OHIO DEPARTMENT TRAFFIC CRASH	LC	CAL REPORT NUMBER	:							
X PHOTOS TAKEN OH-2 OH-3	LOCAL INFORMATION	-		2 + 0 + 2 + 4 + - + 0 + 0 + 0 + 1 + 4 + 0 + 9 + 2 +						
SECONDARY CRASH — 0H-1P U OTHER	REPORTING AGENCY NAME*		NCIC*	HIT/SKIP NUMBER OF UNITS UNIT IN ER						
PRIVATE PROPERTY	City of Kent Police	2	[0,6,7,0,3]	L 2 - UNSOLVED		1 98 - ANIMAL 99 - UNKNOWN				
1-CITY	TY, VILLAGE, TOWNSHIP*			CRASH DATE / TI	- 1-	SH SEVERITY FATAL				
3 - TOWNSHIP	LOCATION ROAD NAME		10.9.1.9.2.0.2.4.1/12.3.4.4    2   2 - SERIOU:   ROAD TYPE   LATITUDE DECIMAL DEGREES   2 - SERIOU:   SUSPEC							
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W. WEST	MIDDLEBURY		$\mathbf{R}_{\perp}\mathbf{D}_{\perp}$	41,15,0,8		MINOR INJURY				
B ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH	REFERENCE ROAD NAME (ROAD	. MILEPOST. HOUSE #)		LONGITUDE DEC		SUSPECTED INJURY POSSIBLE				
S - SOUTH E - EAST	HAYMAKER	,	$\mathbf{P} \cdot \mathbf{K}$	$-8_{1}1_{10}3_{1}6_{1}8_{1}$		PROPERTY DAMAGE				
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD			NTERSECTION RELATED	ONLY				
N-NORTH	- INTERSTATE ROUTE(TP) AL	- ALLEY HW- HIC	GHWAY RD - ROAD	WITHIN INTERSECTION OR ON APPROACH						
3-HOUSE # E-EAST	J-TEDERAL OS ROUTE	/ - AVENUE LA - LAI - BOULEVARD MP - MII	LA - LANE SQ - SQUARE  MP - MILEPOST ST - STREET WITHIN INTERCHANGE AREA NUMBER OF APPR							
	R - NUMBERED COUNTY ROUTE CR	- CIRCLE OV - OV			ROADWAY					
	NUMBERED TOWNSHIP	R - DRIVE PI - PIH		ROADWAY DIVI						
3-YARDS	HE	E - HEIGHTS PL - PL	ACE	KOABWAT BIVI	T					
LOCATION OF FIRST HARMFUL EVE 1 - ON ROADWAY 9 - CROSSOVE		NER OF CRASH COLLISTON 4 - REAR		DIRECTION OF TRAVEL	MEDIAN					
0.1 2-ON SHOULDER 10-DRIVEWA	Y/ALLEY ACCESS 1 BET	TWEEN 5 - BACK	ING	N - NORTH <sub>I</sub> S - SOUTH	1 - DIVIDED F ( <4 FEET	)				
4 - ON ROADSIDE 12-SHARED	VE	HICLES IN 6-ANGL	E GWIPE, SAME DIRECTION	E - EAST W - WEST	2 - DIVIDED F (≥4 FEET					
5-ON GORE TRAILS 6-OUTSIDE TRAFFIC WAY 13-BIKE LAN	2 - REA		SWIPE, OPPOSITE DIRECTION R / UNKNOWN			EPRESSED MEDIAN AISED MEDIAN				
7 - ON RAMP 14-TOLL BOO	тн	7-01112	N / GINNIOWN		(ANY TYPE 9 - OTHER/UN	.)				
