| OHIO DEPARTMENT TRAFFIC CRASH  | REPORT *DENOTES MANDAT                                   | TORY FIELD FOR SUPPLEME                                 | ENT REPORT                  | L  | OCAL REPORT NUM                             | BER*                                      |
|--|--|---|-----------------------------|--|---|---|
|  | LOCAL INFORMATION  |   |                             | 2 0 2 4  | $-10_{+}0_{+}0_{+}1$                        | 7,7,7,2                                   |
| M OH-1P OTHER  | REPORTING AGENCY NAME*                                   |   | NCIC*                       | HIT/SKIP   | NUMBER OF UNITS                             | UNIT IN ERROR                             |
| SECONDARY CRASH PRIVATE PROPERTY   | City of Kent Police                                      | L <b>O</b> _0   | $6 \cdot 7 \cdot 0 \cdot 3$ | 1 - SOLVED L 2 - UNSOLVED                                    | 0_2   | 0 1 98 - ANIMAL<br>99 - UNKNOWN           |
| 1-CITY   | VILLAGE, TOWNSHIP*                                       |   |                             | CRASH DATE / T   | 20050000000000000000000000000000000000      | CRASH SEVERITY<br>1 - FATAL               |
| 6,7 1 2-VILLAGE Kent   |  |   |                             | 1,1,2,4,2,0,2,4  |   | 2 - SERIOUS INJURY                        |
| S - SOUTH  | LOCATION ROAD NAME                                       |   | ROAD TYPE                   | LATITUDE DEC   |   | SUSPECTED  3 - MINOR INJURY               |
| W-WEST   | MAIN   |   | $S \perp T$                 | 41,015,3   | $8 \downarrow 1 \downarrow 0$               | SUSPECTED                                 |
| ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH   | REFERENCE ROAD NAME (ROAD, MILE                          | POST, HOUSE #)  | ROAD TYPE                   | LONGITUDE DE   | CIMAL DEGREES                               | 4 - INJURY POSSIBLE                       |
| ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST   | DEPEYSTER  |   | S T                         | -8 <sub>1</sub> 1 <sub>0</sub> 3 <sub>5</sub> 5 <sub>1</sub> | <b>5</b> <sub>1</sub> <b>5</b> <sub>1</sub> | 5 - PROPERTY DAMAGE<br>ONLY               |
| REFERENCE POINT DIRECTION FROM REFERENCE   | ROUTE TYPE   | ROAD TYPE   | 2 2112                      | _ 1  | NTERSECTION REL                             | ATED                                      |
| 1 2-MILE POST 3 S-SOUTH US-  | INTERSTATE ROUTE(TP) AL - ALLI FEDERAL US ROUTE AV - AVE |   | D - ROAD<br>Q - SQUARE      | WITHIN INTER   | RSECTION OR ON APP                          | PROACH                                    |
| 3-HOUSE #   E-EAST   | STATE ROUTE BL - BOU                                     |   | T - STREET                  | ☐ WITHIN INTER   | RCHANGE AREA                                | NUMBER OF APPROACHES                      |
| DISTANCE DISTANCE CR-  | NUMBERED COUNTY ROUTE CR - CIRC                          |   | E - TERRACE<br>L - TRAIL    |  | ROADWAY                                     |   |
| 0 5557   | NUMBERED TOWNSHIP DR - DRIV                              |   | VA - WAY                    | ROADWAY DIV  | IDED  |   |
| 1 0 0 2 3-YARDS  | HE - HEIG  |   |                             |  | Ť   |   |
| LOCATION OF FIRST HARMFUL EVENT<br>1 - ON ROADWAY 9 - CROSSOVER  |  | OF CRASH COLLISION/IMPAG<br>ISION 4 - REAR-TO-REAR      | СТ                          | DIRECTION OF TRAVEL  |   | EDIAN TYPE<br>ED FLUSH MEDIAN             |
| 0 1 2-ON SHOULDER 10-DRIVEWAY/   | I. h. TWO MOTO   | OR J-BACKING  |                             | N - NORTH<br>S - SOUTH                                       | ( < 4 F                                     | EET)                                      |
| 3-IN MEDIAN 11-RAILWAY GR<br>4-ON ROADSIDE 12-SHARED US  | VEHICLES   |   | E DIRECTION                 | E - EAST<br>W - WEST   | 2 - DIVID<br>( ≥4 F                         | ED FLUSH MEDIAN<br>EET )                  |
| 5-ON GORE TRAILS 6-OUTSIDE TRAFFIC WAY 13-BIKE LANE  | 2 - REAR-END<br>3 - HEAD-ON                              | ** J. M M. B. B. H. | 255                         | W-WEST   |   | ED, DEPRESSED MEDIAN<br>ED, RAISED MEDIAN |
| 7 - ON RAMP 14-TOLL BOOTH  |  | 9 - OTHER / UNKNOW                                      | VIV                         |  | (ANY  | TYPE)<br>R/UNKNOWN                        |
| 8-OFF RAMP 99-OTHER/UNI  | (NOWN  |   |                             |  |   |   |
| WORK ZONE RELATED  | WORK ZONE TYPE L ANE CLOSURE                             | LOCATION OF CRASH IN WO<br>1 - BEFORE THE 1ST V         |                             | CONTOUR  | CONDITIONS                                  | SURFACE                                   |
|  | ANE SHIFT/CROSSOVER                                      | WARNING SIGN  |                             |  |   | 2   |
|  | VORK ON SHOULDER OR MEDIAN                               | 2 - ADVANCE WARNIN 3 - TRANSITION AREA                  | 35                          |  | 1 - DRY<br>2 - WET                          | 1 - CONCRETE<br>2 - BLACKTOP,             |
| The state of the s | NTERMITTENT OR MOVING WORK                               | 4 - ACTIVITY AREA<br>5 - TERMINATION ARE                | ΕA                          | TT 15-74-2-100-72-2-10-100-100-100-1                         | 3 - SNOW                                    | BITUMINOUS,<br>ASPHALT                    |
|  | THER   | 5 - TERMINATION ARE                                     | EA.                         | 4 - CURVE GRADE  | 4 - ICE                                     | 3 - BRICK/BLOCK                           |
| LIGHT CONDITION  1 - DAYLIGHT  | WEATHER 1-CLEAR 6-S                                      | SNOW  |                             | 9 - OTHER/UNKNOWN  | 5 - SAND, MUD, DIRT<br>OIL, GRAVEL          | 4 - SLAG, GRAVEL,<br>STONE                |
| 3 2- DAWN/DUSK   | 0.2 2-CLOUDY 7-S   | SEVERE CROSSWINDS                                       |                             |  | 6 - WATER (STANDIN                          | 353                                       |
| 3 - DARK – LIGHTED ROADWAY<br>4 - DARK – ROADWAY NOT LIGHTED   | 3 - FOG, SMOG, SMOKE 8 - E                               | BLOWING SAND, SOIL, DIRT,<br>FREEZING RAIN OR FREEZI    |                             |  | MOVING)<br>7 - SLUSH                        | 9 - OTHER/UNKNOWN                         |
| 5 - DARK - UNKNOWN ROADWAY LIGHTING  | 5 - SLEET, HAIL 99 -                                     | OTHER / UNKNOWN   |                             |  | 9 - OTHER/UNKNOW                            | N   |
| 9 - OTHER / UNKNOWN  |  |   |                             |  |   | A   |
| NARRATIVE  |  |   |                             |  | 1   | Indicate the north                        |
| Unit 1 was driving westbound or  | E Main St. Unit 2 was                                    |   |                             |  |   | an "N" on the compass diagram.            |
| backing out of the driveway of   | 223 E. Main St.  |   |                             |  | 50  |   |
| facing north. Unit 1 failed to re  | duce speed to avoid                                      |   |                             |  | 23E.MAINST                                  | (Ŝ  |
| a collision and struck the right   |  |   |                             | DRIVEWAY OF ZZSEDANINST                                      |   |   |
|  |  | _   |                             | TSNAMES  |   |   |
| Rear passenger of unit 1 was tr  |  |   |                             | Q UNIT   | 1   |   |
| Portage with possible serious in   | jury.  |   |                             |  | D   | <del></del>                               |
|  |  |   |                             | E.MAI  | NST   | <i>7€</i>                                 |
|  |  | DEPEYSTER   | RST                         |  |   |   |
|  |  |   |                             |  |   |   |
|  |  |   |                             |  |   | Not To See !                              |
|  |  |   |                             |  |   | Not To Scale                              |
| CRASH REPORTED DATE / TIME   | DISPATCH DATE / TIME                                     | ARRIVAL DATE / TIME                                     |                             | SCENE CLEARED D  | DATE / TIME                                 | REPORT TAKEN BY                           |
| 1.1.1.2.4.2.0.2.4./.0.1.1.41.1.2.  |  |   |                             |  |   | X POLICE AGENCY                           |
| TOTAL TIME OTHER TOTAL   |  |   |                             | 1_Z_4_Z_U_Z_4<br>CER'S NAME*                                 | 1/0/2/0/3                                   | MOTORIST                                  |
