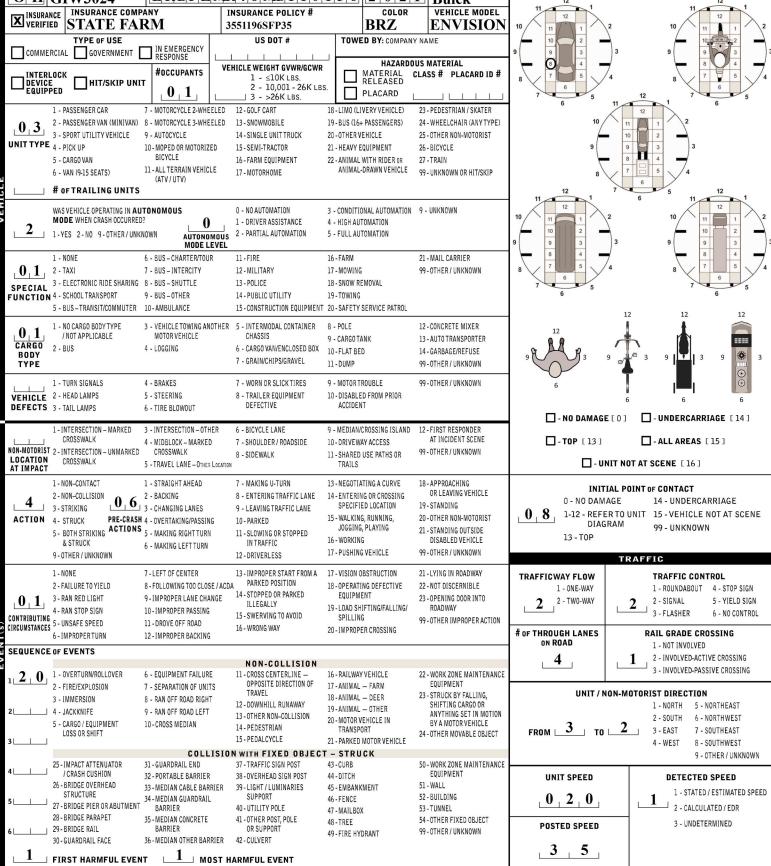
OHIO DEPARTMENT OF PUBLIC SAFETY TRAFFIC CRASH RISALTY - SERVICE - PROTECTION	EPORT *DENOTES MANDATORY FIE	ELD FOR SUPPLEMENT REPORT		OCAL REPORT NUMBER	*		
PHOTOS TAKEN 0H-2 OH-3 LC	OCAL INFORMATION		1	- , 0 , 0 , 0 , 0 , 5	5, 1, 1, 3,		
OH-1P OTHER RE	eporting agency name* City of Kent Police	NCIC*	HIT/SKIP 1 - SOLVED	NUMBER OF UNITS	UNIT IN ERROR 98 - ANIMAL		
		0,6,7,0,3	2 - UNSOLVED		99 - UNKNOWN		
COUNTY* LOCALITY* 1-CITY 6 7 2-VILLAGE 3-TOWNSHIP Kent	TELAGE, TOWNSHIP		0.4.0.9.2.0.2.4	/.1.1.50 . 5 . 1	- FATAL		
POUTE TYPE DOUTE NUMBER DESERVEN MORTH LO	DCATION ROAD NAME	ROAD TYPE			- SERIOUS INJURY SUSPECTED		
	VATER	$oxedsymbol{L} \mathbf{S} \perp \mathbf{T}$	41,134	1_9_8_	- MINOR INJURY SUSPECTED		
	EFERENCE ROAD NAME (ROAD, MILEPOST, HO	OUSE #) ROAD TYPE	LONGITUDE DI		- INJURY POSSIBLE		
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST			-81,353	9,5,4	- PROPERTY DAMAGE ONLY		
REFERENCE POINT 1-INTERSECTION 1-INTERSECTION N-NORTH IR-INTERSECTION	ROUTE TYPE ITERSTATE ROUTE(TP) AL - ALLEY	ROAD TYPE HW- HIGHWAY RD - ROAD	E	INTERSECTION RELATED			
2 MILE DOST O COULTIL	EDERAL US ROUTE AV - AVENUE	LA - LANE SQ - SQUARE		RSECTION OR ON APPROA	_4		
W-WEST SR-ST	TATE ROUTE BL - BOULEVARD CR - CIRCLE JMBERED COUNTY ROUTE	MP-MILEPOST ST - STREET OV - OVAL TE - TERRACE	WITHIN INTE	1,000,000,000,000,000,000,000,000,000,0	BER OF APPROACHES		
FROM REFERENCE UNIT OF MEASURE 1 - MILES TR - NU	JMBERED TOWNSHIP DR - DRIVE	PK - PARKWAY TL - TRAIL PI - PIKE WA - WAY		ROADWAY			
5 0 2 2-FEET RO	DUTE I	PL - PLACE	ROADWAY DIV	/IDED			
LOCATION OF FIRST HARMFUL EVENT 1 - ON ROADWAY 9 - CROSSOVER	MANNER OF CRASH 1 - NOT COLLISION 4	H COLLISION/IMPACT	DIRECTION OF TRAVE				
0 1 2-ON SHOULDER 10-DRIVEWAY/AL	LEY ACCESS 7 BETWEEN 5	- BACKING	N - NORTH S - SOUTH	(<4 FEET			
4 - ON ROADSIDE 12-SHARED USE F	VEHICLES IN 6	5 - ANGLE 7 - SIDESWIPE, SAME DIRECTION	E - EAST W - WEST	(≥4 FEET			
5-ON GORE TRAILS 6-OUTSIDE TRAFFIC WAY 13-BIKE LANE		3 - SIDESWIPE, OPPOSITE DIRECTION 9 - OTHER / UNKNOWN		4 - DIVIDED, F	PEPRESSED MEDIAN RAISED MEDIAN		
7 - ON RAMP 14-TOLL BOOTH 8 - OFF RAMP 99-OTHER / UNKN	IOWN			(ANY TYPI 9 - OTHER/UN			