G-011 KAWI	WORK ZONE TYPE	L COATION OF OR	ASH IN WORK ZONE	CONTOUR	CONDITIONS	SURFACE				
	- LANE CLOSURE	1 - BEFOR	E THE 1ST WORK ZONE	1 1	1 1	2				
	- LANE SHIFT/CROSSOVER - WORK ON SHOULDER		NG SIGN CE WARNING AREA							
LAW ENFORCEMENT PRESENT	OR MEDIAN		TRANSITION AREA 2 - STRAIGHT GRADE 2 - WET 2 - BLACI							
l <del></del> l	- INTERMITTENT OR MOVING WORK - OTHER		NATION AREA	3 - CURVE LEVEL 3 - SNOW BITUMINO ASPHALT						
LIGHT CONDITION	WEATH	LER			4 - ICE 5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK				
1 - DAYLIGHT	1-CLEAR	6 - SNOW			OIL, GRAVEL	4 - SLAG, GRAVEL, STONE				
2 - DAWN/DUSK 3 - DARK – LIGHTED ROADWAY	1 2 - CLOUDY 3 - FOG, SMOG, SMOK	7 - SEVERE CROSSV E 8 - BLOWING SAND,	NG SAND, SOIL, DIRT, SNOW MOVING)							
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTIN	4 - RAIN G 5 - SLEET, HAIL	9 - FREEZING RAIN 99 - OTHER / UNKNO	ING RAIN OR FREEZING DRIZZLE 7-SLUSH 9-OTHER R/UNKNOWN 9-OTHER/UNKNOWN							
9 - OTHER / UNKNOWN		,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			9-01HER/UNKNOWN					
NARRATIVE					A	Indicate the north				
Unit 1 was traveling from east	to west on Haymaker	•				an "N" on the compass diagram.				
Pkwy. While attempting to tu										
Rd, the driver lost control, rat						(Ž				
		<b>-</b>		CHESTNUTST	ı .	Not To Scale				
of the roadway and was throw	vn from the motorcyc	le.								
		_								
		-		, ,						
				WITT SHIT TO		HAYMAKERPKWY				
				*						
					MIDDLEBURYRD					
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL D		SCENE CLEARED D	l ⊽	POLICE AGENCY				
	1_9_2_0_2_4_/_2_3_4_5_ TAL OFFICER'S NAME*	[0,9,1,9,2,0,2]			1,/,0,0,1,7, \(\text{L}\)	MOTORIST				
TOTAL TIME OTHER TOT ROADWAY CLOSED INVESTIGATION TIME MINI			Short, Ja		늄	SUPPLEMENT				
	OFFICER'S BA	ADGE NUMBER*	,	BY OFFICER'S BADGE N	UMBER*	(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO COPS)				
in n n in 3 n i n <i>i</i>	5.21.2.2.2.2		1 2 2	×	ı					

LOCAL REPORT NUMBER

2 0 2 4 - 0 0 0 1 4 0 9 2

UNIT # OWNER NAME: LAST, FIRST, MIDDLE (X) SAME AS DRIVER)  UNIT # OWNER NAME: LAST, FIRST, MIDDLE (X) SAME AS DRIVER)  MITCHELL, DAVID, WALTER		UDE AREA CODE ( SAME AS DRIVER) RC 149.43 (A)(1)(mm							
OWNER ADDRESS: STREET, CITY, STATE, ZIP (X) SAME AS DRIVER)	12119 (1)(1)(1)	1 - NONE	3 - FUNCTIONAL DAMAGE						
780 AKRON BLVD ,Kent ,OH 44240  COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP	COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN						
			J DAMAGED AREA(S) INDICATE ALL THAT APPLY						
$ \begin{array}{c c} \textbf{LP STATE} & \textbf{LICENSE PLATE \#} \\ \textbf{O}_{1} \textbf{H}_{1} \textbf{LVF33} & \textbf{1}_{1} \textbf{HD1}_{1} \textbf{GP}_{1} \textbf{M1}_{1} \textbf{8}_{1} \textbf{D}_{1} \textbf{G3}_{1} \textbf{1}_{1} \textbf{9} \\ \end{array} $	0 TT								
INSURANCE COMPANY INSURANCE POLICY #	COLOR	VEHICLE MODEL	11 12	11 12 1					
L VERIFIED TYPE OF USE US DOT #	BLK TOWED BY: COMPANY	DYNA WID	E GLIDE 1 2	10 11 1 2					
COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE	City Service		9 9 3 3	9 9 3					
INTERLOCK #OCCUPANTS VEHICLE WEIGHT GVWR/GCWR  1 - <10K Lbs.	MATERIAL	HAZARDOUS MATERIAL MATERIAL CLASS # PLACARD ID # RELEASED		8 4 7					
$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$	S. PLACARD		7 6 5	12 7 6 5					
1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE	18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS)	23 - PEDESTRIAN / SKATER 24 - Wheelchair (any type)	6 11	12					
3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK	20-OTHER VEHICLE	25 - OTHER NON-MOTORIST	<u>/</u>	10 2					
UNIT TYPE         4 - PICK UP         10 - MOPED OR MOTORIZED         15 - SEMI-TRACTOR           5 - CARGO VAN         BICYCLE         16 - FARM EQUIPMENT	21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR	26 - BICYCLE 27 - Train	9 3 3						
6 - VAN (9-15 SEATS) 11 - ALL TERRAIN VEHICLE 17 - MOTORHOME (ATV / UTV) 17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8 7 5 4						
(ATV/UTV)  WAS VEHICLE OPERATING IN AUTONOMOUS  WAS VEHICLE OPERATING IN AUTONOMOUS  O - NO AUTOMATION  A DE WHEN CRASH OCCURRED?  O 1 - DRIVER ASSISTANCE			11 12 7	5 11 12					
<b>1 U</b>	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION	9 - UNKNOWN	10 1 2	10 11 1 2					
2 1-YES 2-NO 9-OTHER/UNKNOWN AUTONOMOUS 2-PARTIAL AUTOMATION MODE LEVEL	5 - FULL AUTOMATION		9 9 3 3	9 2 3 3					
1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE	16-FARM	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	8 4 5	8 4 7					
O 1 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY  SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE	17 - MOWING 18 - Snow Removal	99-UTHER/UNKNOWN	7 6 5	7 6 5					
FUNCTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY	19-TOWING T 20-SAFETY SERVICE PATROL		6	6					
1 NO CADCO BODYTYDE 2 VEHICLETOWING ANOTHER 5 INTERMODAL CONTAINED	8 - POLE	12 - CONCRETE MIXER	12	12 12 12					
O 1 1 NOTAPPLICABLE MOTOR VEHICLE CHASSIS  CARGO 2 - BUS 4 - LOGGING 6 - CARGO VANIENCLOSED BOX	9 - CARGOTANK 10-Flat bed	13 - AUTOTRANSPORTER 14 - GARBAGE/REFUSE							
BODY TYPE 7 - GRAIN/CHIPS/GRAVEL	11 - DUMP	99 - OTHER / UNKNOWN	9 6 2	3 9 3 3					
1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICKTIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	6 0						
VEHTCLE 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT DEFECTS 3 - TAIL LAMPS 6 - TIRE BLOWOUT DEFECTIVE	10-DISABLED FROM PRIOR Accident			6 6 6					
1 - INTERSECTION - MARKED 3 - INTERSECTION - OTHER 6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12 - FIRST RESPONDER	O DAMAGE [0] O UNDERCARRIAGE [14]						
CROSSWALK 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE  NON-MOTORIST 2 - INTERSECTION - UNMARKED CROSSWALK 8 - SIDEWALK  LOCATION CROSSWALK	10 - DRIVEWAY ACCESS 11 - Shared USE Paths or	AT INCIDENT SCENE 99 - OTHER / UNKNOWN	☐-TOP [13]						
AT IMPACT 5 - TRAVEL LANE - OTHER LOCATION	TRAILS		UNIT NOT AT SCENE [16]						
