 12	11 12
CES VERIFI	TYPE OF USE		RGM6T US DOT #	TOWED BY: COMPANY	200000000000000000000000000000000000000	10 1 2	10 11 1
COMME	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE	HICLE WEIGHT GVWR/GCWR	HAZARDO	US MATERIAL	9 3 3	9 9 3
INTERI	LOCK HIT/SKIP UNI	T #OCCUPANTS	1 - ≤10KLBS. 2 - 10,001 - 26KLBS	RELEASED	CLASS # PLACARD ID #	8 7 5 4	7 5 5
EQUIP	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	3 - >26K LBS.	18-LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	7 6 11	12 7 6 5
0.1	2 - PASSENGER VAN (MINIVAN)	8 - MOTORCYCLE 3-WHEELED	13-SNOWMOBILE	19-BUS (16+ PASSENGERS)	24-WHEELCHAIR (ANYTYPE)	10	11 1 2
UNITTYPE	3 - SPORT UTILITY VEHICLE 4 - PICK UP	9 - AUTOCYCLE 10 - MOPED OR MOTORIZED		20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT	25 - OTHER NON-MOTORIST 26 - BICYCLE	9	9 3 3
	5 - CARGO VAN	BICYCLE 11 - ALL TERRAIN VEHICLE	183 - MARKET 1931 (1970)	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 -TRAIN	+	8 11 4
. 00	6 - VAN (9-15 SEATS) # of trailing units	(ATV/UTV)	17 - MOTORHOME	ATTIMAC-BRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	12 7	6 5 12
	WAS VEHICLE OPERATING IN AU	TONOMOUS	D - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	11 12	6 11 12 1
2	MODE WHEN CRASH OCCURRED	N CRASH OCCURRED? 1 - DRIVER ASSISTANCE		4 - HIGH AUTOMATION		10 11 1 2	10 11 1
	1-YES 2-NO 9-CTHER/UNK	NOWN AUTONOMOUS MODE LEVEL	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		9 9 3	9 9 3
0.1	1 - NONE 2 - TAXI	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY		16-FARM 17-MOWING	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	8 7 5 4	8 7 5
SPECIAL	3 - ELECTRONIC RIDE SHARING	8 - BUS - SHUTTLE		18-SNOW REMOVAL		7 6 5	7 6 5
FUNCTION	4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	9 - BUS - OTHER 10 - AMBULANCE	14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT	19-TOWING 20-SAFETY SERVICE PATROL		6	6
0.1	1 - NO CARGO BODYTYPE			8 - POLE	12 - CONCRETE MIXER	12	12 12 12
O 1 / NOTAPPLICABLE MOTORVEHICLE CARGO 2-BUS 4-LOGGING			9 - CARGOTANK 10 - FLAT BED	13 - AUTOTRANSPORTER 14 - GARBAGE/REFUSE	Mo		
BODY TYPE	597 S28415	COMPOSITE STATES	7 004111/01/100/0041/51	11-DUNP	99 - OTHER / UNKNOWN	, 60	3 9 7 3 9 8 3
	1 - TURN SIGNALS	4 - BRAKES		9 - MOTOR TROUBLE	99-OTHER/UNKNOWN	6	
	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOUT	B - TRAILER EQUIPMENT DEFECTIVE	10-DISABLED FROM PRIOR ACCIDENT			6 6 6
 		3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12 -FIRST RESPONDER	- NO DAMAGE E	_
NON-MOTORIST	CROSSWALK 2 - INTERSECTION - UNMARKED	4 - MIDBLOCK - MARKED CROSSWALK	7 - SHOULDER / ROADSIDE B - SIDEWALK	10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR	AT INCIDENT SCENE 99 - OTHER / UNKNOWN	□-TOP [13]	- ALL AREAS [15]
AT IMPACT	CROSSWALK	5 - TRAVEL LANE - OTHER LOCATION		TRAILS		- UNIT	NOTAT SCENE [16]
	1 - NON-CONTACT 2 - NON-COLLISION	1 - STRAIGHT AHEAD 2 - BACKING		13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING	18-APPROACHING OR LEAVING VEHICLE		POINT OF CONTACT
4	3-STRIKING	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	SPECIFIED LOCATION 15 - WALKING, RUNNING,	19-STANDING 20-OTHER NON-MOTORIST	0 - NO DAMAG 0 - 6 1-12 - REFERT	E 14 - UNDERCARRIAGE TO UNIT 15 - VEHICLE NOT AT SCENE
ACTION	5 - BOTH STRIKING ACTIONS	4 - OVERTAKING/PASSING 5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED	JOGGING, PLAYING	21 -STANDING OUTSIDE	DIAGRA 13-TOP	M 99 - UNKNOWN
	& STRUCK 9-OTHER / UNKNOWN	6 - MAKING LEFT TURN	INTRACTIC	16 - WORKING 17 - PUSHING VEHICLE	DISABLED VEHICLE 99 - OTHER / UNKNOWN		TRAFFIC
	1-NONE	7 - LEFT OF CENTER	DADI/ED DOCITION	17 - VISION OBSTRUCTION	21 -LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL
0.1	2 - FAILURE TOYIELD 3 - RAN RED LIGHT	8 - FOLLOWING TOO CLOSE / ACDA 9 - IMPROPER LANE CHANGE	14-STOPPED OR PARKED	18-OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO	1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN
	4 - RAN STOP SIGN	10 - IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID	19-LOAD SHIFTING/FALLING/ SPILLING	ROADWAY 99 - OTHER IMPROPER ACTION	2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
CIRCUMSTANCES	5-UNSAFE SPEED 6-IMPROPERTURN	11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY	20 - IMPROPER CROSSING	yy-orner mirror en acrion	# OF THROUGH LANES	RAIL GRADE CROSSING
SEQUENCE	OF EVENTS		NON COLLISION			ON ROAD	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING
₁ 2 0	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	*****************	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING
	2 - FIRE/EXPLOSION 3 - IMMERSION	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	TRAVEL	17 - ANIMAL — FARM 18 - ANIMAL — DEER	23 - STRUCK BY FALLING,	UNIT / NON	-MOTORIST DIRECTION
2	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	13 - OTHER NON-COLLISION	19-ANIMAL — OTHER 20-MOTOR VEHICLE IN	SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST
3	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10-CROSS MEDIAN	14 - PEDESTRIAN	TRANSPORT 21 - PARKED MOTOR VEHICLE	24 - OTHER MOVABLE OBJECT	FROM 2 TO L	1 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST
	25 - IMPACT ATTENUATOR	COLLISION 31-GUARDRAIL END	N WITH FIXED OBJECT		50 - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN
4	/ CRASH CUSHION	32 - PORTABLE BARRIER	38 - OVERHEAD SIGN POST	44 - DITCH	EQUIPMENT	UNIT SPEED	DETECTED SPEED
5	26 - BRIDGE OVERHEAD STRUCTURE	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	39 - LIGHT / LUMINARIES SUPPORT	45 - EMBANKMENT 46 - FENCE	51 - WALL 52 - BUILDING	0,0,0,	1 - STATED / ESTIMATED SPEED
	27 - BRIDGE PIER ORABUTMENT 28 - BRIDGE PARAPET	BARRIER 35 - MEDIAN CONCRETE	40 - UTILITY POLE 41 - OTHER POST, POLE	47 - MAILBOX 48 - TREE	53 - TUNNEL 54 - OTHER FIXED OBJECT		2 - CALCULATED / EDR 3 - UNDETERMINED
6	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	BARRIER 36 - MEDIAN OTHER BARRIER	OR SUPPORT 42 - CULVERT	49-FIRE HYDRANT	99 - OTHER / UNKNOWN	POSTED SPEED	3 - UNDELEKIMINED
1 1	FIRST HARMFUL EVEN		ARMFIII FVENT			_ 2 _ 5 _	

