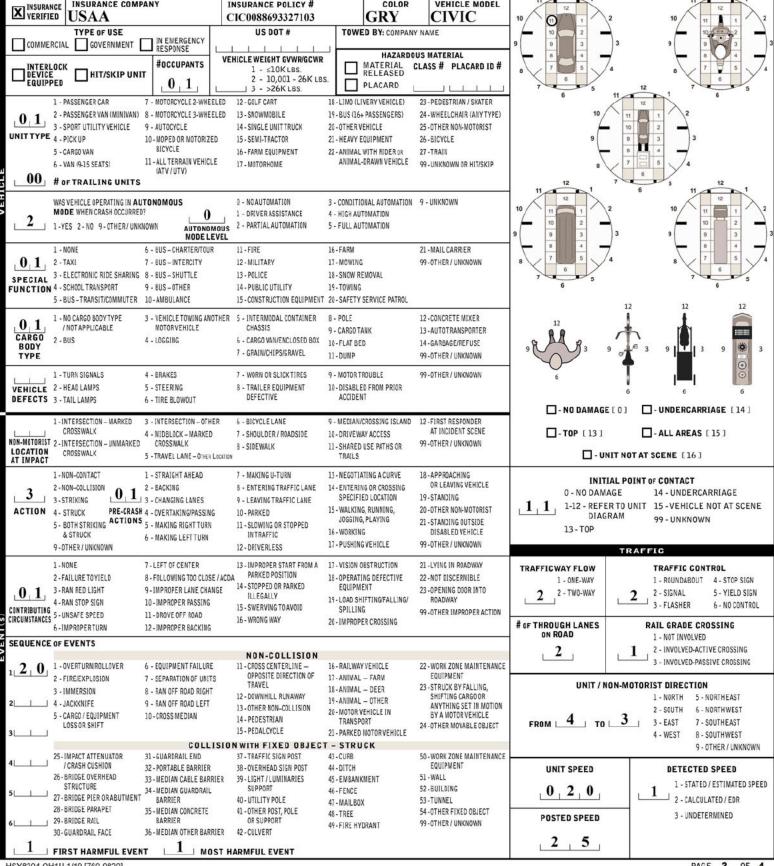
OF PUBLIC SAFETY TRAFFIC CRASH	REPORT *DENOTE	S MANDATORY FIELD FOR SUPPLE	MENT REPORT	'	LOCAL REPORT NUMBER	*			
PHOTOS TAKEN OH-2 OH-3		$2 \cdot 0 \cdot 2 \cdot 4$	- ₁ 0 ₁ 0 ₁ 0 ₁ 1 ₁ 3	$3_{\perp}9_{\perp}1_{\perp}0_{\perp}$					
OH-1P OTHER	NCIC*	HIT/SKIP NUMBER OF UNITS UNIT IN ERROR							
SECONDARY CRASH PRIVATE PROPERTY	16,7,0,3	1-SOLVED 0,2 98-ANIMAL 0,2 99-UNKNOWN							
1-CITY	Y, VILLAGE, TOWNSHIP*			CRASH DATE / TIME* CRASH SEVERITY					
6,7 1 2-VILLAGE Kent	09162024/1600								
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH 2 E - EAST 2 E - EAST 2 E - EAST	ROAD TYPE	LATITUDE DE	3	SUSPECTED - MINOR INJURY					
W - WEST	WATER		$S_{\perp}T_{\perp}$	4,1,1,5,0	1 1 1 1	SUSPECTED			
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W-WEST	REFERENCE ROAD NAME (RI	DAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE D		- INJURY POSSIBLE - PROPERTY DAMAGE			
	SUMMIT		$S_{\perp}T_{\perp}$	-81	3,1,9	ONLY			
REFERENCE POINT DIRECTION 1 - INTERSECTION FROM REFERENCE IR -	ROUTE TYPE INTERSTATE ROUTE(TP)	ROAD TYPE AL - ALLEY HW- HIGHWAY	RD - ROAD		INTERSECTION RELATED				
2 - MILE POST C. COUTU	FEDERAL US ROUTE	AV - AVENUE LA - LANE	SQ - SQUARE	WITHIN INTE	RSECTION OR ON APPROA	4			
W-WEST SR-	STATE ROUTE	BL - BOULEVARD MP - MILEPOST CR - CIRCLE OV - OVAL	ST - STREET TE - TERRACE	WITHIN INTE	RCHANGE AREA NUM	BER OF APPROACHES			
FROM REFERENCE UNIT OF MEASURE	NUMBERED COUNTY ROUTE NUMBERED TOWNSHIP	CT - COURT PK - PARKWAY	TL - TRAIL		ROADWAY				
1-MILES 2-FEET 3-YARDS	ROUTE	DR - DRIVE PI - PIKE HE - HEIGHTS PL - PLACE	WA - WAY	ROADWAY DIV	VIDED				
LOCATION OF FIRST HARMFUL EVEN	т	MANNER OF CRASH COLLISION/IMF	PACT	DIRECTION OF TRAVE	L MEDIA	NTYPE			
1 - ON ROADWAY 9 - CROSSOVER	1-	NOT COLLISION 4 - REAR-TO-REAR		N - NORTH	1 - DIVIDED F	LUSH MEDIAN			
	DADE COOCCING 6	TWO MOTOR VEHICLES IN 6-ANGLE		S - SOUTH E - EAST	2 - DIVIDED F) LUSH MEDIAN			