| ROADWAY CLOSED INVESTIGATION TIME MINUTE   |  |   | elson, Jo                   |  |   | SUPPLEMENT (CORRECTION OR ADDITION        |
|  | OFFICER'S BADGE N  | NUMBER*   | CHECKED E                   | OFFICER'S BADGE N  | UMBER*                                      | TO AN EXISTING REPORT SENT TO COPS)       |
|  | 0   2   4   1  | _ r _ r _ n _ n _ n _ n _ n _ n _ n _ n                 | 4 1 3                       | 4  | - 1   |   |

LOCAL REPORT NUMBER

2 0 2 4 - 0 0 0 1 7 7 7 2

| UNIT # $0 \cdot 1$ | OWNER NAME: LAST, FIRE<br>KALL, ALEX                     | ST, MIDDLE (X SAME AS DRIVER)  ANDER MA     | TTHEW   | REDACTED PE   | R ORC 149.43(A)(1)                                    |   | MAGE SCALE   |  |  |
|--------------------|--|---|---|---|---|---|--|--|--|
| -                  | DRESS: STREET, CITY, STATE                               |   | I IIIE V  |   |   | 1 - NONE  | 3 - FUNCTIONAL DAMAGE  |  |  |
|                    |  |   | 05 Streetsbor                                     | o.OH 44241  |   | 4 2 - MINOR DAN                                       |  |  |  |
|                    | CIAL CARRIER: NAME, ADDR                                 |   | oe joureeusbor                                    |   | PHONE: INCLUDE AREA CODE                              | 9 - UNKNOWN   |  |  |  |
|                    |  | 5000 B. 39 BC 2000 34 DB 2000               |   |   |   | DAN   | AAGED AREA(S)  |  |  |
| LP STATE           | LICENSE PLATE #  |   | IDENTIFICATION #                                  | VEHICLE YE  | AR VEHICLE MAKE                                       | INDICA  | TE ALL THAT APPLY  |  |  |
|                    | JNT6701  |   | VXGCY16   | 2,7,2,2,0,1   |   | 12  | 12   |  |  |
|                    | NCE INSURANCE COMP                                       |   | SURANCE POLICY #                                  | COLOR   | VEHICLE MODEL   | 11 10   | 11 12  |  |  |
| X INSURA           | STATEFAF   | RM 40                                       | 046714-SFP-35                                     | WHI   | XF  | 10 11 0 2   | 10 11 1 1 2  |  |  |
|                    | TYPE OF USE  | - 111 511 50 51101                          | US DOT #  | TOWED BY: COMPAN                                    | Y NAME  | 10 2  | 10,000 2   |  |  |
| COMME              | RCIAL GOVERNMENT   | IN EMERGENCY RESPONSE                       |   | Bakers Towing                                       | UC MATERIAL   | 9 9 3   | 9 9 3  |  |  |
| INTER              | UCK  | #OCCUPANTS VEH                              | HICLEWEIGHT GVWR/GCWR                             |   | US MATERIAL<br>CLASS # PLACARD ID #                   | 0 4 7   | 7 7 7  |  |  |
| DEVICE EQUIP       | HIT/SKIP UNI   | T 0 2                                       | 1 - ≤10KLBS.<br>2 - 10,001 - 26KLBS               | RELEASED  | OLNOO II T LAONIIO IO II                              | 8 6   | 8 6  |  |  |
| EUOIF              |  | 0 3   | 3 - >26K LBS.                                     | PLACARD   |   | 7 6 11  | 12 7 6   |  |  |
|                    | 1 - PASSENGER CAR  | 7 - MOTORCYCLE 2-WHEELED                    | 12 - GOLF CART                                    | 18 - LIMO (LIVERY VEHICLE)                          | 23 - PEDESTRIAN / SKATER                              | <   | 12   |  |  |
| 0 1                | 2 - PASSENGER VAN (MINIVAN)<br>3 - SPORT UTILITY VEHICLE | 8 - MOTORCYCLE 3-WHEELED<br>9 - AUTOCYCLE   | 13 - SNOWMOBILE<br>14 - SINGLE UNIT TRUCK         | 19-BUS (16+ PASSENGERS)<br>20-OTHER VEHICLE         | 24 - WHEELCHAIR (ANY TYPE)<br>25 - OTHER NON-MOTORIST | 10/   | 11 1 2   |  |  |
| UNITTYPE           | 4 - PICK LIP   | 10 - MOPED OR MOTORIZED                     | 15 - SEMI-TRACTOR                                 | 21 - HEAVY EQUIPMENT                                | 26-BICYCLE  | 9   | 9 3 3  |  |  |
|                    | 5 - CARGO VAN  | BICYCLE                                     | 16 - FARM EQUIPMENT                               | 22 - ANIMAL WITH RIDER OR                           | 27 -TRAIN   | _   | 8 4 -  |  |  |
|                    | 6 - VAN (9-15 SEATS)                                     | 11 - ALL TERRAIN VEHICLE<br>(ATV / UTV)     | 17 - MOTORHOME                                    | ANIMAL-DRAWN VEHICLE                                | 99 - UNKNOWN OR HIT/SKIP                              | 8   | 7 5 4  |  |  |
|                    | # of TRAILING UNITS                                      | MIY/UIY/                                    |   |   |   | 12 7  | 6 5 12   |  |  |
|                    |  | TONOMOUS                                    | D. MOAUTOMATION                                   | 2 CONDITIONS AND ASSESSED                           | O HINIANGMAN  | 11 12   | 6 11 12  |  |  |
|                    | WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED     |   | 0 - NO AUTOMATION<br>1 - DRIVER ASSISTANCE        | 3 - CONDITIONAL AUTOMATION<br>4 - HIGH AUTOMATION   | 7 - UNKNUWN   | 10 11 1 2   | 10 11 1 2  |  |  |
| _ 2 _              | 1-YES 2-NO 9-OTHER/UNK                                   | 1 0 1                                       | 2 - PARTIAL AUTOMATION                            | 5 - FULL AUTOMATION                                 |   | 10 2  | 10 2   |  |  |
|                    |  | MODE LEVEL                                  |   | 47.70   |   | 9 3 3   | 9 3  |  |  |
|                    | 1 - NONE   | 6 - BUS - CHARTER/TOUR                      | 11 - FIRE   | 16-FARM   | 21 - MAIL CARRIER                                     | 8 4   | 8 4 7  |  |  |
| [0,1]              | 2 - TAXI   | 7 - BUS - INTERCITY                         | 12 - MILITARY                                     | 17 - MOWING   | 99 - OTHER / UNKNOWN                                  | 8 6 3 4   | 8 6 5 4  |  |  |
| SPECIAL            | 3 - ELECTRONIC RIDE SHARING                              |   | 13 - POLICE                                       | 18 - SNOW REMOVAL                                   |   | 7 6 5   | 7 6 5  |  |  |
| FUNCTION           | 4 - SCHOOL TRANSPORT<br>5 - BUS - TRANSIT/COMMUTER       | 9 - BUS - OTHER                             | 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT   | 19-TOWING   |   | ě   | š  |  |  |
|                    |  |   |   |   |   |   | 12 12 12   |  |  |
| 0.1                | 1 - NO CARGO BODY TYPE<br>/ NOT APPLICABLE               | 3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE    | 5 - INTERMODAL CONTAINER<br>CHASSIS               | 8 - POLE<br>9 - CARGOTANK                           | 12 - CONCRETE MIXER 13 - AUTOTRANSPORTER              | 12  | 1 1 =  |  |  |
| CARGO              | 2 - BUS  | 4 - LOGGING                                 | /   | 10-FLAT BED   | 14-GARBAGE/REFUSE                                     | Mo  |  |  |  |
| BODY<br>TYPE       |  |   | 7 - GRAIN/CHIPS/GRAVEL                            | 11-DUNP   | 99-OTHER/UNKNOWN                                      | 9 0 3 9   | 3 9 7 3 9 8 3  |  |  |
| 100500000          | 3. THEN CICHAL C   | 4 0041/50                                   | 7 WARN OR CLICATIONS                              | O MOTOR TROUPLE                                     | OO OTHER CHRISTIANS                                   |   | 7  |  |  |
|                    | 1 - TURN SIGNALS<br>2 - HEAD LAMPS                       | 4 - BRAKES<br>5 - STEERING                  | 7 - WORN OR SLICKTIRES<br>B - TRAILER EQUIPMENT   | 9 - MOTOR TROUBLE<br>10-DISABLED FROM PRIOR         | 99 - OTHER / UNKNOWN                                  | 6   |  |  |  |
|                    | 3 - TAIL LAMPS   | 6 - TIRE BLOWOUT                            | DEFECTIVE   | ACCIDENT  |   |   | 6 6 6  |  |  |
|                    |  |   | 300 000 000 000 000 000 000 000 000 000           |   |   | - NO DAMAGE [   | UNDERCARRIAGE [14]   |  |  |
|                    | 1 - INTERSECTION - MARKED<br>CROSSWALK                   | 3 - INTERSECTION - OTHER                    | 6 - BICYCLE LANE                                  | 9 - MEDIAN/CROSSING ISLAND                          | 12 - FIRST RESPONDER<br>AT INCIDENT SCENE             | □-TOP [13]  | - ALL AREAS [ 15 ]   |  |  |
| NON-MOTORIST       | 2 - INTERSECTION - UNMARKED                              | 4 - MIDBLOCK - MARKED<br>CROSSWALK          | 7 - SHOULDER / ROADSIDE<br>B - SIDEWALK           | 10 - DRIVEWAY ACCESS<br>11 - SHARED USE PATHS OR    | 99 - OTHER / UNKNOWN                                  | □-10P [13]  |  |  |  |
| AT IMPACT          | CROSSWALK  | 5 -TRAVEL LANE - OTHER LOCATION             | U - SIVE HALK                                     | TRAILS  |   | - UNIT  | NOTAT SCENE [16]   |  |  |