LOCAL REPORT NUMBER 2 | 0 | 2 | 4 | - | 0 | 0 | 0 | 1 | 2 | 0 | 5 | 0 OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER)
REDACTED PER ORC 149.43(A)(1) DAMAGE CAIN, SCOTT, BRADLEY DAMAGE SCALE 3 - FUNCTIONAL DAMAGE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X) SAME AS DRIVER) 1 - NONE 2 OH 44260, Suffield, OH 44260, □ 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE DAMAGED AREA(S) INDICATE ALL THAT APPLY **VEHICLE IDENTIFICATION #** VEHICLE MAKE LP STATE LICENSE PLATE # VEHICLE YEAR 3 GKA L ME V 6 K L 2 1 8 9 2 9 2 0 1 9 O H JWQ5509 **GMC** INSURANCE VERIFIED INSURANCE COMPANY INSURANCE POLICY # COLOR VEHICLE MODEL SAFE CO BLUTERRAIN X6100064 TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR INTERLOCK DEVICE #OCCUPANTS MATERIAL CLASS # PLACARD ID # 1 - ≤10KLBS RELEASED HIT/SKIP UNIT 2 - 10.001 - 26K LBS EQUIPPED $0_{\perp}1$ PLACARD J 3 - >26K LBS 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 0 3 - SPORT UTILITY VEHICLE 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 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 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN WAS VEHICLE OPERATING IN AUTONOMOUS 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 1 - NONE 6 - BUS - CHARTER/TOUR 11-FIRE 16-FARM 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 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 1 - NO CARGO BODY TYPE 8 - POLE 12 - CONCRETE MIXER 0.1 / NOT APPLICABLE MOTORVEHICLE CHASSIS 9 - CARGO TANK 13-AUTOTRANSPORTER CARGO 2 - RUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE BODY * 7 - GRAIN/CHIPS/GRAVEL 11-DUMP 99 - OTHER / UNKNOWN 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 0 - NO DAMAGE 14 - UNDERCARRIAGE 3 19-STANDING SPECIFIED LOCATION 3-STRIKING 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 TRAFFICWAY FLOW TRAFFIC CONTROL 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 0 8 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE 23 - OPENING DOOR INTO 5 - YIELD SIGN 2 - TWO-WAY 2 - SIGNAL 2 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 4 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 19-ANIMAL - OTHER 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT ANYTHING SET IN MOTION 13 - OTHER NON-COLLISION 20 - MOTOR VEHICLE IN 5 - CARGO / EQUIPMENT BY A MOTOR VEHICLE 10 - CROSS MEDIAN