1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE	13 - NEGOTIATING A CURVE 14 - Entering or Crossing	18 - APPROACHING OR LEAVING VEHICLE	INITIAL 0 - NO DAMAGE	POINT OF CONTACT  14 - UNDERCARRIAGE					
2 3-STRIKING U 6 3-CHANGING LANES 9-LEAVING TRAFFIC LANE ACTION 4-STRUCK PRE-CRASH 4-OVERTAKING/PASSING 10-PARKED	SPECIFIED LOCATION 15-WALKING, RUNNING,	19-STANDING 20-OTHER NON-MOTORIST	0 2 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE						
5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN 11 - SLOWING OR STOPPED	JOGGING, PLAYING 16-WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE	DIAGRAI 13 - TOP	M 99 - UNKNOWN					
& STRUCK 6 - MAKING LEFTTURN IN TRAFFIC 9 - OTHER / UNKNOWN 12 - DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN	TRAFFIC						
1 - NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A 2 - FAILURETO YIELD 8 - FOLLOWING TOO CLOSE / ACDA PARKED POSITION	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL					
14-STOPPED OR PARKED	EQUIPMENT	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO	1 - ONE-WAY 2 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN					
CONTRIBUTING F. LINCASE CORES 13 - DROVE OF SPAN 15 - SWERVING TO AVOID	19-LOAD SHIFTING/FALLING/ SPILLING	ROADWAY 99 - OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL					
6-IMPROPERTURN 12-IMPROPER BACKING	20 - IMPROPER CROSSING		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING  1 - NOT INVOLVED					
				1 2 - INVOLVED-ACTIVE CROSSING					
1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE — OPPOSITE DIRECTION OF UNITS 11 - CROSS CENTERLINE — OPPOSITE DIRECTION OF	16-RAILWAY VEHICLE 17-ANIMAL — FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT		3 - INVOLVED-PASSIVE CROSSING					
3 - IMMERSION 8 - RAN OFF ROAD RIGHT 12-DOWNHILL RUNAWAY	18-ANIMAL — DEER 19-ANIMAL — OTHER	23 - STRUCK BY FALLING, SHIFTING CARGO OR	UNIT / NON-MOTORIST DIRECTION  1 - NORTH 5 - NORTHEAST						
2 L J 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 13 - OTHER NON-COLLISION 5 - CARGO / EQUIPMENT 10 - CROSS MEDIAN 14 - PEDESTRIAN	20 - MOTOR VEHICLE IN TRANSPORT	ANYTHING SET IN MOTION BY A MOTOR VEHICLE	FROM 3 TO 2 3-SOUTH 6-NORTHWEST						
LOSS OR SHIFT 15 - PEDALCYCLE	21 - PARKED MOTOR VEHICLE	24 - OTHER MOVABLE OBJECT	4 - WEST 8 - SOUTHWEST						
COLLISION WITH FIXED OBJEC  25-IMPACT ATTENUATOR 31-GUARDRAIL END 37-TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE EQUIPMENT		9 - OTHER / UNKNOWN					
/ CRASH CUSHION 32 - PORTABLE BARRIER 3B - OVERHEAD SIGN POST 26 - SERIOGE OVERHEAD 33 - MEDIAN CABLE BARRIER 39 - LIGHT / LUMINARIES	44 - DITCH 45 - EMBANKMENT	51 - WALL	UNIT SPEED	DETECTED SPEED  1 - STATED / ESTIMATED SPEED					
STRUCTURE 34-MEDIAN GUARDRAIL SUPPORT 5	46 - FENCE 47 - MAILBOX	52 - BUILDING 53 - TUNNEL	0,3,0	2 - CALCULATED / EDR					
28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 61 29 - BRIDGE RAIL BARRIER OR SUPPORT	48-TREE 49-FIRE HYDRANT	54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED					
30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42 - CULVERT	TATILLE IT PRAIT								