| AT IMPRO           | 1-NON-CONTACT  | 1 - STRAIGHT AHEAD                          | 7 - MAKING U-TURN                                 | 13 - NEGOTIATING A CURVE                            | 18-APPROACHING  |   |  |  |  |
|                    | 2 - NON-COLLISION  | 2 - BACKING                                 |   | 14 - ENTERING OR CROSSING                           | OR LEAVING VEHICLE                                    |   | POINT OF CONTACT   |  |  |
| 3                  |  | 3 - CHANGING LANES                          | 9 - LEAVING TRAFFIC LANE                          | SPECIFIED LOCATION                                  | 19-STANDING   | 0 - NO DAMAGE   | 14 - UNDERCARRIAGE O UNIT 15 - VEHICLE NOT AT SCENE  |  |  |
| ACTION             | 4 - STRUCK PRE-CRASH                                     | 4 - OVERTAKING/PASSING                      | 10 - PARKED                                       | 15 - WALKING, RUNNING,<br>JOGGING, PLAYING          | 20 - OTHER NON-MOTORIST                               | 1-12 - REFERT   |  |  |  |
|                    | 5 - BOTH STRIKING ACTIONS<br>& STRUCK                    | 5 - MAKING RIGHT TURN                       | 11 - SLOWING OR STOPPED                           | 16 - WORKING  | 21 - STANDING OUTSIDE<br>DISABLED VEHICLE             | 13-T0P  | 99 - OIEMICOWIE  |  |  |
|                    | 9 - OTHER / UNKNOWN                                      | 6 - MAKING LEFT TURN                        | III THAIL IV                                      | 17 - PUSHING VEHICLE                                | 99 - OTHER / UNKNOWN                                  |   |  |  |  |
|                    | Vincential I   | 7 - LEFT OF CENTER                          |   | 11 VICION OPERAUSTICAL                              | OT LIVING IN DOLLDWIN                                 |   | TRAFFIC  |  |  |
|                    | 1 - NONE<br>2 - FAILURE TO YIELD                         | 8 - FOLLOWING TOO CLOSE / ACDA              | DADVED DOCITION                                   | 17 - VISION OBSTRUCTION<br>18 - OPERATING DEFECTIVE | 21 - LYING IN ROADWAY<br>22 - NOT DISCERNIBLE         | TRAFFICWAY FLOW                                       | TRAFFIC CONTROL  |  |  |
| 0.8                | 3 - RAN RED LIGHT  | 9-IMPROPER LANE CHANGE                      | 14 - STOPPED OR PARKED                            | EQUIPMENT   | 23 - OPENING DOOR INTO                                | 1 - ONE-WAY<br>2 - TWO-WAY                            | 1 - ROUNDABOUT 4 - STOP SIGN  6 2 - SIGNAL 5 - YIELD SIGN  |  |  |
|                    | 4 - RAN STOP SIGN  | 10-IMPROPER PASSING                         | ILLEGALLY<br>15 - SWERVING TO AVOID               | 19 - LOAD SHIFTING/FALLING/                         | ROADWAY   | 2 2 - TWO-WAY   | 3 - FLASHER 6 - NO CONTROL   |  |  |
| CONTRIBUTING       |  | 11 - DROVE OFF ROAD                         | 16 - WRONG WAY                                    | SPILLING<br>20 - IMPROPER CROSSING                  | 99 - OTHER IMPROPER ACTION                            | 4   | 35 PM 85 PM 10 3 200 5 1 0 000 6 1 PM 10 10 10 10 10 10 10 10 10 10 10 10 10   |  |  |
|                    | 6-IMPROPERTURN   | 12 - IMPROPER BACKING                       |   | Et Innioi Et Orosonio                               |   | # OF THROUGH LANES<br>ON ROAD                         | RAIL GRADE CROSSING  1 - NOT INVOLVED  |  |  |
| SEQUENCE           | OF EVENTS  |   | NAN 2211-1-1                                      |   |   | 3   | 2 - INVOLVED-ACTIVE CROSSING   |  |  |
| 2.0                | 1 - OVERTURN/ROLLOVER                                    | 6 - EQUIPMENT FAILURE                       | NON-COLLISION<br>11-CROSS CENTERLINE —            | 16-RAILWAY VEHICLE                                  | 22 - WORK ZONE MAINTENANCE                            |   | 3 - INVOLVED-PASSIVE CROSSING  |  |  |
| 1 2 0              | 2 - FIRE/EXPLOSION                                       | 7 - SEPARATION OF UNITS                     | OPPOSITE DIRECTION OF                             | 17 - ANIMAL — FARM                                  | EQUIPMENT   |   |  |  |  |
|                    | 3 - IMMERSION  | 8 - RAN OFF ROAD RIGHT                      | TRAVEL  12 - DOWNHILL RUNAWAY                     | 18-ANIMAL — DEER                                    | 23 - STRUCK BY FALLING,<br>SHIFTING CARGOOR           | UNIT / NON  | -MOTORIST DIRECTION  1 - NORTH 5 - NORTHEAST   |  |  |
| 2                  | 4 - JACKKNIFE  | 9 - RAN OFF ROAD LEFT                       | 13 - OTHER NON-COLLISION                          | 19-ANIMAL — OTHER                                   | ANYTHING SET IN MOTION                                |   | 1 - NORTH 5 - NORTHEAST<br>2 - SOUTH 6 - NORTHWEST   |  |  |
|                    | 5 - CARGO / EQUIPMENT<br>LOSS OR SHIFT                   | 10 - CROSS MEDIAN                           | 14-PEDESTRIAN                                     | 20 - MOTOR VEHICLE IN<br>TRANSPORT                  | BY A MOTOR VEHICLE<br>24 - OTHER MOVABLE OBJECT       | FROM 3 TO   |  |  |  |
| 3                  | Loggon Shir i  |   | 15 - PEDALCYCLE                                   | 21 - PARKED MOTOR VEHICLE                           | 27-VINER MUVABLE UBJEUI                               |   | 4 - WEST 8 - SOUTHWEST   |  |  |
|                    | OF THIS ATTENDANCE                                       |   | WITH FIXED OBJECT                                 |   | FA WARE TAKE  |   | 9 - OTHER / UNKNOWN  |  |  |
| 4                  | 25 - IMPACT ATTENUATOR<br>/ CRASH CUSHION                | 31 - GUARDRAIL END<br>32 - PORTABLE BARRIER | 37 - TRAFFIC SIGN POST<br>38 - OVERHEAD SIGN POST | 43 - CURB<br>44 - DITCH                             | 50 - WORK ZONE MAINTENANCE<br>EQUIPMENT               | UNIT SPEED  | DETECTED SPEED   |  |  |
|                    | 26-BRIDGE OVERHEAD                                       | 33 - MEDIAN CABLE BARRIER                   | 39-LIGHT/LUMINARIES                               | 45 - EMBANKMENT                                     | 51 - WALL   |   | 1 - STATED / ESTIMATED SPEED   |  |  |
| 5                  | STRUCTURE<br>27 - BRIDGE PIER ORABUTMENT                 | 34 - MEDIAN GUARDRAIL                       | SUPPORT   | 46-FENCE  | 52 - BUILDING   | 0 3 5   | Programme and the control of the con |  |  |
|                    | 28-BRIDGE PARAPET  | BARRIER<br>35 - MEDIAN CONCRETE             | 40 - UTILITY POLE<br>41 - OTHER POST, POLE        | 47 - MAILBOX  | 53 - TUNNEL<br>54 - OTHER FIXED OBJECT                | ) <del>(10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 </del> | 2 - CALCULATED / EDR   |  |  |
| 6                  | 29-BRIDGE RAIL   | BARRIER                                     | OR SUPPORT  | 48-TREE<br>49-FIRE HYDRANT                          | 99 - OTHER / UNKNOWN                                  | POSTED SPEED  | 3 - UNDETERMINED   |  |  |
| 200                | 30-GUARDRAIL FACE  | 36 - MEDIAN OTHER BARRIER                   | 42 - CULVERT                                      | 1             |   | 2 5   |  |  |  |
|                    |  | T MOST HA                                   | ARMFUL EVENT                                      |   |   | 4 3   | 1  |  |  |

LOCAL REPORT NUMBER

 $2 \cdot 0 \cdot 2 \cdot 4 \cdot - \cdot 0 \cdot 0 \cdot 0 \cdot 1 \cdot 7 \cdot 7 \cdot 7 \cdot 2$ 

| UNIT #                                     | OWNER NAME: LAST, FIRS                               | T, MIDDLE (X SAME AS DRIVE  | (R)   | REDACTE  | PER ORC 149.43(A)(                          | (i   | DAMAGE  |  |  |  |
|--|--|---|---|--|---|--|---|--|--|--|
|  | KINAITIS, IS   |   | ARD   |  |   | ים   | AMAGE SCALE   |  |  |  |
|  | DDRESS: STREET, CITY, STATE,                         |   | TOWN ,OH 440  | 685  |   | 4 1 - NONE<br>2 - MINOR DAN  | 3 - FUNCTIONAL DAMAGE MAGE 4 - DISABLING DAMAGE                         |  |  |  |
|  | CIAL CARRIER: NAME, ADDR                             |   | 10 1111,011 441   |  | CARRIER PHONE: INCLUDE AREA CODE            | The second secon | - UNKNOWN   |  |  |  |
|  |  | 200,011 1,011112,211  |   | 1 1 1  | DAMAGED AREA(S)                             |  |   |  |  |  |
| LP STATE                                   | LICENSE PLATE #                                      | VEHIC   | LE IDENTIFICATION #   | LE YEAR VEHICLE MAKE                           | INDICATE ALL THAT APPLY                     |  |   |  |  |  |
| 710 (200 000 000 000 000 000 000 000 000 0 | S821272  | 5 Y F B 4 M   | $\mathbf{D}_{1}\mathbf{E}_{1}0_{1}\mathbf{S}_{1}\mathbf{P}_{1}2_{1}2_{1}9_{1}3$ |  | 25 Toyota                                   | 12   | 12  |  |  |  |
|  | NCE INSURANCE COMP                                   | ANY   | INSURANCE POLICY #  |  | LOR VEHICLE MODEL                           | 11 12  | 11 12   |  |  |  |