14-PEDESTRIAN

15 - PEDAL CYCLE

COLLISION WITH FIXED OBJECT - STRUCK

37 - TRAFFIC SIGN POST

38 - OVERHEAD SIGN POST

39-LIGHT/LUMINARIES

SUPPORT

40 - UTILITY POLE

OR SUPPORT

42 - CULVERT

41 - OTHER POST, POLE

TRANSPORT

45 - EMBANKMENT

49-FIRE HYDRANT

43-CURB

44 - DITCH

46-FENCE

48-TREE

47 - MAILBOX

21 - PARKED MOTOR VEHICLE

24 - OTHER MOVABLE OBJECT

50 - WORK ZONE MAINTENANCE

EQUIPMENT

54 - OTHER FIXED OR JECT

99-OTHER/UNKNOWN

51-WALL

52 - BUILDING

53-TUNNEL

ONTI / HON-INOTO	KIST DIKE	11014
	1 - NORTH	5 - NORTHEAST
	2 - SOUTH	6 - NORTHWEST
FROM 2 TO 1	3 - EAST	7 - SOUTHEAST
	4 - WEST	8 - SOUTHWEST
		9 - OTHER / UNKNOWN
UNIT SPEED	DETE	CTED SPEED
0 0 2	1 1-5	TATED / ESTIMATED SPEED
0 0 3	1 2-0	ALCULATED / EDR
	2 11	NDETERMINED
POSTED SPEED	5-0	MDELEKIMINED
2 5		
		D105 0 05 0