WORK ZONE RELATED W	VORK ZONE TYPE LOCATIO	N OF CRASH IN WORK ZONE	CONTOUR	CONDITIONS	SURFACE		
1-LAI	NE CLOSURE 1 - NE SHIFT/CROSSOVER	BEFORE THE 1ST WORK ZONE WARNING SIGN	1	_1_	2		
3-W0	ORK ON SHOULDER 2-	- ADVANCE WARNING AREA - TRANSITION AREA	1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE		
	TERMITTENT OR MOVING WORK 4-	- ACTIVITY AREA - TERMINATION AREA	2 - STRAIGHT GRADE 3 - CURVE LEVEL	2 - WET 3 - SNOW	2 - BLACKTOP, BITUMINOUS, ASPHALT		
		- TERMINATION AREA	4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK		
LIGHT CONDITION 1 - DAYLIGHT	WEATHER 1-CLEAR 6-SNOW		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL, STONE		
1 2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	0 1 2 - CLOUDY 7 - SEVERE 3 - FOG, SMOG, SMOKE 8 - BLOWING	CROSSWINDS G SAND, SOIL, DIRT, SNOW		6 - WATER (STANDING, MOVING)	5 - DIRT		
4 - DARK — ROADWAY NOT LIGHTED 5 - DARK — UNKNOWN ROADWAY LIGHTING	4 - RAIN 9 - FREEZIN 5 - SLEET, HAIL 99 - OTHER	IG RAIN OR FREEZING DRIZZLE		7 - SLUSH	9 - OTHER/UNKNOWN		
9 - OTHER / UNKNOWN	5- SEELI, HAIL 77- OTHER?	7 OWNING WIN		9 - OTHER/UNKNOWN			
NARRATIVE				A	Indicate the north		
UNITS 1 AND 2 WERE STOPPE	D WB ON STHY				an "N" on the compass diagram.		
261 IN THE LEFT TURN LANE	ES FOR S.						
WATER ST. UNIT 2 WAS IN TH	Œ						
SOUTHERNMOST LEFT TURN	N LANE AND UNIT 1		1 1 1				
WAS IN THE NORTHERNMOS	ST LEFT TURN	S.R	.261	S.WATERS			
LANE. WHEN THE GREEN TU	JRN ARROWS			26c 			
APPEARED FOR THEIR LANE	ES, BOTH	======	5 TRAFFICSIGN				
VEHICLES BEGAN TO TURN	<u> </u>	150 A 1 00 S.R.261					
WATER ST. UNIT 2 BEGAN TO	TURN INTO		»				
THE RIGHT LANE INSTEAD (OF MAINTAINING						
TRAVEL IN THE LEFT LANE A	AND STRUCK						
CRASH REPORTED DATE / TIME DIS	SPATCH DATE / TIME ARE	RIVAL DATE / TIME	SCENE CLEARED	Account to the second s	EPORT TAKEN BY		
$\begin{array}{ c c c c c c c c c c c c c c c c c c c$				4/12/24	POLICE AGENCY MOTORIST		
TOTAL TIME OTHER TOTAL NVESTIGATION TIME MINUTES	officer's NAME* Burton, Samantha L		icer's name* ser, James	금	SUPPLEMENT		
	OFFICER'S BADGE NUMBER	* Снескег	BY OFFICER'S BADGE N	NUMBER*	(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)		
	2 2 5 1		5				