| X VERIFI                                   | GEICO  | 1   | 6139391277  | BLI  | <b>CAMRY</b>                                | 10 11 1 2  | 10 11 1 2   |  |  |  |
|  | TYPE OF USE  | IN EMERGENCY  | US DOT #  | TOWED BY: C                                    |   | 10 20 -  | 10, 2   |  |  |  |
| COMME                                      | RCIAL GOVERNMENT                                     | IN EMERGENCY RESPONSE   |   | City Servi                                     | ZARDOUS MATERIAL                            |  | 9 3 3   |  |  |  |
| INTER                                      | оск —  | #UCCUPANTS  | VEHICLE WEIGHT GVWR/GCWR<br>1 - ≤10K LBS.                                       | MATER  | AL CLASS # PLACARD ID #                     | 7 5 74   | 7 5 74  |  |  |  |
| LEQUIP                                     | PED HIT/SKIP UNIT                                    | $\begin{bmatrix} 0, 1, \end{bmatrix}$   | 2 - 10,001 - 26K LBS.   | PLACAI   |   | 6  | 12 7 6  |  |  |  |
|  | 1 - PASSENGER CAR                                    | 7 - MOTORCYCLE 2-WHEELED  | 3 - >26K LBS. D 12-GOLF CART  | 18 - LIMO (LIVERY VEHI                         |   | 6 5 11   | 12  |  |  |  |
| 0.1  | 2 - PASSENGER VAN (MINIVAN)                          |   |   | 19-BUS (16+ PASSENG                            |   | 10   | 11 1 2  |  |  |  |
| [0]1                                       | 3 - SPORT UTILITY VEHICLE                            | 9 - AUTOCYCLE   | 14 - SINGLE UNIT TRUCK  | 20 - OTHER VEHICLE                             | 25 - OTHER NON-MOTORIST                     | <u> </u>   | 10 2  |  |  |  |
| UNITTYPE                                   |  | 10 - MOPED OR MOTORIZED<br>BICYCLE  |   | 21 - HEAVY EQUIPMENT                           |   | 9  | 9 3 3   |  |  |  |
|  | 5 - CARGO VAN<br>6 - VAN (9-15 SEATS)                | 11 - ALL TERRAIN VEHICLE  | 16 - FARM EQUIPMENT<br>17 - MOTORHOME   | 22 - ANIMAL WITH RIDE<br>ANIMAL-DRAWN VE       |   | 7.   | 8 5 7   |  |  |  |
|  | 0 - VAN (913 3EATS)                                  | (ATV/UTV)   | 17 - MUTURHUME  |  | 33-014KNOWN 0K H11/2KIP                     | * <  | 6   |  |  |  |
| $\vdash$                                   | # of TRAILING UNITS                                  |   | 2,433,2004,431,000,400  |  |   | 11 12 7  | 6 11 12   |  |  |  |
| 1  | WAS VEHICLE OPERATING IN AU                          |   |   | 3 - CONDITIONAL AUTO                           | MATION 9 - UNKNOWN                          | 10 11 1 2  | 10 11 1 2   |  |  |  |
| . 2  | 1-YES 2-NO 9-OTHER/UNK                               |   | A DADTIAL AUTOMATION  | 4 - HIGH AUTOMATION<br>5 - FULL AUTOMATION     |   | 10 1 2   | 10 2  |  |  |  |
|  | 1-7E3 2-NO 9-UINER/UNKI                              | NOWN AUTONOMOU MODE LEVE  | 13  | 3 - FOLL AUTOMATION                            |   | 9 9 3  | 9 3   |  |  |  |
| 100000                                     | 1 - NONE   | 6 - BUS - CHARTER/TOUR  | 11 - FIRE   | 16-FARM  | 21 - MAIL CARRIER                           | 8 4  | 8 4   |  |  |  |
| 0.1  |  | TAXI 7 - BUS - INTERCITY 12 - MILITARY 17<br>ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18 |   | 17 - MOWING                                    | 99 - OTHER / UNKNOWN                        | 8 7 6 5 4  | 8 7 5 4   |  |  |  |
| SPECIAL                                    | 3 - ELECTRONIC RIDE SHARING                          |   |   | 18 - SNOW REMOVAL                              |   | 7 6 5  | 7 6 5   |  |  |  |
| FUNCTION                                   | 4 - SCHOOL TRANSPORT<br>5 - BUS - TRANSIT/COMMUTER   | 9 - BUS - OTHER<br>10 - AMBIII ANCE   | 14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT                                 | 19-TOWING<br>20-SAFFTY SERVICE P               | ATROI                                       |  | •   |  |  |  |
|  |  |   |   | 8 - POLE                                       | 12 - CONCRETE MIXER                         | -  | 12 12 12  |  |  |  |
| $\lfloor 0 \rfloor 1 \rfloor$              | / NOT APPLICABLE                                     | MOTORVEHICLE  | 0111.0010   | 9 - CARGO TANK                                 | 13 - AUTOTRANSPORTER                        | 12   | ±   |  |  |  |
| CARGO<br>BODY                              | 2 - BUS  | 4 - LOGGING   | / ALDONAUSTINI AASD DAV   | 10-FLAT BED                                    | 14-GARBAGE/REFUSE                           | 8 4 8  | 3 9 3 9 3   |  |  |  |
| TYPE                                       | OD I   |   | 11-DUMP   | 99-OTHER/UNKNOWN                               | 1,00,                                       |  |   |  |  |  |
| 7 7 7                                      | 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICKTIRES 9 |   | 9 - MOTOR TROUBLE   | 99 - OTHER / UNKNOWN                           |   |  |   |  |  |  |
|  |  | 5 - STEERING  |   | 10 - DISABLED FROM PI                          | RIOR  | ***  | 6 6 6   |  |  |  |
| DEFECTS                                    | 3 - TAIL LAMPS                                       | 6 - TIRE BLOWOUT  | DEFECTIVE   | ACCIDENT                                       |   | - NO DAMAGE [  | 0]  |  |  |  |
|  |  | 3 - INTERSECTION - OTHER  | 6 - BICYCLE LANE  | 9 - MEDIAN/CROSSING                            |   |  |   |  |  |  |
| NON MOTODICT                               | CROSSWALK  2 - INTERSECTION - UNMARKED               | 4 - MIDBLOCK - MARKED   |   | 10 - DRIVEWAY ACCESS                           | AT INCIDENT SCENE                           | □-TOP [13]   | - ALL AREAS [ 15 ]  |  |  |  |
| LOCATION                                   | ADACOUNT /   | CROSSWALK  5 -TRAVEL LANE - OTHER LOCAT   |   | 11 - SHARED USE PATH:<br>TRAILS                | OR 99-OTHER/UNKNOWN                         | □-UNIT   | NOT AT SCENE [16]   |  |  |  |
| AT IMPACT                                  |  |   |   | 13 - NEGOTIATING A CU                          | RVE 18-APPROACHING                          |  | a auto 200 militario i a casti estro il tra videno anticio i concentino |  |  |  |
|  |  | 1 - STRAIGHT AHEAD<br>2 - BACKING   |   | 13 - NEGOTIATING A CO<br>14 - ENTERING OR CROS | OD LEMMAN MENDALE                           | 1000 NOVE 1000 N | POINT OF CONTACT  |  |  |  |
| _ 4 _                                      | 3-STRIKING 0 2                                       | 2 - BACKING<br>3 - CHANGING LANES   | 9 - LEAVING TRAFFIC LANE  | SPECIFIED LOCATION                             | 7.10 m = 1                                  | 0 - NO DAMAG   |   |  |  |  |
| ACTION                                     | 4 - SIKULK INC-UNASII                                | 4 - UVERTAKING PASSING  | 10 - PARKED   | 15 - WALKING, RUNNING<br>JOGGING, PLAYING      |   | 0 3 1-12 - REFERT  | M 99 - UNKNOWN  |  |  |  |
|  | 5 - BOTH STRIKING ACTIONS<br>& STRUCK                |   | 11 - SLOWING OR STOPPED<br>INTRAFFIC  | 16 - WORKING                                   | 21 - STANDING OUTSIDE<br>DISABLED VEHICLE   | 13-T0P   | 77 - OWNIOWN  |  |  |  |
|  | 9-OTHER/UNKNOWN                                      | 6 - MAKING LEFT TURN  |   | 17 - PUSHING VEHICLE                           | 99 - OTHER / UNKNOWN                        |  | TRAFFIC   |  |  |  |
|  | 5/16/15/16   | 7 - LEFT OF CENTER  | 700 - 000 SECTION CAREFUL CONTRACT - VI   | 17 - VISION OBSTRUCTI                          | ON 21 -LYING IN ROADWAY                     |  |   |  |  |  |
|  |  | 8 - FOLLOWING TOO CLOSE / A   | CDA PARKED POSITION   | 18 - OPERATING DEFEC                           |   | TRAFFICWAY FLOW  1 - ONE-WAY   | TRAFFIC CONTROL  1 - ROUNDABOUT 4 - STOP SIGN                           |  |  |  |
| 0.2  | 3 - RAN RED LIGHT                                    | 9-IMPROPER LANE CHANGE  | 14 - STOPPED OR PARKED  | EQUIPMENT                                      | 23 - OPENING DOOR INTO                      | 2 2 - TWO-WAY  | 6 2 - SIGNAL 5 - YIELD SIGN   |  |  |  |
|  | 4 - RAN STOP SIGN                                    | 10-IMPROPER PASSING   | 15 - SWERVING TO AVOID  | 19 - LOAD SHIFTING/FAI<br>SPILLING             | .LING/ ROADWAY<br>99 -OTHER IMPROPER ACTION |  | 3 - FLASHER 6 - NO CONTROL  |  |  |  |
| CIRCUMSTANCES                              |  | 11 - DROVE OFF ROAD<br>12 - IMPROPER BACKING  | 16 - WRONG WAY  | 20 - IMPROPER CROSSII                          |   | # OF THROUGH LANES   | RAIL GRADE CROSSING   |  |  |  |
| SEQUENCE                                   | OF EVENTS  | 12 - IMP NOT EN DACKING   |   |  |   | ON ROAD  | 1 - NOT INVOLVED  |  |  |  |
| SEGULITOE                                  | OF EVENTS  |   | NON-COLLISION   |  |   | 3  | 1 2 - INVOLVED-ACTIVE CROSSING  |  |  |  |