LOSS OR SHIFT

25 - IMPACT ATTENUATOR

/ CRASH CUSHION

27 - BRIDGE PIER OR ABUTMENT

26 - BRIDGE OVERHEAD

STRUCTURE

28-BRIDGE PARAPET

30 - GUARDRAIL FACE

29-BRIDGE RAIL

31 - GUARDRAIL END

32 - PORTABLE BARRIER

34 - MEDIAN GUARDRAIL

35 - MEDIAN CONCRETE

BARRIER

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

33 - MEDIAN CABLE BARRIER

36 - MEDIAN OTHER BARRIER

OHIO D	OHIO DEPARTMENT MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER						
SAFETY - M	EPVICE - PROTECTION	010K131 / 140) -	1010	K12	ı			2 0	2 4 - 0	$0_{\perp}0_{\perp}$	1,2	0 5	0	
UNIT#	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER							
0,1	ROLLYSON, REBECCA, MAE								1 1 1 0 3 1 1 9 9 0 3 3 F						
	ADDRESS: STREET, CITY, STATE, ZIP 1076 BROADVIEW RD, Tallmadge, OH 44278								CONTACT PHONE - INCLUDE AREA CODE REDACTED PER ORC 149.43(A)(1)						
INJURIES	INJURED	EMS AGENCY (NAME)		INJUREDI	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	T SEATING POSITION AIR BAG USAGE EJECTION TRAPPED						
S 5	TAKEN BY	TAKEN BY USED 0 4							□ MC HE	LMET 0 1		1	_1_	_1_	
OL STATE		LICENSE NUMBER		OFFENS	SE CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CITA	ATION N	JMBER		
O H	REDAC	CTED PER ORC 450)1:1-12												
OL CLASS	S ENDORSEMEN SELECT UP TO 2			VER TRACTED	_	OHOL / DRUG SUSPE		CONDITION	STATUS T	YPE VALUE	STATUS		RESULT	SELECTUPTO4	
. 4	1011		BY	1	=	LCOHOL MAF	RIJUANA	1	1	1	. 1	1	10 B	to to vi	
UNIT #	NAME: LAST	FIRST, MIDDLE			<u> </u>	THER DRUG				DATE OF BIRTH			AGE	GENDER	
0.2		RTSON, BRITTA	NY. E	LIZA	BET	тн			. 0 . 1	111111		8.13		. F	
	S: STREET, CITY, S		,							PHONE - INCLUDE ARE		0 0	7 0	1	
1662	SAXE R	D ,Suffield ,OH 4	4260						1	ACTED PE		RC 1	49.43	(A)(1)	
0	INJURED	EMS AGENCY (NAME)		INJUREDI	AKEN TO	MEDICAL FACILITY	(NAME, CITY)		DOT-C	SEATING POSI	TION AIR BA	AG USAGE	EJECTION	TRAPPED	
Ž 5	TAKEN BY							USED 0 4	MC HE						
OL STATE		LICENSE NUMBER		OFFENS	SE CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CITA	ATION NU	JMBER		
O H		TED PER ORC 450)1:1-12	333.0	03		CODE	Maximum Sp	eed Limit	s	270	649			
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UNIT#	NAME: LAST	FIRST, MIDDLE		_	Ц,	THER DRUG				DATE OF BIRTH			AGE	GENDER	
1900,000,00															
ADDRESS	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
TOR									1 1	1 1 1	1		- 1	1 1	
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDI	AKEN TO	MEDICAL FACILITY	(NAME, CITY)		DOT-C	SEATING POSI	TION AIR BA	AG USAGE	EJECTION	TRAPPED	
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OL STATE	OPERATOR	LICENSE NUMBER		OFFENS	SE CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION	•	CITA	IN NOITA	JMBER		
<u></u>	_														
≥ OL CLASS	SELECT UP TO 2			VER TRACTED		DHOL / DRUG SUSPE		CONDITION	STATUS T	YPE VALUE	STATUS		RESULT	SELECTOP TO 4	
	1 11		"		=	THER DRUG	(IOOAIIA		l		1			11 11 1	
INJ	URIES	SEATING POSITION	A	IR BAG		OL CLASS	5	OL RESTRIC	TION(S)	DRIVER DISTRA	CTION	ī	EST STA		