LOCAL REPORT NUMBER 2 + 0 + 2 + 4 + - + 0 + 0 + 0 + 0 + 5 + 1 + 1 + 3 +UNIT # 0WNER NAME: LAST, FIRST, MIDDLE (▼SAME AS DRIVER)

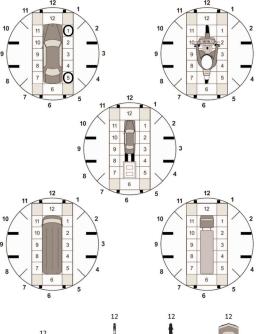
FRIEDLEIN, HERBERT, A OWNER PHONE: INCLUDE AREA CODE (X) SAME AS DRIVER DAMAGE **1313101811913**31218 DAMAGE SCALE 3 - FUNCTIONAL DAMAGE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X) SAME AS DRIVER) 1 - NONE 2 823 BRISTOL DR ,Lakemore ,OH 44312 □ 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE 9 - UNKNOWN DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE LICENSE PLATE # VEHICLE IDENTIFICATION # VEHICLE YEAR VEHICLE MAKE O H GIW3024 LRBFZMR4.6.MD1.1.0.1.5.6...2.0.2.1... Buick INSURANCE POLICY # INSURANCE COMPANY COLOR VEHICLE MODEL STATE FARM BRZ **ENVISION** 3551196SFP35 TYPE of USE US DOT # TOWED BY: COMPANY NAME HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS MATERIAL RELEASED CLASS # PLACARD ID # INTERLOCK 1 - ≤10K LBS. 2 - 10.001 - 26K LBS. HIT/SKIP UNIT $0 \cdot 1$ PLACARD 」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 5 - CARGO VAN BICYCLE 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) # 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 2 AUTONOMOUS 2 - PARTIAL AUTOMATION J 1-YES 2-NO 9-OTHER/UNKNOWN 5 - FULL AUTOMATION 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 / LINKNOWN 13-POLICE 18 - SNOW REMOVAL 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 MOTOR VEHICLE CHASSIS 13 - AUTO TRANSPORTER 9 - CARGO TANK 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 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICKTIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN 8 - TRAILER EQUIPMENT 10 - DISABLED FROM PRIOR 5 - STEERING ACCIDENT DEFECTIVE 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] 4 - MIDBLOCK - MARKED - ALL AREAS [15] 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS CROSSWALK 99 - OTHER / UNKNOWN 8 - 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 2 - BACKING 8 - ENTERING TRAFFIC LANE 2 - NON-COLLISION 14 - ENTERING OR CROSSING 0 6 3 - CHANGING LANES 4__ 0 - NO DAMAGE 14 - UNDERCARRIAGE 19-STANDING SPECIFIED LOCATION 3 - STRIKING 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 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 IN TRAFFIC 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN 9 - OTHER / LINKNOWN 12 - DRIVERLESS TRAFFIC 13 - IMPROPER START FROM A 21 - LYING IN ROADWAY 1 - NONE 7 - LEFT OF CENTER 17 - VISION OBSTRUCTION TRAFFICWAY FLOW TRAFFIC CONTROL 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 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE 23 - OPENING DOOR INTO 2 - SIGNAL 5 - YIELD SIGN 2 - TW0-WAY 2 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 4 2 - INVOLVED-ACTIVE CROSSING NON-COLLISION 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** TRAVFI 23 - STRUCK BY FALLING, 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 18-ANIMAL — DEER 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 1 - NORTH 5 - NORTHEAST 19-ANIMAL - OTHER 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT ANYTHING SET IN MOTION



LOCAL REPORT NUMBER

2 + 0 + 2 + 4 + - + 0 + 0 + 0 + 0 + 5 + 1 + 1 + 3 +

NAL DAMAGE IG DAMAGE



6	6	6	6
- NO DAMAGE	[0]	UNDERCARRIAGE	[14]

ARRIAGE E NOT AT SCENE

[15]

2 - TWO-WAY		GNAL LASHER GRADE CR	5 - YIELD SIGN 6 - NO CONTROL OSSING
1 - ONE-WAY	1 - R0		4 - STOP SIGN

CTIVE CROSSING ASSIVE CROSSING

- NORTHEAST - NORTHWEST - SOUTHEAST - SOUTHWEST - OTHER / UNKNOWN

	19. Htt 10. 000 100 100 100 100 100 100 100 100
UNIT SPEED	DETECTED SPEED
0.2.0.	1 - STATED / ESTIMATED SPEED
U Z U	2 - CALCULATED / EDR
POSTED SPEED	3 - UNDETERMINED
3 5	