| 1 2 0                                      |  | 6 - EQUIPMENT FAILURE   | ADDAGINE BIREARIAN AR   | 16 - RAILWAY VEHICLE                           | 22 - WORK ZONE MAINTENANG                   | E  | 3 - INVOLVED-PASSIVE CROSSING   |  |  |  |
|  |  | 7 - SEPARATION OF UNITS   | TRAVEL  | 17 - ANIMAL — FARM<br>18 - ANIMAL — DEER       | EQUIPMENT<br>23 - STRUCK BY FALLING,        | UNIT / NON   | -MOTORIST DIRECTION   |  |  |  |
| 2  |  | 8 - RAN OFF ROAD RIGHT<br>9 - RAN OFF ROAD LEFT   | 12 - DOWNHILL RUNAWAY   | 19-ANIMAL - OTHER                              | SHIFTING CARGO OR<br>ANYTHING SET IN MOTION | R  | 1 - NORTH 5 - NORTHEAST   |  |  |  |
|  | 5 - CARGO / EQUIPMENT                                | 10 - CROSS MEDIAN   | 13 - OTHER NON-COLLISION<br>14 - PEDESTRIAN                                     | 20 - MOTOR VEHICLE IN                          | BY A MOTOR VEHICLE                          |  | 2 - SOUTH 6 - NORTHWEST   |  |  |  |
| 3  | LOSS OR SHIFT  |   | 15 05041 0/01 5   | TRANSPORT<br>21 - PARKED MOTORVE               | 11CLE 24 - OTHER MOVABLE OBJECT             | FROM L 1 TO L  | 4 - WEST 8 - SOUTHWEST  |  |  |  |
|  |  |   | ON WITH FIXED OBJECT  | - STRUCK                                       |   |  | 9 - OTHER / UNKNOWN   |  |  |  |
| 4  | LODIOU QUOULON                                       | 31 - GUARDRAIL END  |   | 43 - CURB<br>44 - DITCH                        | 50 - WORK ZONE MAINTENANG<br>EQUIPMENT      | 200 C 900 C 100 C  | DETECTED CASES  |  |  |  |
|  | 26-BRIDGE OVERHEAD                                   | 32 - PORTABLE BARRIER<br>33 - MEDIAN CABLE BARRIER  |   | 44 - DETCH<br>45 - EMBANKMENT                  | 51 - WALL                                   | UNIT SPEED   | DETECTED SPEED  |  |  |  |
| 5  | CTDIICTHDE   | 34 - MEDIAN GUARDRAIL   | SUPPORT   | 46-FENCE                                       | 52 - BUILDING                               | 0 0 2  | 1 - STATED / ESTIMATED SPEED  |  |  |  |
|  |  | BARRIER<br>35 - MEDIAN CONCRETE   | AT ATHER BOOK BOLE  | 47 - MAILBOX<br>48 - TREE                      | 53 - TUNNEL<br>54 - OTHER FIXED OBJECT      |  | 2 - CALCULATED / EDR  |  |  |  |
| 6  | 29-BRIDGE RAIL                                       | BARRIER   | OR SUPPORT  | 48 - I KEE<br>49 - FIRE HYDRANT                | 99-OTHER / UNKNOWN                          | POSTED SPEED   | 3 - UNDETERMINED  |  |  |  |
| 4  | 30-GUARDRAIL FACE                                    | 36 - MEDIAN OTHER BARRIER   | 42 - CULVERT  |  |   | 2 5  |   |  |  |  |
|  | FIRST HARMFUL EVEN                                   | T L MOST  | HARMFUL EVENT   |  |   |  |   |  |  |  |

| OHIO DE  | PARTMENT IC SAFETY  | OTORIST / NO  | N-M  | отор                          | ICT  |                 |  |  | LOCAL REP  | ORT NUMBI   | ER  |                     |
|--|---|---|--|-------------------------------|--|-----------------|--|--|--|---|---|---------------------|
| SAFETY - MENY  | TOE - PROTECTION  | OTOKISI / INC   | 114 – 1A1  | UIUK                          | 131  |                 |  | 2 0  | 2 4 - 0 0  | $10_{1}1_{1}$   | 7,7,7   | _2                  |
| UNIT#  | NAME: LAST,   | FIRST, MIDDLE   |  |                               |  |                 |  |  | DATE OF BIRTH  |   | AGE   | GENDER              |
| 0,1  | KALL,   | ALEXANDER, N  | MATT   | HEW                           |  |                 |  | 0_2  | $1 \cdot 6 \cdot 1 \cdot 9$  | 9 6   | 2.8   | M                   |
|  | STREET, CITY, ST  | gate,zip<br>GE POINTE DR (  | G105 ,   | Streetsb                      | oro ,OH 442  | 41              |  |  | PHONE - INCLUDE AREA CO<br>ACTED PER   |   | 149.43  | B(A)(1)             |
| INJURIES   | INJURED<br>TAKEN  | EMS AGENCY (NAME)   |  | INJUREDTAKE                   | N TO: MEDICAL FACILITY   | (NAME, CITY)    |  | □DOT-C∘  | SEATING POSITION   | AIR BAG USA   | GE EJECTION   | TRAPPED             |
| Q 4  | BY 1  | Kent Fire   |  |                               |  |                 | USED 0 4   | □MC HE   | LMET 0 1   | 2_  | 1   | _1_                 |
| OL STATE   | OPERATOR I  | ICENSE NUMBER<br>TED PER ORC 450  | 1.1 12   | OFFENSE (                     |  | LOCAL           | OFFENSE DESC   | RIPTION  |  |   | NUMBER  | ·                   |
| OH   | INLUAC  | TED PER ORG 430   | 1.1-12   | 4511.2                        | 1 <b>A</b>   | X               | Assured Clea   |  |  | 27857   |   |                     |
| OL CLASS   | SELECT UP TO 2  | RESTRICTION SELECT  | DIST   | DACTED                        | ALCOHOL / DRUG SUSF  | RIJUANA         | CONDITION  |  | YPE VALUE  |   | PE RESULT   | SELECTUPTO4         |
| . 4 .  |   |   | BY   | 1   6                         |  | KIJUANA         | 6 .  | . 4  | 4   1   7   3  | 1   | 1   |                     |
| UNIT #   | NAME: LAST,   | FIRST, MIDDLE   |  |                               | <b>1</b> .05333550000000000000000000000000000000   |                 |  |  | DATE OF BIRTH  |   | AGE   | GENDER              |
| . 0 . 2 .  | KINAI   | TIS, ISAAC, ED  | WARD   |                               |  |                 |  | 0.7  | 1 3 2 0  | 0.0   | 2.4   | M                   |
|  | STREET, CITY, ST  |   |  |                               |  |                 |  | CONTACT  | PHONE - INCLUDE AREA CO  | 0DE   |   |                     |
| ₹ 3760 I   | EDINBU  | RGH DR ,UNIO  | NTOW   | N,OH                          | 44685  |                 |  | REDA   | ACTED PER  | ORC   | 149.43  | (A)(1) <sub>,</sub> |
| INJURIES   | INJURED<br>TAKEN  | EMS AGENCY (NAME)   |  | INJUREDTAKE                   | N TO: MEDICAL FACILITY   | (NAME, CITY)    |  | DOT-Co   | SEATING POSITION   | AIR BAG USA   | GE EJECTION   | TRAPPED             |
| <u> 5</u>  | BY  |   |  |                               |  |                 | USED 0 4   | <b>Шмс</b> не  |  | 4   | 1   | _1_                 |
| OL STATE   |   | ICENSE NUMBER<br>TED PER ORC 450  | 1.1_12   | OFFENSE (                     |  | LOCAL           | OFFENSE DESC   | RIPTION  |  | Market Dr. Colonia Colonia  | NUMBER  |                     |
| OH   | 2-  |   | 1.1-12   | 4511.4                        | 4  |                 | Right of Way   |  |  | 28576   |   |                     |
| OL CLASS   | SELECT UP TO 2  | RESTRICTION SELECT  | DIST   | RACTED -                      | ALCOHOL / DRUG SUSF  | RIJUANA         | CONDITION  | STATUS T   | YPE VALUE  |   | PE RESULT   | T SELECTUPTO4       |
| . 4  |   |   | BY   | 1                             | OTHER DRUG   | ANDUNA          | 1 .  | 1 1  | 1  | 1   | 1   |                     |
| UNIT#  | NAME: LAST,   | FIRST, MIDDLE   |  |                               | -  |                 |  |  | DATE OF BIRTH  |   | AGE   | GENDER              |
|  |   |   |  |                               |  |                 |  |  | 1 1 1 1  | E E E   |   |                     |
| ADDRESS:   | STREET, CITY, ST  | TATE, ZIP   |  |                               |  |                 |  | CONTACT  | PHONE - INCLUDE AREA CO  | 0DE   |   |                     |
| TOR  |   |   |  |                               |  |                 |  |  |  |   |   |                     |
| INJURIES   | INJURED<br>TAKEN  | EMS AGENCY (NAME)   |  | INJUREDTAKE                   | N TO: MEDICAL FACILITY   | (NAME, CITY)    | SAFETY EQUIPMENT<br>USED   | <b>□</b> рот-с∘                                      |  | AIR BAG USA   | GE EJECTION   | TRAPPED             |
| ON/  | BY  |   |  |                               |  |                 | سا   | Шмс не   | LMET   |   | ـــاٰ   | نــــا              |
| OL STATE   | OPERATOR  | ICENSE NUMBER   |  | OFFENSE (                     | CHARGED  | LOCAL           | OFFENSE DESC   | RIPTION  |  | CITATION  | NUMBER  |                     |
|  |   | RESTRICTION SELECT  | leen   |                               |  |                 |  | AL C   | OHOL TEST  | l Di  | RUG TEST(S  | 1                   |
| ≥ OL CLASS   | SELECT UP TO 2  | RESIRICITON SELECT  |  | RACTED -                      | ALCOHOL / DRUG SUSF  | RIJUANA         | CONDITION  | STATUS T   |  |   | PE RESULT   |                     |
|  | ــالـــا  | ے بے بے   |  | Ē                             | OTHER DRUG   |                 |  |  | _ •  |   | ا ا   | لـــالـــالـــ      |
| -  | RIES  | SEATING POSITION  |  | IR BAG                        | OL CLAS  | s               | OL RESTRIC   |  | DRIVER DISTRACT  | 2000  | TEST STA  | TUS                 |
| 1 - FATAL<br>2 - SUSPECTED   | SERIOUS INJURY  | 1 - FRONT - LEFT SIDE<br>(MOTORCYCLE DRIVER)  | 1 - NOT DEP<br>2 - DEPLOYE                       |                               | 1 - CLASS A<br>2 - CLASS B   |                 | 1 - ALCOHOL INTER<br>2 - CDL INTRASTAT   |  | 1 - NOT DISTRACTED 2 - MANUALLY OPERATING  |   | NONE GIVEN<br>FEST REFUSED  |                     |