1 - FATAL	D SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP 2 - DEPLOYE			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER 2 - CDL INTRASTAT		1 - NOT DISTRACTED 2 - MANUALLY OPERA	TIMC AN	1 - NONE	E GIVEN REFUSED		
THE REAL PROPERTY.	D MINOR INJURY	2 - FRONT - MIDDLE	3- DEPLOYE			3 - CLASS C		3-CORRECTIVE LE		ELECTRONIC COMM DEVICE (TEXTING,	MUNICATION	3 - TEST	GIVEN, CON	TAMINATED	
4 - POSSIBLE		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE		ED BOTH FRO	NT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER		DIALING)			PLE / UNU SA	ULTS KNOWN	
5 - NO APPARE	ENTINJURY	(M0TORCYCLE PASSENGER)	5-NOTAPP 9-DEPLOYI	LICABLE MENT UNKNO	WN	5 - M/C MOPED ONLY		6 - EXCEPT CLASS		3 - TALKING ON HAND COMMUNICATION D		5 - TEST	GIVEN, RES		
INJURED 1 - NOT TRANS	D TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTO	D. TDAILED	4 - TALKING ON HAND- COMMUNICATION D			NOWN .		
/TREATED	A Charles and the control of the con	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		ECTION	75	OL ENDORSE	MENT	8 - INTERMEDIATE		5 - OTHER ACTIVITY W	ITH AN	1 - NONE		ST TYPE	
2 - EMS 3 - POLICE		8 - THIRD - MIDDLE	1 - NOTEJE	CTED Ly ejected		H - HAZMAT M - MOTORCYCLE		9-LEARNER'S PER	MIT	6 - PASSENGER	,t	2 - BL00			
9 - OTHER / UN	NKNOWN	9 - THIRD - RIGHT SIDE	3-TOTALLY			P - PASSENGER		RESTRICTIONS	LICHT ONLY	7 - OTHER DISTRACTION		3 - URIN 4 - BRE			
SAFETY	EQUIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4-NOTAPP	LICABLE		N - TANKER Q - MOTOR SCOOTER		10 - LIMITED TO DAY 11 - LIMITED TO EMI		8 - OTHER DISTRACTION		5 - OTHE			
1 - NONE USE		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA		RAPPED		R-THREE-WHEEL MO	TORCYCLE	12 - LIMITED - OTHE		THE VEHICLE 9 - OTHER / UNKNOWN		DR	UG TEST	TYPE	
3 - LAP BELT (R BELT ONLY USED Only USED	(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOTTRA 2 - EXTRICA			S - SCHOOL BUS T - DOUBLE & TRIPLE	TDAILEBS	13 - MECHANICAL DI (SPECIAL BRAK)	ES, HAND	CONDITIO	N	1 - NONE			
	R & LAP BELT USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	MECHAN 3- FREED B	IICAL MEANS		X - TANKER / HAZMAT		CONTROLS, OR O ADAPTIVE DEVI		1 - APPARENTLY NORM		2 - BL00 3 - URIN			
5 - CHILD RES FORWARD	TRAINT SYSTEM – FACING	13-TRAILING UNIT		CHANICAL MI	EANS	GENDER		14 - MILITARY VEHICLE		2 - PHYSICAL IMPAIRM		4 - OTHE	R		
6 - CHILD RES REAR FACI	TRAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F-FEMALE		AIR BRAKES		3 - EMOTIONAL (E.G., D ANGRY, DISTURBED)	EPRESSED,	DOMESTIC OF STREET		SULT(S)	
7 - B00STER S	SEAT	15 - NON-MOTORIST				M - MALE U - OTHER / UNKNOWN		16 - OUTSIDE MIRRO 17 - PROSTHETIC AII		4 - ILLNESS 5 - FELL ASLEEP, FAIN	TED.		HETAMINES BITURATES		
8 - HELMET U	JSED VE PADS USED	99 - OTHER / UNKNOWN				O O THER ! ORKITORIN		18 - OTHER		FATIGUED, ETC.			ZODIAZEPIN	ES	
(ELBOW, K	NEES, ETC.)									6 - UNDERTHE INFLUE OF MEDICATIONS			NABINOIDS		
10 - REFLECTIV										/ALCOHOL 9-OTHER/UNKNOWN		5 - COCA 6 - OPIA	TES / OPIOID	20	
/ BICYCLE 99 - OTHER / UN												7 - OTHE		110	
0111211701												U-NEG	ATIVE RESUL	LIJ	