4 - ON ROADSIDE 12 - SHARED US 5 - ON GORE TRAILS	SE PATHS OR	TRANSPORT 7 - SIDESWIPE, SA REAR-END 8 - SIDESWIPE, OP		W-WEST	(≥4 FEET 3 - DIVIDED, I) DEPRESSED MEDIAN			
6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	3-	HEAD-ON 9-OTHER/UNKN			4 - DIVIDED, F	RAISED MEDIAN			
7-0N RAMP 14-10LL BOOT 8-0FF RAMP 99-0THER/UN					9 - OTHER/UN				
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN V	VORK ZONE	CONTOUR	CONDITIONS	SURFACE			
1-	LANE CLOSURE LANE SHIFT/CROSSOVER	1 - BEFORE THE 1S WARNING SIGN	T WORK ZONE	_ 1 _	_1_	_ 2			
I AM ENFORCEMENT PRECENT 3-	WORK ON SHOULDER	2 - ADVANCE WARN				1 - CONCRETE			
	OR MEDIAN INTERMITTENT OR MOVING W	ORK 3-TRANSITION AR	EA	2 - STRAIGHT GRADE	2 - BLACKTOP, BITUMINOUS,				
ACTIVE SCHOOL ZONE 5 -	OTHER	5 - TERMINATION A	REA	3 - CURVE LEVEL 4 - CURVE GRADE	3 - SNOW 4 - ICE	ASPHALT 3 - BRICK/BLOCK			
LIGHT CONDITION		ATHER		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT,	4 - SLAG, GRAVEL,			
1 - DAYLIGHT 2 - DAWN/DUSK	0 1 2-CLOUDY	6 - SNOW 7 - SEVERE CROSSWINDS			0IL, GRAVEL 6 - WATER (STANDING,	STONE 5 - DIRT			
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	10KE 8 - BLOWING SAND, SOIL, DIE	SAND, SOIL, DIRT, SNOW RAIN OR FREEZING DRIZZLE ROUND TO SHOULD THE SAND TH			9 - OTHER/UNKNOWN				
5 - DARK - UNKNOWN ROADWAY LIGHTING	4 - RAIN 5 - SLEET, HAIL	99 - OTHER / UNKNOWN	ZING DRIZZLE		9 - OTHER/UNKNOWN				
9 - OTHER / UNKNOWN									
NARRATIVE					A	Indicate the north direction with			
UNIT ONE WAS TRAVELING	WESTBOUND O	N				an "N" on the compass diagram.			
SUMMIT ST. ENTERING TH	E INTERSECTIO	ON			<u> </u>				
OF S. WATER ST. UNIT TWO) WAS								
NOT TO SCALE									
TRAVELING SOUTHBOUND ON S. WATER ST. APPROACHING THE INTERSECTION OF SUMMIT									
	00	UNIT 1 SUMMI	тэт.						
ST. UNIT TWO FAILED TO				III 2					
LIGHT AND ENTERED THE INTERSECTION.									
UNIT TWO ATTEMPTED TO STOP BUT WAS STRUCK BY UNIT ONE INCIDE THE									
STRUCK BY UNIT ONE INSIDE THE									
INTERSECTION.									