| 3 - SUSPECTED  |   | 2 - FRONT - MIDDLE  | 3- DEPLOYE                                       |                               | 3 - CLASS C  |                 | 3 - CORRECTIVE LE  |  | ELECTRONIC COMMUNI<br>DEVICE (TEXTING, TYP   | CATION 3-   | TEST GIVEN, CON   |                     |
| 4 - POSSIBLE IN<br>5 - NO APPAREN  |   | 3 - FRONT - RIGHT SIDE<br>4 - SECOND - LEFT SIDE  | 4 - DEPLOYE<br>5 - NOTAPP                        | D BOTH FRONT /                | SIDE 4 - REGULAR CLASS<br>(OHIO = D)   |                 | 4 - FARMWAIVER<br>5 - EXCEPT CLASS   | A RIIS   | DIALING)   | 4-1   | TEST GIVEN, RES   |                     |
|  |   | (M0TORCYCLE PASSENGER)  5 - SECOND - MIDDLE   |  | MENT UNKNOWN                  | 5 - M/C MOPED ONLY   |                 | 6 - EXCEPT CLASS   |  | 3 - TALKING ON HANDS-FR<br>COMMUNICATION DEVI  | CE 5-1  | TEST GIVEN, RES   | SULTS               |
| 1 - NOT TRANSP   | TAKEN BY<br>PORTED  | 6 - SECOND - RIGHT SIDE   |  |                               | 6 - NO VALID OL  |                 | & CLASS B BUS<br>7 - EXCEPT TRACTO   | R-TRAILER  | 4 - TALKING ON HAND-HEL<br>COMMUNICATION DEVI  | D CF  | LCOHOL TES  | CT TVDE             |
| /TREATED AT  | T SCENE   | 7 - THIRD - LEFT SIDE<br>(MOTORCYCLE SIDE CAR)  | 1 NOTEJE   | ECTION                        | OL ENDORSE<br>H - HAZMAT   | MENT            | 8 - INTERMEDIATE<br>RESTRICTIONS   | LICENSE  | 5 - OTHER ACTIVITY WITH<br>ELECTRONIC DEVICE   | AN  | NONE  | SI IIPE             |
| 3 - POLICE   |   | 8 - THIRD - MIDDLE  | 2- PARTIAL                                       |                               | M - MOTORCYCLE   |                 | 9-LEARNER'S PER  | MIT  | 6 - PASSENGER  |   | BL00D   |                     |
| 9 - OTHER / UNK  | CNOWN   | 9 - THIRD - RIGHT SIDE  | 3-TOTALLY  |                               | P - PASSENGER  |                 | RESTRICTIONS  10 - LIMITED TO DAY  | LIGHT ONLY   | 7 - OTHER DISTRACTION<br>INSIDE THE VEHICLE  |   | URINE<br>BREATH   |                     |
|  |   | In - Preference Perlinn   | 4 MOTADO   |                               | N-TANKER   |                 |  |  | O OTHER DISTRACTION O  |   |   |                     |
| SAFETY E   | QUIPMENT  | 10 - SLEEPER SECTION OF TRUCK CAB   | 4-NOTAPP   | LICABLE                       | Q - MOTOR SCOOTER  |                 | 11 - LIMITED TO EMI  | PLOYMENT   | 8 - OTHER DISTRACTION O  | UTSIDE 5-   | OTHER   |                     |
| 1 - NONE USED  | QUIPMENT  | OF TRUCK CAB  11 - PASSENGER IN OTHER ENCLOSED CARGO AREA   | T  | RAPPED                        | Q - MOTOR SCOOTER R - THREE-WHEEL M  | OTORCYCLE       | 12 - LIMITED - OTHE  | R  | THE VEHICLE 9 - OTHER / UNKNOWN  |   | DRUG TEST   | TYPE                |
| 1 - NONE USED  | QUIPMENT  BELT ONLY USED  | OF TRUCK CAB  11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)  | 1 - NOTTRAI<br>2 - EXTRICA                       | RAPPED PPED TED BY            | Q - MOTOR SCOOTER  |                 | 12 - LIMITED - OTHE<br>13 - MECHANICAL DI<br>(SPECIAL BRAK   | R<br>EVICES<br>ES, HAND                              | THE VEHICLE 9 - OTHER / UNKNOWN  | 1-  | DRUG TEST   | TYPE                |
| 1 - NONE USED<br>2 - SHOULDER E<br>3 - LAP BELT ON<br>4 - SHOULDER 8   | QUIPMENT  BELT ONLY USED  NLY USED  & LAP BELT USED   | OF TRUCK CAB  11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,  | 1 - NOTTRAI<br>2 - EXTRICA                       | RAPPED PPED TED BY ICAL MEANS | Q - MOTOR SCOOTER R - THREE-WHEEL M S - SCHOOL BUS   | ETRAILERS       | 12 - LIMITED – DTHE<br>13 - MECHANICAL DI<br>(SPECIAL BRAK<br>CONTROLS, OR O<br>ADAPTIVE DEVI  | R<br>EVICES<br>ES, HAND<br>THER<br>CES)              | THE VEHICLE 9-OTHER/UNKNOWN  CONDITION 1-APPARENTLY NORMAL   | 1 - 2 - 3 -   | DRUG TEST   | TYPE                |
| 1 - NONE USED 2 - SHOULDER E 3 - LAP BELT ON 4 - SHOULDER 8 5 - CHILD RESTI  | GUIPMENT  BELT ONLY USED  NLY USED  & LAP BELT USED  RAINT SYSTEM –  ACING  | OF TRUCK CAB  11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (MON-TRAILING UNIT, BUS, PICK-UP WITH CAP)  12 - PASSENGER IN UNENCLOSED CARGO AREA  13 - TRAILING UNIT   | 1- NOTTRAI<br>2- EXTRICA<br>MECHAN<br>3- FREED B | RAPPED PPED TED BY ICAL MEANS | Q - MOTOR SCOOTER R - THREE-WHEEL M S - SCHOOL BUS T - DOUBLE & TRIPLI X - TANKER / HAZMA                            | E TRAILERS<br>T | 12 - LIMITED - OTHE<br>13 - MECHANICAL DI<br>(SPECIAL BRAK)<br>CONTROLS, OR O  | R<br>EVICES<br>ES, HAND<br>THER<br>CES)<br>CLES ONLY | THE VEHICLE 9 - OTHER / UNKNOWN  CONDITION 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT   | 1-1<br>2-<br>3-1<br>1 4-0   | DRUG TEST<br>None<br>Blood  | ТҮРЕ                |
| 1 - NONE USED 2 - SHOULDER E 3 - LAP BELT ON 4 - SHOULDER 8 5 - CHILD RESTI  | GUIPMENT  BELT ONLY USED  NLY USED  LAP BELT USED  RAINT SYSTEM -  ACING  RAINT SYSTEM -  | OF TRUCK CAB  11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (MON-TRAILLING UNIT, BUS, PICK-UP WITH CAP)  12 - PASSENGER IN UNENCLOSED CARGO AREA  | 1- NOTTRAI<br>2- EXTRICA<br>MECHAN<br>3- FREED B | RAPPED PPED TED BY ICAL MEANS | Q - MOTOR SCOOTER R - THREE-WHEEL M S - SCHOOL BUS T - DOUBLE & TRIPLI X - TANKER / HAZMA GENDE F - FEMALE           | E TRAILERS<br>T | 12 - LIMITED - OTHE<br>13 - MECHANICAL DI<br>(SPECIAL BRAK<br>CONTROLS, OR O<br>ADAPTIVE DEVI<br>14 - MILITARY VEHICLE<br>AIR BRAKES   | EVICES ES, HAND THER CES) CLES ONLY ES WITHOUT       | THE VEHICLE 9 - OTHER / UNKNOWN  CONDITION 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMEN 3 - EMOTIONAL (E.G., DEPRE ANGRY, DISTURBED)   | 1 2 3 1 4 1 DR  | DRUG TEST NONE BLOOD URINE DTHER  | ESULT(S)            |
| 1 - NONE USED 2 - SHOULDER E 3 - LAP BELT ON 4 - SHOULDER & 5 - CHILD RESTI<br>FORWARD FA 6 - CHILD RESTI<br>REAR FACIN 7 - BOOSTER SE                                   | QUIPMENT  BELT ONLY USED NLY USED RAINT SYSTEM — ACING RAINT SYSTEM — G EAT   | OF TRUCK CAB  11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)  12 - PASSENGER IN UNENCLOSED CARGO AREA  13 - TRAILING UNIT  14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)  15 - NON-MOTORIST | 1- NOTTRAI<br>2- EXTRICA<br>MECHAN<br>3- FREED B | RAPPED PPED TED BY ICAL MEANS | Q - MOTOR SCOOTER R - THREE-WHEEL M S - SCHOOL BUS T - DOUBLE & TRIPLI X - TANKER / HAZMA                            | E TRAILERS<br>T | 12 - LIMITED - OTHE<br>13 - MECHANICAL DI<br>(SPECIAL BRAK<br>CONTROLS, OR O<br>ADAPTIVE DEVI<br>14 - MILITARY VEHIC<br>15 - MOTOR VEHICLE   | EVICES ES, HAND THER CES) CLES ONLY SWITHOUT         | THE VEHICLE 9 - OTHER / UNKNOWN  CONDITION 1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMEN 3 - EMOTIONAL (E.G., DEPRE AGGREY DISTURBED) 4- ILLNESS 5 - FELL ASLEEP, FAINTED,  | 1 2 - 3 4 - ( SSED,  DR 1 - /   | DRUG TEST<br>NONE<br>BLOOD<br>URINE<br>OTHER  | ESULT(S)            |
| 1 - NONE USED 2 - SHOULDER E 3 - LAP BELT ON 4 - SHOULDER & 5 - CHILD RESTI<br>FORWARD FA 6 - CHILD RESTI<br>REAR FACIN  | QUIPMENT  BELT ONLY USED NLY USED & LAP BELT USED RAINT SYSTEM – ACING RAINT SYSTEM – G EAT ED                                    | OF TRUCK CAB  11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)  12 - PASSENGER IN UNENCLOSED CARGO AREA  13 - TRAILING UNIT  14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)                    | 1- NOTTRAI<br>2- EXTRICA<br>MECHAN<br>3- FREED B | RAPPED PPED TED BY ICAL MEANS | Q - MOTOR SCOOTER R - THREE-WHEEL M S - SCHOOL BUS T - DOUBLE & TRIPLI X - TANKER / HAZMA  GENDE F - FEMALE M - MALE | E TRAILERS<br>T | 12 - LIMITED - OTHE 13 - MECHANICAL DI (SPECIAL BRAKL CONTROLS, OR O ADAPTIVE DEVI 14 - MILITARY VEHICLE AIR BRAKES 16 - OUTSIDE MIRRO   | EVICES ES, HAND THER CES) CLES ONLY SWITHOUT         | THE VEHICLE  9 - OTHER / UNKNOWN  1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMEN 3 - EMOTIONAL (E.G., DEPRE AUGRY, DISTURBED)  4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.  | 1-1<br>2-1<br>3-1<br>T 4-1<br>SSED, DR<br>1-7<br>2-1<br>3-1                     | DRUG TEST NONE BLOOD URINE DTHER  MUG TEST RE AMPHETAMINES BARBITURATES BENZODIAZEPIN             | ESULT(S)            |