					$\begin{bmatrix} 2 & 0 & 2 & 4 & -1 & 0 \end{bmatrix}$	$0 \downarrow 0 \downarrow 0 \downarrow 3 \downarrow 1$
0_2 SHAFFER, D	,		OWNER PHONE: INCL. 2 1 6 3 9	UDE AREA CODE ($\fbox{3}$ same as driver) $9 2 3 9 3 1 $	DAN	AMAGE Mage scale
OWNER ADDRESS: STREET, CITY, STATE 331 FRANKLIN ST		Н 44266			2 1 - NONE 2 - MINOR DAMA	3 - FUNCTIONA AGE 4 - DISABLING
COMMERCIAL CARRIER: NAME, ADD	RESS, CITY, STATE, ZIP		COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE		UNKNOWN
LP STATE LICENSE PLATE # O H HNV3540		EIDENTIFICATION #	VEHICLE YE. 2 0 1	AR VEHICLE MAKE		AGED AREA(S) E ALL THAT APPLY
INSURANCE COMPONENTS FA	PANY	NSURANCE POLICY # 3730000SFP35	COLOR	VEHICLE MODEL ALTIMA	11 12 1	10
TYPE OF USE	IN EMERGENCY RESPONSE	US DOT #	TOWED BY: COMPAN	Y NAME	9 9 3 3	9 10
INTERLOCK HIT/SKIP UNI	#OCCUPANTS VE	HICLE WEIGHT GVWR/GCWR 1 - ≤10K lbs. 2 - 10,001 - 26K lbs	MATERIAL RELEASED	US MATERIAL Class # Placard ID #	8 7 6 4	8 7
1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	3 - >26K LBS.	PLACARD 18-LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	7 6 11	12 7
. O . 1 . 2 - PASSENGER VAN (MINIVAN)	8 - MOTORCYCLE 3-WHEELED	13-SNOWMOBILE	19-BUS (16+ PASSENGERS)	24 - WHEELCHAIR (ANY TYPE)	10	11 1 2
UNIT TYPE 4 - PICK UP	9 - AUTOCYCLE 10 - MOPED OR MOTORIZED	15 - SEMI-TRACTOR	20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT	25 - OTHER NON-MOTORIST 26 - BICYCLE	9 (9 3 3
5 - CARGOVAN 6 - VAN (9-15 SEATS)	BICYCLE 11 - ALL TERRAIN VEHICLE (ATV / UTV)	16 - FARM EQUIPMENT 17 - MOTORHOME	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	8	8 4 7 5 6
# of TRAILING UNITS WAS VEHICLE OPERATING IN AU		0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	Q - IINKNOWN	12 7	6 11
MODE WHEN CRASH OCCURRED 1-YES 2-NO 9-OTHER/UNK	D? 0	1 - DRIVER ASSISTANCE	4 - HIGH AUTOMATION 5 - FULL AUTOMATION	2 - Unimown	10 11 1 2	10 11 10
1 - NONE	MODE LEVEL 6 - BUS - CHARTER/TOUR	11 - FIRE	16-FARM	21 - MAIL CARRIER	9 8 3 4	9 8
0 1 2 - TAXI SPECIAL 3 - ELECTRONIC RIDE SHARING	7 - BUS - INTERCITY		17 - MOWING 18 - SNOW REMOVAL	99 - OTHER / UNKNOWN	8 7 6 5	8 7
FUNCTION 4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14-PUBLIC UTILITY	19-TOWING		7 6 5	7 🔽
5 - BUS - TRANSIT/COMMUTER 1 - NO CARGO BODYTYPE	10 - AMBULANCE 3 - VEHICLE TOWING ANOTHER	15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL 8 - POLE	12 - CONCRETE MIXER	1	12 12
/NOT APPLICABLE	MOTOR VEHICLE	CHASSIS	9 - CARGOTANK	13 - AUTO TRANSPORTER	12	+
BODY TYPE	4 - LOGGING	7 CONTINUOUIDO/CONTIE	10-FLAT BED 11-DUMP	14-GARBAGE/REFUSE 99-OTHER/UNKNOWN	9 3 9	3 9 3
1 - TURN SIGNALS VEHICLE 2 - HEAD LAMPS	4 - BRAKES 5 - STEERING	8 - TRAILER EQUIPMENT	9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR	99 - OTHER / UNKNOWN	6	
DEFECTS 3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT		□ - NO DAMAGE [0]] UNDERCARR
1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION – OTHER 4 - MIDBLOCK – MARKED		9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS	12-FIRST RESPONDER AT INCIDENT SCENE	☐-TOP [13]	- ALL AREAS