CDACH DEDOCTED DATE (TVI	DISPATCH DATE / TIME	ARRIVAL DATE / TIM	IF	SCENE CLEARED	DATE / TIME ~	EDODT TAVEL DV			
					I⊽I	POLICE AGENCY			
0,9,1,6,2,0,2,4,/,1,6,0,2, 0,9,1,6,2,0,2,4,/,1,6,0,3, 0,9,1,6,2,0,2,4,/,1,6,0,7, 0,9,1,6,2,0,2,4,/,1,6,3,7, 10 10 10 10 10 10 10 1									
ROADWAY CLOSED INVESTIGATION TIME MINUT	Bolgrin, Mai	ry Elizabeth	Short, Jason M						
OFFICER'S BADGE NUMBER* CHECKED BY OFFICER'S BADGE NUMBER* TO AN EXISTING REPORT SE 2 2 8									

OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 3888 NELSON RD ,LEAVITTSBURG ,OH 44430 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP LP STATE LICENSE PLATE # O H HWU2315 INSURANCE VERIFIED COMMERCIAL GOVERNMENT RESPONSE INTERLOCK DEVICE EQUIPPED 0 1 3 - SPORT UTILITY VEHICLE UNITTYPE 4 - PICKUP 00 # OF TRAILING UNITS 1-YES 2-NO 9-0THER/UNKNOWN 0 1 2 - TAXI SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE FUNCTION 4 - SCHOOL TRANSPORT 0.1 CARGO 2 - RUS BODY VEHICLE 2 - HEAD LAMPS DEFECTS 3 - TAIL LAMPS NON-MOTORIST 2-INTERSECTION - UNMARKED LOCATION AT IMPACT 0 1 3 - CHANGING LANES 4 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 99 - UNKNOWN 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN JOGGING, PLAYING 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 7 - LEFT OF CENTER 13 - IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 -LYING IN ROADWAY TRAFFIC CONTROL TRAFFICWAY FLOW PARKED POSITION 18-OPERATING DEFECTIVE 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 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 5 - YIELD SIGN 0 3 2 - SIGNAL ILLEGALLY 19 - LOAD SHIFTING/FALLING/ ROADWAY 4 - RAN STOP SIGN 10-IMPROPER PASSING 3 - FLASHER 6 - NO CONTROL 15 - SWERVING TO AVOID 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 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 1 - NORTH 5 - NORTHEAST 19-ANIMAL - OTHER J 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT ANYTHING SET IN MOTION 13 - OTHER NON-COLLISION 20 - MOTOR VEHICLE IN 2 - SOUTH 6 - NORTHWEST 5 - CARGO / EQUIPMENT BY A MOTOR VEHICLE 10 - CROSS MEDIAN 14-PEDESTRIAN FROM 1 TO 2 TRANSPORT 3 - EAST 7 - SOUTHEAST LOSS OR SHIFT 24 - OTHER MOVABLE OBJECT 15 - PEDAL CYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 8 - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER / UNKNOWN 25 - IMPACT ATTENUATOR 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43-CURB 50 - WORK ZONE MAINTENANCE 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 46-FENCE . 0 . 0 . 0 . 27 - BRIDGE PIER ORABUTMENT 2 - CALCULATED / EDR BARRIER 40 - UTILITY POLE 53-TUNNEL 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

LOCAL REPORT NUMBER 2 | 0 | 2 | 4 | - | 0 | 0 | 0 | 1 | 3 | 9 | 1 | 0 | OWNER NAME: LAST, FIRST, MIDDLE (IN TAME AS DRIVER)

HALLGREN, JULIA, GRACE DAMAGE OWNER PHONE: INCLUDE ALEA CODE (ST SAME AS DRIVER)
REDACTED PER ORC 149.43(A)(1) DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER) 2 315 MAIN ST ,Kent ,OH 44240 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 LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE 2 0 1 9 Honda 2 HGF C2 F 6 X K H5 5 7 2 5 0 O H JXA2838 INSURANCE VERIFIED INSURANCE COMPANY INSURANCE POLICY # COLOR VEHICLE MODEL USAA CIVIC CIC0088693327103 GRY US DOT# TYPE OF USE 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. 0,1PLACARD 」 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) 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST 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 - LINKNOWN OR HIT/SKIP (ATV/UTV) $00_{