| 1 - NONE USED 2 - SHOULDER E 3 - LAP BELT ON 4 - SHOULDER 8 5 - CHILD RESTIFORWARD FA 6 - CHILD RESTIREAR FACING 7 - BOOSTER SE 8 - HELMET US 9 - PROTECTIVE (ELBOW, KNE | GUIPMENT  SELT ONLY USED  ALAP BELT USED  RAINT SYSTEM -  ACING  G  EAT  ED  PADSUSED  EES, ETC.)                                 | OF TRUCK CAB  11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)  12 - PASSENGER IN UNENCLOSED CARGO AREA  13 - TRAILING UNIT  14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)  15 - NON-MOTORIST | 1- NOTTRAI<br>2- EXTRICA<br>MECHAN<br>3- FREED B | RAPPED PPED TED BY ICAL MEANS | Q - MOTOR SCOOTER R - THREE-WHEEL M S - SCHOOL BUS T - DOUBLE & TRIPLI X - TANKER / HAZMA  GENDE F - FEMALE M - MALE | E TRAILERS<br>T | 12 - LIMITED - OTHE<br>13 - MECHANICAL DI<br>(SPECIAL BRAK<br>CONTROLS, OR O<br>ADAPTIVE DEVI<br>14 - MILITARY VEHIOL<br>15 - MOTOR VEHICLE<br>AIR BRAKES<br>16 - OUTSIDE MIRRO<br>17 - PROSTHETIC AII | EVICES ES, HAND THER CES) CLES ONLY SWITHOUT         | THE VEHICLE  9 - OTHER / UNKNOWN  CONDITION  1 - APPARENTLY NORMAL  2 - PHYSICAL IMPAIRMEN'  3 - EMOTIONAL (E.G., DEPRE AUGRY, DISTURBED)  4 - ILLNESS  5 - FELL ASLEEP, FAINTED, FALTIGUED, ETC.  6 - UNDERTHE INFLUENCE OF MEDICATIONS / DRU | 1-1<br>2-1<br>3-1<br>4-0<br>SSSED, DR<br>1-1<br>2-1<br>3-1<br>E 6S 4-1          | DRUG TEST NONE BLOOD URINE OTHER  MG TEST RE AMPHETAMINES BARBITURATES BENZODIAZEPIN CANNABINOIDS | ESULT(S)            |
| 1 - NONE USED 2 - SHOULDER E 3 - LAP BELT ON 4 - SHOULDER 8 5 - CHILD RESTIFORWARD FA 6 - CHILD RESTIREAR FACING 7 - BOOSTER SE 8 - HELMET US 9 - PROTECTIVE             | GUIPMENT  SELT ONLY USED  VLY USED  RAINT SYSTEM—  ACING  RAINT SYSTEM—  G  FAIT  ED  PADSUSED  EES, ETC.)  ECLOTHING  PEDESTRIAN | OF TRUCK CAB  11 - PASSENGER IN OTHER ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)  12 - PASSENGER IN UNENCLOSED CARGO AREA  13 - TRAILING UNIT  14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)  15 - NON-MOTORIST | 1- NOTTRAI<br>2- EXTRICA<br>MECHAN<br>3- FREED B | RAPPED PPED TED BY ICAL MEANS | Q - MOTOR SCOOTER R - THREE-WHEEL M S - SCHOOL BUS T - DOUBLE & TRIPLI X - TANKER / HAZMA  GENDE F - FEMALE M - MALE | E TRAILERS<br>T | 12 - LIMITED - OTHE<br>13 - MECHANICAL DI<br>(SPECIAL BRAK<br>CONTROLS, OR O<br>ADAPTIVE DEVI<br>14 - MILITARY VEHIOL<br>15 - MOTOR VEHICLE<br>AIR BRAKES<br>16 - OUTSIDE MIRRO<br>17 - PROSTHETIC AII | EVICES ES, HAND THER CES) CLES ONLY SWITHOUT         | THE VEHICLE  9 - OTHER / UNKNOWN  1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMEN 3 - EMOTIONAL (E.G., DEPRE AUGRY, DISTURBED)  4 - ILLNESS 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC. 6 - UNDER THE INFLUENCE                                      | 1-1<br>2-1<br>3-1<br>4-0<br>SSSED, DR<br>1<br>2-1<br>3-1<br>E<br>6S 4<br>5<br>6 | DRUG TEST NONE BLOOD URINE DTHER  MUG TEST RE AMPHETAMINES BARBITURATES BENZODIAZEPIN             | ESULT(S)            |

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| Ú                       | OHIO DE  | OCCUPANT / WITNESS ADDENDUM |                              |   |                                 |                   |                                   | LOCAL REPORT NUMBER  2 0 2 4 - 0 0 0 1 7 7 7 2 |                    |                       |             |         |  |
|-------------------------|--|-----------------------------|------------------------------|---|---------------------------------|-------------------|-----------------------------------|--|--------------------|-----------------------|-------------|---------|--|
|                         | UNIT#  | MANE                        | T FIRST MODEL                |   |                                 |                   |                                   |  |                    | <u>U_1_7</u>          |             |         |  |
|                         | [01] FAIVRE, KAYLA, JEAN   |                             |                              |   |                                 |                   | 0 9 2                             | E OF BIRTH                                     | 0 1 1 2            | AGE                   | GENDER<br>F |         |  |
| PANT                    | ADDRESS: STREET, CITY, STATE, ZIP  |                             |                              |   |                                 |                   | CONTACT PHONE                     |  |                    | 40.42                 | (A)(4)      |         |  |
| OCCUPANT                | 24102000 0000  |                             | CHAGRIN I                    | FALLS ,O  | Simo of Franciscourse           | ,                 | LOADETY FAIRDMENT                 | REDACT   |                    |                       |             | ` ' ' ' |  |
|                         | , 4  | INJURED TAKEN BY 1          | EMS AGENCY (NAME)  Kent Fire |   | INJURED TAKEN TO: MEDICAL FACIL | LITY (NAME, CITY) | SAFETY EQUIPMENT USED 0 4         | DOT-COMPLIANT                                  | SEATING POSITION   | AIR BAG USAGE         | EJECTION 1  | 1 1     |  |
| H                       | UNIT#  | NAME: LAS                   | T, FIRST, MIDDLE             |   |                                 |                   |                                   | DAT  | E OF BIRTH         |                       | AGE         | GENDER  |  |
| 01 BRANDT, ALLISON, ANN |  |                             |                              |   |                                 | 0 5 2             | 8   2   0                         | 0 3 2  | 2 1                | F                     |             |         |  |
| OCCUPANT                |  | STREET, CITY,               | 200000000000000              |   |                                 |                   |                                   | REDACT   | - INCLUDE AREA CO  | ORC 1                 | 49 43       | (Δ)(1)  |  |
| 1000                    | The state of the s | PORTA INJURED               | GE POINTE I                  | DR ,Street  | sboro ,OH 44241                 | SAFETY EQUIPMENT  | L                                 | SEATING POSITION                               |                    |                       |             |         |  |
|                         | 2  | TAKEN 2                     | Kent Fire                    | UHPMC  INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)  SAFETY EQUIPMENT  USED  0.1 |                                 |                   |                                   | DOT-COMPLIANT<br>MC HELMET                     | 0 6                | 1                     | 1           | 1       |  |
| 7                       | UNIT#  | NAME: LAS                   | T, FIRST, MIDDLE             |   |                                 |                   |                                   | DAT  | E OF BIRTH         |                       | AGE         | GENDER  |  |
| L                       | س  |                             |                              |   |                                 |                   |                                   |  | 1 1 1              |                       |             | ىسا     |  |
| 0CCUPANT                | ADDRESS:   | STREET, CITY,               | STATE, ZIP                   |   |                                 |                   |                                   | CONTACT PHONE                                  | - INCLUDE AREA CO  | DE                    |             |         |  |
| ၁၁၀                     | INJURIES   | INJURED                     | EMS AGENCY (NAME)            |   | INJURED TAKEN TO: MEDICAL FACIL | LITY (NAME, CITY) | SAFETY EQUIPMENT                  |  | SEATING POSITION   | AIR BAG USAGE         | EJECTION    | TRAPPED |  |
| ì                       |  | TAKEN<br>BY                 |                              |   |                                 |                   | USED                              | DOT-COMPLIANT<br>MC HELMET                     |                    |                       |             |         |  |
|                         | UNIT#  | NAME: LAS                   | T, FIRST, MIDDLE             |   |                                 |                   |                                   | DAT  | E OF BIRTH         |                       | AGE         | GENDER  |  |
| ţ                       |  |                             |                              |   |                                 |                   |                                   | 1 1 1  |                    |                       |             |         |  |
| OCCUPANT                | ADDRESS:   | STREET, CITY,               | STATE, ZIP                   |   |                                 |                   |                                   | CONTACT PHONE                                  | - INCLUDE AREA CO  | DE                    |             |         |  |
| 000                     | INJURIES   | INJURED                     | EMS AGENCY (NAME)            |   | INJURED TAKEN TO: MEDICAL FACIL | LITY (NAME, CITY) | SAFETY EQUIPMENT                  | DOT O  | SEATING POSITION   | AIR BAG USAGE         | EJECTION    | TRAPPED |  |
| 3                       |  | TAKEN<br>BY                 |                              |   |                                 |                   | USED                              | DOT-COMPLIANT<br>MC HELMET                     |                    |                       |             |         |  |