NON-MOTORIST 2-INTERSECTION - UNMARKED LOCATION CROSSWALK AT IMPACT	CROSSWALK 5 -TRAVEL LANE - OTHER LOCATION		11 - SHARED USE PATHS OR TRAILS	99 - OTHER / UNKNOWN	☐ - UNIT N	NOT AT SCENE [16]
1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18 - APPROACHING	INITIAL I	POINT OF CONTACT
3 2- NON-COLLISION 0 6	2 - BACKING I 3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION	OR LEAVING VEHICLE 19-STANDING	0 - NO DAMAGE	14 - UNDERCA
ACTION 4- STRUCK PRE-CRASH 5- BOTH STRIKING ACTIONS	1 4 - OVERTAKING/PASSING	10 - PARKED 11 - SLOWING OR STOPPED	15 - WALKING, RUNNING, JOGGING, PLAYING	20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE	DIAGRAM	UNIT 15 - VEHICLE N 99 - UNKNOWN
& STRUCK 9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	IN TRAFFIC	16 - WORKING 17 - PUSHING VEHICLE	DISABLED VEHICLE 99 - OTHER / UNKNOWN	13 - TOP	
1 - NONE	7 - LEFT OF CENTER	13-IMPROPER START FROM A	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONT
2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8 - FOLLOWING TOO CLOSE / ACDA 9 - IMPROPER LANE CHANGE	PARKED POSITION 14-STOPPED OR PARKED	18-OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO	1 - ONE-WAY	1 - ROUNDABOUT
4- RAN STOP SIGN	10-IMPROPER PASSING	THECHIV	19-LOAD SHIFTING/FALLING/ SPILLING	ROADWAY 99-OTHER IMPROPER ACTION	2 - TW0-WAY	2 - SIGNAL 3 - FLASHER
CONTRIBUTING 5 - UNSAFE SPEED 6 - IMPROPERTURN	11 - DROVE OFF ROAD 12 - IMPROPER BACKING		20 - IMPROPER CROSSING	77-UTHER IMPROPER ACTION	# of THROUGH LANES	RAIL GRADE CR
SEQUENCE OF EVENTS		NON-COLLISION			ON ROAD	1 - NOT INVOLVED 2 - INVOLVED-ACTI
1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE —	16 - RAILWAY VEHICLE 17 - ANIMAL — FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT		3 - INVOLVED-PASS
3 - IMMERSION	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	TRAVEL	18-ANIMAL — DEER	23 - STRUCK BY FALLING, SHIFTING CARGO OR	UNIT / NON-N	MOTORIST DIRECTION 1 - NORTH 5 - N
2 4 - JACKKNIFE 5 - CARGO / EQUIPMENT	9 - RAN OFF ROAD LEFT 10-CROSS MEDIAN	12 OTHER NON COLLISION	19-ANIMAL — OTHER 20-MOTOR VEHICLE IN	ANYTHING SET IN MOTION BY A MOTOR VEHICLE	FROM 3 TO 2	2 - SOUTH 6 - N
LOSS OR SHIFT		15 - PEDALCYCLE	TRANSPORT 21 - PARKED MOTOR VEHICLE	24-OTHER MOVABLE OBJECT	FROM 3 TO 2	4 - WEST 8 - S
25 - IMPACT ATTENUATOR	31 - GUARDRAIL END	N WITH FIXED OBJECT 37-TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE		9 - 0
/ CRASH CUSHION 26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	39-LIGHT/LUMINARIES	44 - DITCH 45 - EMBANKMENT	EQUIPMENT 51 - WALL	UNIT SPEED	DETECTED 1 - STATED
STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	DANGER	40 - UTILITY POLE	46 - FENCE 47 - MAILBOX	52 - BUILDING 53 - TUNNEL	$\begin{bmatrix} 0 & 2 & 0 \end{bmatrix}$	1 2 - CALCULA
28-BRIDGE PARAPET 6	35 - MEDIAN CONCRETE BARRIER	OR SUPPORT	48-TREE 49-FIRE HYDRANT	54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	POSTED SPEED	3 - UNDETE
30 - GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT			3 5	