m ullet}$ # 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 AUTONOMOUS 2 - PARTIAL AUTOMATION 1-YES 2-NO 9-0THER/UNKNOWN 5 - FULL AUTOMATION MODE LEVEL 1 - NONE 6 - BUS - CHARTER/TOUR 11-FIRE 16-FARM 21 - MAIL CARRIER 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN 0 1 2 - TAXI 13 - POLICE 18-SNOW REMOVAL 19-TOWING 9 - BUS - OTHER 14 - PUBLIC UTILITY 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 00 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN 8 - TRAILER EQUIPMENT 10-DISABLED FROM PRIOR 5 - STEERING DEFECTIVE ACCIDENT 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 99 - OTHER / UNKNOWN CROSSWALK B - SIDEWALK 11 - SHARED USE PATHS OR CROSSWALK - UNIT NOT AT SCENE [16] 5 - TRAVEL LANE - OTHER LOCATION TRAILS 1-NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING INITIAL POINT OF CONTACT OR LEAVING VEHICLE 14 - ENTERING OR CROSSING 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 0 1 3 - CHANGING LANES 0 - NO DAMAGE 14 - UNDERCARRIAGE 19-STANDING SPECIFIED LOCATION 9 - LEAVING TRAFFIC LANE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10-PARKED DIAGRAM 99 - UNKNOWN 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN JOGGING, PLAYING 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 7 - LEFT OF CENTER 13 - IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 -LYING IN ROADWAY TRAFFIC CONTROL TRAFFICWAY FLOW PARKED POSITION 18-OPERATING DEFECTIVE 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 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 2 - SIGNAL 5 - YIELD SIGN ILLEGALLY 19 - LOAD SHIFTING/FALLING/ ROADWAY 4 - RAN STOP SIGN 10-IMPROPER PASSING 3 - FLASHER 6 - NO CONTROL 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 2 2 - INVOLVED-ACTIVE CROSSING NON-COLLISION



OFF PUBLIC SAFETY MOTORIST / NON-MOTORIST						LOCAL REPORT NUMBER									
						2 0 2 4 - 0 0 0 1 3 9 1 0									
UNIT#	TT# NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH AGE GENDER								
0,1	MCMANUS, AIDAN, JAMES						0 + 3 + 1 + 8 + 2 + 0 + 0 + 4 $2 + 0 + M$								
	RESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA CODE						
0	3888 NELSON RD ,LEAVITTSBURG ,OH 44430									REDACTED PER ORC 149.43(A)(1)					
INJURIES	TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	USED	Прот-с∘ Мс не	SEATING POSITIO	ON AIR BAG	JSAGE EJECTI	ION TRAPPED		
2 5	BY							0.4		LMET 0 1	1	_1	_ _1_		
OLSTATE	OFFENSE CHAIR REDACTED PER ORC 4501:1-12 0FFENSE CHAIR 313.03C1					LOCAL	OFFENSE DESC				CITATION NUMBER				
O H	- LUDAROFILE W			X	Traffic Contr		OHOL TEST	28825							
≥ OL CLASS	SELECT UP TO 2	SELECTUPTO 2 INISTRACTED				DHOL / DRUG SUSPI		CONDITION	STATUS T		STATUS		ULT SELECTUPTO4		
4						THER DRUG		1	1	1	_1_	1	لـــالـــالـــا		
UNIT #	NAME: LAST	, FIRST, MIDDLE								DATE OF BIRTH		AGE	GENDER		
0,2	HALL	GREN, JULIA, G	RACI	Ξ					0 5 2 9 2 0 0 2 2 2 F						
ADDRESS:	STREET, CITY, S	TATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
315 E	MAIN :	ST ,Kent ,OH 442	40						REDA	ACTED PER	COR	J 149.4	13(A)(1)		
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-C∘	SEATING POSITIO	ON AIR BAG	AIR BAG USAGE EJECTION TRAPPED			
2 5	BY							0 4	Ш мс не	LMET 0 1	1	1 1 1			
OL STATE		LICENSE NUMBER CTED PER ORC 450	1.1_12	OFFENS	E CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CITATI	ON NUMBER	R		
OH	75		1.1-12												
OL CLASS	SELECT UP TO 2		DIS	VER TRACTED	_	CHOL / DRUG SUSPI	ECTED RIJUANA	CONDITION	STATUS T	YPE VALUE		TYPE RES	ULT SELECT UPTO4		
. 4		1	BY	1	=	THER DRUG	KIJUANA	. 1 .	1	1	. 1	1			
UNIT#	NAME: LAST	FIRST, MIDDLE			_					DATE OF BIRTH		AGE	GENDER		
										1 1 1 1	T E	11-1-1			