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	OHIO DEF	OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER 2						
_		-				200				0_11_12				
10000	1T #)1_	NAME: LAST, FIRST, MIDDLE ROLLYSON, JACE, V							DATE OF BIRTH AGE GENDER O 8 M					
ADD		RESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE					
=-			DVIEW RD ,Ta	allmadge ,				ــــــــــــــــــــــــــــــــــــــ						
INJU	IRIES	INJURED TAKEN BY 1	Kent Fire		INJURED TAKEN TO: Medical Faci	ILITY (NAME, CITY)	SAFETY EQUIPMENT USED 0 4	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED		
UN	IT#	NAME: LAS	: LAST, FIRST, MIDDLE						E OF BIRTH		AGE	GENDER		
	_													
ADD	RESS:	(SS: STREET, CITY, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE							
INJU	IRIES	INJURED TAKEN	EMS AGENCY (NAME)	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMEN USED			DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED			
<u>L</u>		ВУ						MC HELMET	سب		ــــال			
UN	IIT # NAME: LAST, FIRST, MIDDLE						DAT	E OF BIRTH		AGE	GENDER			
∟ ∠ ADD	RESS:	STREET, CITY	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE L				
ADD			(- · · · · · · · · · · · · · · · · · ·						mocouc micros					
INJU	IRIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED		
Ĺ		BY						MC HELMET	لسلسا		ـــا ب			
UN	IT#	NAME: LAS	ST, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
400	DEGG									E E S				
ADD	RESS:	STREET, CITY	, STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
INJU	IRIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACE	ILITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED		
1	9	TAKEN BY				,	USED	DOT-COMPLIANT MC HELMET	1 1 1		101	15 91		
		INJ	URIES	SAFET	Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG L	SAGE			
1000	FATA			1 - NONE US	ED - COCCUPANT		T – LEFT SIDE ORCYCLE DRIV	FR)	1 - NOT DE	PLOYED				
100			ERIOUS INJURY		ER BELT ONLY USED		T – MIDDLE	2 - DEPLOYED FRONT						
140		SIBLE INJU	INOR INJURY	3 - LAP BEL	T ONLY USED		T – RIGHT SIDE ND – LEFT SIDE							
		PPARENT		4 - SHOULDI	ER & LAP BELT USED		ORCYCLE PASS		FRONT/SIDE					
		INJURED	TAKEN BY		ESTRAINT SYSTEM – D FACING		5 - SECOND - MIDDLE 5 - NOT APPLICABLE 5 - SECOND - RIGHT SIDE 9 DEPLOYMENT UNKNOWN							
1 -	NOT	TRANSPOR			ESTRAINT SYSTEM –	7 - THIR	D - LEFT SIDE	9 - DEFECTIVENT ONKNOWN						
1987		EATED AT S	CENE	REAR FA			ORCYCLE SIDE D – MIDDLE							
	EMS POLI			8 - HELMET			D – RIGHT SIDE	2 - PARTIALLY FIFCTED						
		ER / UNKN	OWN		TIVE PADS USED		PER SECTION (ENGER IN OTH	OF TRUCK CAB						
		GE	NDER		KNEES, ETC.)	CARG	O AREA (NON-TE	RAILING UNIT, 4 - NOT APPLICABLE						
F - F	FEMA	LE			IVE CLOTHING G _ PEDESTRIAN	12 - PASS	ENGER IN UNE			TRAPP	ED			
400 X	M - MALE / LIGHTING - PEDESTRIAN / BICYCLE ONLY 13 - TRAILING UNIT						1 - NOT TRAPPED							
0 -	U - OTHER / UNKNOWN 13 - TRAILING UNIT 14 - RIDING ON VEHICL				IG ON VEHICLE	EXTERIOR 2 - EXTRICATED BY MECHA			IECHANI	CAL				
							TRAILING UNIT) MOTORIST		3 - FREED	BY NON-M	ECHANIC	AL		
Ü.						99 - OTHE	R / UNKNOWN		MEANS					
22/01/01/20	ME: LAS	ST, FIRST, MIDI	DLE					DAT	E OF BIRTH		AGE	GENDER		
ADD	RESS:	STREET, CITY	STATE 7IP					CONTACT PHONE	- INCLUDE AREA CO	DE L				
\$,	, , , , , , , , , , , , , , , , , , , ,						1 1	 I I	1 1	1 1		
200	ME: LAST, FIRST, MIDDLE					DATE OF BIRTH AGE GEND				GENDER				
ADD														
ADD	RESS:	STREET, CITY	, STATE, ZIP					CONTACT PHONE		DE	4			
NAM	ME: LAS	ST, FIRST, MIDI	DLE					NAME OF TAXABLE PARTY.	E OF BIRTH		AGE	GENDER		
			5000											
ADD	RESS:	STREET, CITY	, STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE				
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OHIO DEPARTMENT OF PUBLIC SAFETY Narrative Continuation

LOCAL REPORT NUMBER 2,0,2,4,-,0,0,0,1,2,0,5,0,

UNIT 1 WAS STOPPED IN TRAFFIC HEADED NORTH ON SOUTH WATER STREET. UNIT 2 REAR ENDED UNIT 1.