____ MOST HARMFUL EVENT

OF PUBLIC SAFETY MOTORIST / NON-MOTORIST						LOCAL REPORT NUMBER									
			714 14	1010	KIJ				<u>2</u>		4 - 0 0	$0 \downarrow 0 \downarrow 0$	5	1 1	3
UNIT #								DATE OF BIRTH AGE GENDER							
0,1	'1	FRIEDLEIN, HERBERT, A									6 1 9		<u> </u>	1_{\square}	M
	: street, city, st. RISTOL	OL DR ,Lakemore ,OH 44312							CONTACT PHONE - INCLUDE AREA CODE 3 3 0 8 1 9 3 3 2 8						
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	D0	T-Compli	SEATING POSITIO	N AIR BAG	USAGE	EJECTION	TRAPPED
	BY							0 4		HELME		_ 1		_1_	_1_
OL STATE	Man - Constantination of the	ICENSE NUMBER		OFFENSE CHARGED			LOCAL	OFFENSE DESC	RIPTION	1		CITAT	ION NU	IMBER	
O H	RT814	830	RESTRICTION SELECT UPTO3 DRIVER ALCOH												
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT				DHOL / DRUG SUSPI		CONDITION	ALCOHOL TEST STATUS TYPE VALUE S		STATUS	DRUG TEST(S) STATUS TYPE RESULT SELECT UPTO 4			
4			BY	1	=	THER DRUG	KIJUANA	1 1	. 1	1		1	1		
UNIT #	NAME: LAST, F	FIRST, MIDDLE								ا	DATE OF BIRTH		T	AGE	GENDER
0.2	SHAFF	ER, DONNA, L							0	3 2	2 8 1 9	4.7	, 7	7	F
ADDRESS	: STREET, CITY, ST.	ATE, ZIP							_		ONE - INCLUDE AREA				
331 F	RANKL	, Ravenna, IN ST	OH 44	1266					2	1 .	6 3 9	_ 2 _	3	9	3 1
INJURIES	INJURED I	EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	□ D0	T-Compli	SEATING POSITIO	N AIR BAG	USAGE	EJECTION	TRAPPED
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OL STATE		ICENSE NUMBER			SE CHAF	RGED	LOCAL CODE	OFFENSE DESC	RIPTION	1			CITATION NUMBER		
O H				331.			X	Driving in M			OL TEST	2661	26618 DRUG TEST(S)		
≥ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER TRACTED		DHOL / DRUG SUSPI		CONDITION	STATUS	TYPE	OL TEST VALUE	STATUS	TYPE		SELECTUPTO 4
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UNIT #	NAME: LAST, F	FIRST, MIDDLE	Maria Ma								DATE OF BIRTH			AGE	GENDER
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ADDRESS	: STREET, CITY, ST.	ATE, ZIP							CONTA	ACT PHO	ONE - INCLUDE AREA	CODE			
010															
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED	TAKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED		T-Compli HELME		N AIR BAG	USAGE	EJECTION	TRAPPED
OL STATE		ICENSE NUMBER		OFFEN	SE CHAF	DOED	LOCAL	OFFENSE DESC					 TION NUMBER		ш
ORIS	OF ERATOR E	TOENSE NOMBER		OI I EIN	SE OTIAL	NULD	CODE	OTT ENSE DESC			Oliver	OTATION NOMBER			
OL CLASS	ENDORSEMENT	RESTRICTION SELECT		VER	ALC	OHOL / DRUG SUSPI	ECTED	CONDITION		ALCOHOL TEST				TEST(S	
	SELECT UP TO 2		BY	TRACTED	П	LCOHOL MAF	RIJUANA		STATUS	TYPE	VALUE	STATUS	TYPE	RESUL	SELECTUPIO4
				TD DAG	0	THER DRUG	•	OL DECEDIO	L				-		
1 - FATAL	JRIES	SEATING POSITION 1 - FRONT - LEFT SIDE	1 - NOT DEF	LOYED		OL CLASS 1-CLASS A	>	OL RESTRIC 1-ALCOHOL INTER			RIVER DISTRAC - NOT DISTRACTED		1 - NONE	EST STA GIVEN	1108
	SERIOUS INJURY	(MOTORCYCLE DRIVER) 2 - FRONT – MIDDLE	2 - DEPLOY			2 - CLASS B		2 - CDL INTRASTAT		2	- MANUALLY OPERATIN	HOLTION		REFUSED	