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE								
TOR										1 1 1	1 1				
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	□ DOT-C∘	SEATING POSITIO	ON AIR BAG	USAGE EJECTI	ION TRAPPED		
ON/	BY						Ш мс не	LMET			نــــا اِــــــا				
OL STATE							OFFENSE DESC	FENSE DESCRIPTION			CITATION NUMBER				
			Loss		taran nan				AL C	OHOL TEST		DRUG TEST	((6)		
OL CLASS	SELECT UP TO 2			TRACTED		LCOHOL MAI	RIJUANA	CONDITION	STATUS T				ULT SELECTOP 104		
			.		=	THER DRUG							لــالــالــا		
	RIES	SEATING POSITION		IR BAG		OL CLAS	s	OL RESTRIC	TION(S)	DRIVER DISTRAC	100	TEST S			
1 - FATAL 2 - SUSPECTED	SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP 2 - DEPLOYE				1 - ALCOHOL INTER 2 - CDL INTRASTAT	1 - NOT DISTRACTED 2 - MANUALLY OPERATION							
3 - SUSPECTED		2 - FRONT - MIDDLE	3- DEPLOYE				3 - CORRECTIVE LENSES		ELECTRONIC COMMUNICATION DEVICE (TEXTING, TYPING,		3 - TEST GIVEN, CONTAMINATED				
4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE		D BOTH FRONT / SIDE 4 - REGULAR CLASS 4 - FARM WAIVER (OHIO = D) 5 EXPEDICIANS			DIALING)			SAMPLE / UNU SABLE 4 - TEST GIVEN, RESULTS KNOWN					
5 - NU APPAKEN	5 - NO APPARENT INJURY (MOTORCYCLE PASSENGER) 5 - NOTAPPLICABLE 9 - DEPLOYMENT UNKNOWN			WN	5 - EXCEPT CLASS: 5 - M/C MOPED ONLY 6 - EXCEPT CLASS:				3 - TALKING ON HANDS-F COMMUNICATION DEV	REE					
1 - NOT TRANSP	TAKEN BY	6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTO	D. TDAILED	4 - TALKING ON HAND-HE COMMUNICATION DEV	/ICE	Total Control of Control			
/TREATED A	AND DESCRIPTION OF THE PARTY OF	7 - THIRD - LEFT SIDE (M0TORCYCLE SIDE CAR)		ECTION		OL ENDORSE	MENT	8 - INTERMEDIATE		5 - OTHER ACTIVITY WIT	HAN	1 - NONE	TEST TYPE		
2 - EMS 3 - POLICE		8 - THIRD - MIDDLE	1 - NOTEJE 2 - PARTIAL	CTED LY EJECTED		H - HAZMAT M - MOTORCYCLE		9-LEARNER'S PER	MIT	6 - PASSENGER		2 - BL00D			
9 - OTHER / UNK	CNOWN	9 - THIRD - RIGHT SIDE	3-TOTALLY			P - PASSENGER		RESTRICTIONS	LICHTONIN	7 - OTHER DISTRACTION INSIDE THE VEHICLE		3 - URINE 4 - BREATH			
SAFETY E	QUIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4-NOTAPP	LICABLE		N - TANKER Q - MOTOR SCOOTER		10 - LIMITED TO DAY		8 - OTHER DISTRACTION		5 - OTHER			
1 - NONE USED		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA		RAPPED		R. THREE-WHEEL MO	TORCYCLE	12 - LIMITED - OTHE		7 THE VEHICLE 9 - OTHER / UNKNOWN		DRUG TE	STTYPE		
2 - SHOULDER E 3 - LAP BELT ON		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOTTRA 2 - EXTRICA			S - SCHOOL BUS	TRAIL FRO	13 - MECHANICAL DI (SPECIAL BRAK	ES, HAND			1 - NONE			
4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED MECHAN		IICAL MEANS Y. TANKER / HAZMAT ADAPT			CONTROLS, OR O ADAPTIVE DEVI		1 - APPARENTLY NORMA	100	2 - BLOOD 3 - URINE						
5 - CHILD RESTRAINT SYSTEM -					14 - MILITARY VEHICLE	E THIOTOTE INITIALIEIT			4 - OTHER						
6 - CHILD RESTI REAR FACIN	RAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F-FEMALE		AIR BRAKES		3 - EMOTIONAL (E.G., DEPR ANGRY, DISTURBED)		DRUG TEST	RESULT(S)		
7 - BOOSTER SEAT 15 - NON-MOTORIST		III IIII			16 - OUTSIDE MIRRO 17 - PROSTHETIC ALI	- Heritago			1 - AMPHETAMINES						
8 - HELMET US		99 - OTHER / UNKNOWN				U -OTHER / UNKNOWN		18-OTHER		FATIGUED, ETC.		2 - BARBITURATI 3 - BENZODIAZE			
9 - PROTECTIVE (ELBOW, KNE										6 - UNDER THE INFLUENCE OF MEDICATIONS / DR	UGS	4 - CANNABINOI	DS		
10 - REFLECTIVE 11 - LIGHTING - I										/ALCOHOL 9-OTHER/UNKNOWN		5 - COCAINE 6 - OPIATES / OP	IOIDS		
/ BICYCLE OF	NLY											7 - OTHER			
99 - OTHER / UNK	CNOWN											8 - NEGATIVE RE	ESULTS		

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