HSY8304 OH1U 1/19 [760-0820]	***************************************		3 5	PAGE 2 0F 3					

OF DEDICATION MOTORIST / NON-MOTORIST  MOTORIST / NON-MOTORIST						LUCAL REPORT NUMBER											
							(2 + 0 + 2 + 4 + - + 0 + 0 + 0 + 1 + 4 + 0 + 9 + 2 + - +     DATE OF BIRTH   AGE   GENDER										
	UNIT #																
ST		MITCHELL, DAVID, WALTER  S: Street, City, State, Zip							0 2 2 0 1 9 8 1 43 M								
ĬΘ	780 AKRON BLVD ,Kent ,OH 44240									Redacted per QRC 149.43 (A)(1)(mm)							
OM-		INJURED	EMS AGENCY (NAME)		INJURED T	AKEN TO:	: MEDICAL FACILITY	(NAME, CITY)		T SEATING POSITION AIR DAG HEACE EXECTION TRADECT							
NON-M	2	TAKEN 2	Kent Fire		UHP	MC			USED 0 1	DOT-COMPLIANT 0 1			. 5	;	3	1 1	
IST /	OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	NSE CHARGED LOCAL		OFFENSE DESC	RIPTION			CITAT	ION NU	MBER			
OTOR	$O_H$	Redact	ted per ORC 450	1:1-12	4511.	.202	202 CODE		Failure to Con	ntrol			27815				
Σ	OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DIS	VER TRACTED	_	DHOL / DRUG SUSPE		CONDITION	STATUS	TYPE		STATUS	DRUG Type	RESULT	SELECT UP TO 4	
	. 3	$\mathbf{M}_{11}$	0,9,0,8,	BY	1	=	THER DRUG	KIJUANA	1	1	. 1		1	1			
	UNIT #	NAME: LAST,									D/	ATE OF BIRTH			AGE	GENDER	
	ــــــــــــــــــــــــــــــــــــــ										<u> </u>						
IST	ADDRESS:	STREET, CITY, ST	FATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
OTO																	
NON-MOTOR	INJURIES	TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO	: MEDICAL FACILITY	MEDICAL FACILITY (NAME, CITY) SAFETY EQUUSED			DOT-COMPLIANT MC HELMET		N AIR BAG USAGE EJECTION TRAPPED				
J N	OL STATE	BY	LICENSE NUMBER		OFFENS	E CHAE	OCED.	LOCAL	OFFENSE DESC					CITATION NUMBER			
ORIS	OL STATE	OFERAIUR L	TOURSE NUMBER		OFFENS	, COTAL	IVED	CODE	OFFERSE DESC				CITAL				
MOT	OL CLASS	ENDORSEMENT	RESTRICTION SELECT		VER	ALCO	OHOL / DRUG SUSPE	CTED	CONDITION		LCOHO		DRUG TEST(S)				
		SELECT UP TO 2		BY	TRACTED	ALCOHOL MARIJUANA				STATUS TYPE VALUE			STATUS	TYPE	RESULI	SELECT UPTO 4	
							OTHER DRUG			<u> </u>			Ш				
	UNIT #	NAME: LAST,	FIRST, MIDDLE							DATE OF BIRTH AGE GENDE							
Z ADDRESS: STREET, CITY, STATE, ZIP  CONTACT PHONE - INCLUDE AREA CODE																	
OTORIS	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5111 <u>2</u> 21, 511 1, 51								J		L - INCLUDE AREA	LODE				
	INJURIES		EMS AGENCY (NAME)		INJURED T	AKEN TO	: MEDICAL FACILITY	(NAME, CITY)			DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED						
M-NON/		TAKEN BY					CHARGED LOCAL		USED	MC HELMET		_					
RIST	OL STATE	OPERATOR L	LICENSE NUMBER		OFFENS	SE CHAF			OFFENSE DESC			CITATION NUMBER					
10T0										ALCOHOL TEST			DRUG TEST(S)				
2	OL CLASS	SELECT UP TO 2	RESTRICTION SELECT	TUPTO3 DRI DIS BY	TRACTED		DHOL / DRUG SUSPECTED CONDITION								TYPE RESULT SELECT		
						☐ o1	THER DRUG		 			•				لــالـــا	
	Mark Residence	RIES	SEATING POSITION	# Township of the h	IR BAG				A CONTROL OF THE RESIDENCE	CTION(S) DRIVER DISTRA			processing of regular to a process of the process o			TUS	