3 - SUSPECTED 4 - POSSIBLE II) MINOR INJURY NJURY	3 - FRONT – RIGHT SIDE	3 - DEPLOY 4 - DEPLOY	ED SIDE ED BOTH FRO	NT / SIDE	3 - CLASS C 4 - REGULAR CLASS		5-CORRECTIVE LENSES			DEVICE (TEXTING, TYPING, DIALING) 3 - TEST GIVEN, CONTAMINATED SAMPLE / UNUSABLE				
5 - NO APPAREI		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT APP	LICABLE		(OHIO = D) 5 - EXCEPT			ASS A BUS 3 - TALKING ON HAM		- TALKING ON HANDS-F				
INJURED	TAKEN BY	5 - SECOND - MIDDLE	9 - DEPLOY	MENT UNKN	NWC	5 - M/C MOPED ONLY 6 - NO VALID OL		6 - EXCEPT CLASS & CLASS B BUS				HNKNOWN .			
1 - NOT TRANSF /TREATED A		6 - SECOND – RIGHT SIDE 7 - THIRD – LEFT SIDE	E.	JECTION	W 25	OL ENDORSE	MENT	7 - EXCEPT TRACTO			COMMUNICATION DEV - OTHER ACTIVITY WITH		ALCO	HOL TES	ST TYPE
2 - EMS		(MOTORCYCLE SIDE CAR) 8 - THIRD – MIDDLE	1 - NOT EJE			H - HAZMAT		8 - INTERMEDIATE RESTRICTIONS	LICENSE		ELECTRONIC DEVICE		1 - NONE 2 - BL00		
3 - POLICE 9 - OTHER / UNI	KNOWN	9 - THIRD - RIGHT SIDE	2 - PARTIAL 3 - TOTALLY	LY EJECTED ' FJECTED				9 - LEARNER'S PERMIT RESTRICTIONS			6 - PASSENGER 7 - OTHER DISTRACTION		3 - URINE		
		10 - SLEEPER SECTION OF TRUCK CAB	4 - NOT APP			N - TANKER		10 - LIMITED TO DAY			INSIDE THE VEHICLE - OTHER DISTRACTION		4 - BREA 5 - OTHE		
1 - NONE USED	QUIPMENT	11 - PASSENGER IN OTHER	ī	RAPPED		Q - MOTOR SCOOTER R - THREE-WHEEL MO	TODOVOLE	11 - LIMITED TO EM 12 - LIMITED - OTHE			THE VEHICLE	0013100			TVDF
	BELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1 - NOTTRA			S - SCHOOL BUS	TORGIGEE	13 - MECHANICAL D (SPECIAL BRAK		9	- OTHER / UNKNOWN		1 - NONE	JG TEST	TYPE
3 - LAP BELT 0 4 - SHOULDER	NLY USED & Lap Belt USED	PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED	2 - EXTRICA MECHAN	ATED BY NICAL MEANS	S	T - DOUBLE & TRIPLE X - TANKER / HAZMAT		CONTROLS, OR O	THER	R CONDITION			2 - BL00D		
	RAINT SYSTEM -	CARGO AREA 13 - TRAILING UNIT	3 - FREED E NON-ME	BY Chanical M	EANS			ADAPTIVE DEVICES) 14 - MILITARY VEHICLES ONLY		1 - APPARENTLY NORMAL ONLY 2 - PHYSICAL IMPAIRMENT			3 - URINE 4 - OTHER		
	TRAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR				GENDER F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	S WITHOU		- EMOTIONAL (E.G., DEPR ANGRY, DISTURBED)	ESSED,			SULT(S)
REAR FACIN 7 - BOOSTER SI		(NON-TRAILING UNIT) 15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRRO		4-	ILLNESS			IETAMINES	
8 - HELMET US	SED	99 - OTHER / UNKNOWN				U - OTHER / UNKNOWN		17 - PROSTHETIC AII 18 - OTHER	D		FELL ASLEEP, FAINTEI FATIGUED, ETC.			ITURATES ODIAZEPIN	FS
9 - PROTECTIV (ELBOW, KN								32			UNDER THE INFLUENCE OF MEDICATIONS / DRU	E		ODIAZEPIN IABINOIDS	LJ
10 - REFLECTIV	E CLOTHING										/ALCOHOL		5 - COCA		10
11 - LIGHTING - / BICYCLE 0										9-	OTHER / UNKNOWN		6 - 0PIAT 7 - 0THE	res / opioid R	19
99 - OTHER / UN														TIVE RESU	LTS