|                         | The state of the s |                             | JRIES                        |   | EQUIPMENT USED                  |                   | SEATING POS                       | ITION  |                    | AIR BAG U             | SAGE        |         |  |
|                         | 1 - FATA   |                             | DIQUE IN HURY                | 1 - NONE US<br>VEHICLE  | ED -<br>OCCUPANT                |                   | IT – LEFT SIDE<br>ORCYCLE DRIV    | ER)  | 1 - NOT DE         |                       |             |         |  |
|                         |  |                             | RIOUS INJURY<br>NOR INJURY   | 2 - SHOULDE   | ER BELT ONLY USED               |                   | IT - MIDDLE                       |  | 3 - DEPLO          | YED FRONT<br>YED SIDE |             |         |  |
|                         | 4 - POSS   | SIBLE INJU                  | RY                           |   | T ONLY USED                     |                   | IT – RIGHT SIDE<br>ND – LEFT SIDI | DE 4 - DEPLOYED BOTH                           |                    |                       |             |         |  |
| Ë                       | 5 - NO A   | PPARENT                     | INJURY                       |   | ER & LAP BELT USED              |                   | ORCYCLE PASS                      | SENGER) FRONT/SIDE<br>5 - NOT APPLICABLE       |                    |                       |             |         |  |
|                         |  | INJURED                     | TAKEN BY                     | <ul> <li>100 (100 (100 (100 (100 (100 (100 (100</li></ul>                           | ESTRAINT SYSTEM –<br>D FACING   |                   | ND - RIGHT SIE                    |  |                    |                       |             |         |  |
|                         |  | TRANSPOR                    |                              | 6 - CHILD RE  | ESTRAINT SYSTEM –               |                   | D – LEFT SIDE<br>ORCYCLE SIDE     |  |                    |                       |             |         |  |
|                         | 2- EMS   |                             |                              | 7 - BOOSTER   | SEAT                            |                   | D - MIDDLE                        | 1 - NOT EJECTED                                |                    |                       |             |         |  |
|                         | 3 - POLI   | ICE                         |                              | 8 - HELMET  | USED                            |                   | D – RIGHT SIDE<br>PER SECTION (   | DE VOFTRUCK CAB 2 - PARTIALLY EJECTED          |                    |                       |             |         |  |
|                         | 9- OTHI  | ER / UNKNO                  |                              |   | TVE PADS USED<br>KNEES, ETC.)   |                   | ENGER IN OTH                      | HER ENCLOSED 3 - TOTALLY EJECTED               |                    |                       |             |         |  |
|                         | F - FEMA   |                             | IDER                         | 10- REFLECT   | TVE CLOTHING                    | BUS, F            | PICK-UP WITH CAR                  | )  | 4 - NOT AP         |                       |             |         |  |
| Ě                       | M - MALI   |                             |                              | 11 - LIGHTIN  | G – PEDESTRIAN<br>E ONLY        |                   | ENGER IN UNE<br>10 AREA           | NCLUSED  | APPED              | PPED PPED             |             |         |  |
| Ē                       | U - OTHER / UNKNOWN 13 - TRAILING UNIT  99 - OTHER / UNKNOWN 14 - RIDING ON VEHICLE EXTE   |                             |                              |   | 2 - EXTRICATED BY MECHANIC      |                   |                                   |  | CAL                |                       |             |         |  |
|                         |  |                             |                              |   |                                 | (NON-             | TRAILING UNIT)                    |  | MEANS<br>3 - FREED | BY NON-ME             | CHANIC      | AL      |  |
|                         |  |                             |                              |   |                                 |                   | R / UNKNOWN                       |  | MEANS              |                       |             |         |  |
| S                       |  | ST, FIRST, MIDD             |                              |   |                                 |                   |                                   | DAT  | E OF BIRTH         |                       | AGE         | GENDER  |  |
| WITNESS                 |  | STREET, CITY,               | SOPHIA<br>STATE ZIP          |   |                                 |                   |                                   | CONTACT PHONE                                  | - INCLUDE AREA CO  | DE L                  |             | F       |  |
| M                       |  |                             | N OAKS DR M                  | Ker, 11123  | nt, ,OH 44240                   |                   |                                   | REDACTI  | ED PER             | ORC 1                 | 49.43       | (A)(1)  |  |
| S                       | NAME: LAS  | ST, FIRST, MIDD             | LE                           |   |                                 |                   |                                   | DAT  | E OF BIRTH         |                       | AGE         | GENDER  |  |
| WITNESS                 | ANDRESS:   | STREET, CITY,               | STATE 71D                    |   |                                 |                   |                                   | CONTACT PHONE                                  | - INCLUDE AREA CO  |                       |             |         |  |
| MI                      | ADDRESS.   | . STREET, GITT,             | SIAIL, ZIF                   |   |                                 |                   |                                   | OUNTAGT FITGILE                                | I I                | I I                   | - 1         | 1 1     |  |
|                         | NAME: LAS  | ST, FIRST, MIDD             | LE                           |   |                                 |                   |                                   | DAT  | E OF BIRTH         |                       | AGE         | GENDER  |  |
| WITNESS                 | ADDRESS  | OTDEST                      | CTATE TIP                    |   |                                 |                   |                                   |  | 1 1 1              |                       |             |         |  |
| LIM                     | AUURESS:   | : STREET, CITY,             | STATE, ZIP                   |   |                                 |                   |                                   | CONTACT PHONE                                  | - INCLUDE AREA CO  | DE.                   |             | 1 1     |  |

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## TRAFFIC CRASH WITNESS STATEMENT

| LOCAL REPORT NUMBER | REPORTING AGENCY | DA | TE OF CRASH |
|---------------------|------------------|----|-------------|
| UITITL              | Derig PIS        | MI | D 69 459    |

| FOR LOCAL USE ONLY – DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES   |
|--|
| I, Sonia Waland HEREBY MAKE THIS VOLUNTARY STATEMENT TO  |
| McNulty 236 AT 7-23 F. Main 54   |
| WALL WALKING LOVE FAST WIN MAIN T SAN XLE COLLIGED UND CONTROL   |
| autobolic discussion while the other was coming It lide to have like   |
| HOLD WILL STATE OF THE WAY IN THE TOTAL TO THE THE   |
| and the special of the part will special from the part of the part |
| That is show and me you don't expect to see people bucking out gots  |
| MENUTY 236  AT 223 E. Ma. n St.  Was writing how East win who I say the collision, one car was backing out of the driving while the other was coming It didn't look to be like they will speeding, just kind at bad luck from Doth ends. This is a tought mad to back and one you don't expect to see people bucking and acts.  There was no clear party at both how my properties lay be traffic light.   |
| Black or broking out white or driving straight.  |
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| SIGNATURE OF WITNESS OF WITNESS OF FOLIAN ONLY TO WITNESS OF WITNE |
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| HSY-7003(4/07  |