1	L - FATAL 2 - Suspected	SERIOUS INJURY	1 - FRONT – LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEF 2 - DEPLOY	진짜하다 하는 사람이 되었다. [10] 사람이 되었으면 하는 것이 없는 것이 없는 것이 없다.			1 - ALCOHOL INTER 2 - CDL INTRASTAT	강경 다른 사람들은 그렇게 보면 얼마 얼마 얼마를 가지 않는데 없다.					1 - NONE GIVEN 2 - Test refused			
2 FRONT DIGHT CIDE					LOYED SIDE 3 - CLASS C			3 - CORRECTIVE LE	DEVICE (TEXTING, TYPING,				GIVEN, CON LE/UNUSA	TAMINATED			
5 NO APPARENT INJURY 4 - SECOND - LEFT SIDE 5 NO				4 - DEPLOY 5 - NOT APP	ED BOTH FROI PLICABLE	NI/SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER 5 - EXCEPT CLASS	A BUS		DIALING) Falking on Hands-F	REE	4 -TEST	GIVEN, RES	ULTS KNOWN	
INJURED TAKEN BY  5 - SECOND - MIDDLE  9 - DEPLOYMENT						E MIC HODED ONLY			A COMMUNICATION DEV			/ICE	5 - TEST	GIVEN, RES OWN	ULTS		
100	1 - NOTTRANSPORTED 6 - SECOND - RIGHT SIDE 7 - EXCEPTION OF ENDORSEMENT						7 - EXCEPT TRACTO	ALCOHOL TEST TY						ST TYPE			
2 - EMS (MOTORCYCLE SIDE CAR) 1 - NOT			1 - NOT EJE	O-INTERNI			8 - INTERMEDIATE RESTRICTIONS				CE 1 - NONE						
O THIRD DICHT CIDE							9 - LEARNER'S PER RESTRICTIONS	RMIT		PASSENGER OTHER DISTRACTION		2 - BL001 3 - URINE					
10 - SLEEPER SECTION 4 - NOT A			4 - NOT APP	PLICABLE N-TANKER			10 - LIMITED TO DAY	AYLIGHT ONLY INSIDE THE VEHICLE 4 - BREATH									
1. MOME HISED 11 - PASSENGER IN OTHER TRAPPED 12. LIMITED						11 - LIMITED TO EMI 12 - LIMITED - OTHE			THE VEHICLE	OUTSIDE	5-OTHE						
aton maleino otti, boo,			1 - NOTTRA	APPED S - SCHOOL BUS 13 - MECHANI			13 - MECHANICAL DI	AL DEVICES 9-OTHER/UNKNOWN DRUG TES RAKES, HAND 1-NONE					A STATE OF THE PARTY OF THE PAR	TYPE			
3 - LAP BELT ONLY USED PICK-UP WITH CAP) 4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED		MECHANICAL MEANS		T - DOUBLE & TRIPLE		CONTROLS, OR O	OTHER CONDITION		2 - BL00D								
5 - CHILD RESTRAINT SYSTEM – CARGO AREA FORWARD FACING 13 - TRAILING UNIT		CARGO AREA 13 - TRAILING UNIT	3 - FREED BY NON-MECHANICAL MEANS		X - TANKER / HAZMAT		14 - MILITARY VEHICLES ONLY		2 - PHYSICAL IMPAIRMENT			3 - URINE 4 - OTHER					
6 - CHILD RESTRAINT SYSTEM - 14 - RIDING ON VEHICLE EXTERIOR			GENDER F-FEMALE				15 - MOTOR VEHICLE AIR BRAKES	SWITHOUT	ANGRY, DISTURBED)  4 - ILLNESS		RESSED,	DRUG TEST RESULT(S)					
REAR FAOING		15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRRO					1 - AMPHETAMINES				
8 - HELMET USED 99 - OTHER / UNKNOWN		99 - OTHER / UNKNOWN				U - OTHER / UNKNOWN	OTHER / UNKNOWN 17 - PROSTHET) 18 - OTHER			AID 5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.			2 - BARBITURATES 3 - BENZODIAZEPINES		ES		
9 - PROTECTIVE PADS USED (ELBOW, KNEES, ETC.)								6- UNDER THE INFLUENCE OF MEDICATIONS / DRUGS				4 - CANNABINOIDS					
10 - REFLECTIVE CLOTHING 11 - LIGHTING - PEDESTRIAN											5 - COCAINE 6 - OPIATES / OPIOIDS						
/ BICYCLE ONLY											7-OTHER						
19	9-OTHER/UNK	NYYUN												8 - NEGATIVE RESULTS			

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