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D	OHO DEPARTMENT OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER 2						
										0,0,5			
	UNIT # NAME: LAST, FIRST, MIDDLE							DATI	E OF BIRTH		AGE	GENDER	
Į.	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE					
OCCUPAN	ADDRESS: SIRECI, CITY, STATE, ZIP							CONTACT FROME - INCLUDE AREA CODE					
)) 	INIIIDIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	ITY (NAME CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR RAG HSAGE	FIECTION	TDADDED	
	INJUNIES	TAKEN BY	EMS AGENCY (NAME)		INSURED TAKEN TO. MEDICAL PACIE	III (NAME, GITT)	USED	DOT-COMPLIANT MC HELMET	SEATING FOSTITON	AIR DAG OSAGE	Lacorion	IKAFTED	
	LINIT #	NAME	T FIRST MIRRY 5						E OF DIDTU		105	CENDED	
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAII	E OF BIRTH		AGE	GENDER	
Į.	ADDDESS.	STREET, CITY,	STATE 7ID					CONTACT PHONE	- INCLUDE ADEA CO				
OCCUPAN	ADDITEOU.	orkeen, orri,	STATE, ZII			CONTROLL	- INCLUDE AREA GO	U.C.					
9-	INJURIES	INJURED	EMS Agency (NAME)		INJURED TAKEN TO: Medical Facility (NAME, CITY) SAFETY EQUIPMENT				SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
		TAKEN BY				,	USED	DOT-COMPLIANT MC HELMET					
	UNIT #	NAME- LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER	
			,, , , , , , , , , , , , , , , , , , ,										
IN	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE			
OCCUPANI													
3-	INJURIES		EMS AGENCY (NAME)		INJURED TAKEN TO: Medical Facil	ITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
	1 1	TAKEN BY					USED	MC HELMET			, I	l i	
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER	
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ANT	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
OCCUPAN													
0	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: Medical Facil	LITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
	لـــــا	ВҮ						MC HELMET	لــــــــــــــــــــــــــــــــــــــ				
		INJU	JRIES	SAFETY	Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG U	SAGE		
	1 - FATA			1 - NONE US VEHICLE	ED - OCCUPANT		IT – LEFT SIDE ORCYCLE DRIV	ER)	1 - NOT DE				
			RIOUS INJURY		ER BELT ONLY USED		T – MIDDLE	2 - DEPLOYED FRONT					
		SIBLE INJU	INOR INJURY	3 - LAP BELT	.T ONLY USED 3 - FRONT - RIGHT SIDI 4 - SECOND - LEFT SID								
		PPARENT		4 - SHOULDE	ER & LAP BELT USED		ORCYCLE PASS		FRONT/SIDE				
L					D RESTRAINT SYSTEM – 5 - SECOND – MIDDLE VARD FACING 6 - SECOND – RIGHT SII D RESTRAINT SYSTEM – 7 - THIRD – LEFT SIDE				5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN				
T	1 NOT	TRANSPOR	TAKEN BY)E				<nown< th=""></nown<>	
		EATED AT S		REAR FA	NG (MOTORCYCLE SIDE						O N		
	2 - EMS			7 - BOOSTER	9 - THIRD – RIGHT SIDE				1 - NOT EJECTED				
	3 - POLI			8 - HELMET					2 - PARTIALLY EJECTED		ΞD		
	9 - OTHI	ER / UNKNO	OWN						3 - TOTALLY EJECTED 4 - NOT APPLICABLE TRAPPED 1 - NOT TRAPPED				
f			NDER										
	F - FEMA M - MALI				G – PEDESTRIAN	NCLOSED							
		R / UNKNO	WN	/ BICYCLI	13 - TRAILING UNIT				APPED ATED BY MECHANICAL				
				99 - OTHER /	UNKNOWN		IG ON VEHICLE TRAILING UNIT)	E EXTERIOR Z - EXTRICATED B MEANS			3 I WEGHANIGAL		
							MOTORIST			BY NON-ME	CHANIC	AL	
						99 - OTHE	R/UNKNOWN		MEANS	1			
S		ST, FIRST, MIDD							E OF BIRTH	0 2	AGE	GENDER	
WITNESS			EANDRA, J					$0 \cdot 1 \cdot 0$			2 1	F	
MI		STREET, CITY,		imoro MI	21206			CONTACT PHONE			1 9	Q Q	
	Processor State of the State of	250170 2000 2000 2000 2000 2000 2000 2000	ON AVE ,Balti	more, ,MI	J 41400			3 4 6	E OF BIRTH	U J	AGE	GENDER	
	NAME: LAST, FIRST, MIDDLE						DAII	_ J. JIKIH		AME	WENDER .		
WITNESS	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE			
š									1 1				
	NAME: LAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER	
WITNESS													
II M	ADDRESS:	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 | 0 | 5 | 1 | 1 | 3 | UNIT 1. SHE WAS CITED WITH MARKED LANES.