OHIO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER*								
PHOTOS TAKEN OH-2 OH-3		$2 \cdot 0 \cdot 2 \cdot 5 \cdot - 0 \cdot 0 \cdot 0 \cdot 0 \cdot 0 \cdot 7 \cdot 3 \cdot 1$							
OH-1P OTHER	REPORTING AGENCY NAME*		NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR			
. – – .	City of Kent Police	_0_0	6,7,0,3	1 - SOLVED L 2 - UNSOLVED	$\begin{bmatrix} 0_1 2_1 \end{bmatrix} \begin{bmatrix} 0_1 \end{bmatrix}$	2 98 - ANIMAL 99 - UNKNOWN			
1-CITY	VILLAGE, TOWNSHIP*			CRASH DATE / T	_ 1-	SH SEVERITY FATAL			
6 7 1 2-VILLAGE Kent		0,1,1,8,2,0,2,5,/,1,4,3,3, 2 - SERIOUS INJURY							
2 - SOUTH	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DEC		SUSPECTED MINOR INJURY			
2 3-EAST 2 4-WEST	DEPEYER		$\lfloor S \perp T \rfloor$	411,15,2	6,6,8	SUSPECTED			
2 - SOUTH	REFERENCE ROAD NAME (ROAD, N	MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DEC	554.0150.0490.30198.29014	INJURY POSSIBLE			
3 - EAST 4 - WEST	ERIE		S T	-8 ₁ ,3 ₅ 6	4,4,4	PROPERTY DAMAGE ONLY			
REFERENCE POINT DIRECTION 1-INTERSECTION FROM REFERENCE 1 NORTH IR-	ROUTE TYPE	ROAD TYPE	D DOAD	_	NTERSECTION RELATED	Ŭ.			
2 MILE DOCT 2 COUTH			D - ROAD Q - SQUARE	WITHIN INTER	RSECTION OR ON APPROA	CH			
3-HOUSE # 3-EAST	STATE ROUTE BL -		T - STREET	WITHIN INTER	RCHANGE AREA NUM	BER OF APPROACHES			
DISTANCE DISTANCE CR-	HIMBERED COUNTY ROUTE		E - TERRACE L - TRAIL		ROADWAY				
	ROUTE		/A - WAY	ROADWAY DIV	IDED				
3-YARDS		HEIGHTS PL - PLACE			T				
LOCATION OF FIRST HARMFUL EVENT 1 - ON ROADWAY 9 - CROSSOVER		ER OF CRASH COLLISION/IMPAC OLLISION 4 - REAR-TO-REAR	т	DIRECTION OF TRAVEL		NTYPE LUSH MEDIAN			
0 1 2-ON SHOULDER 10-DRIVEWAY/	1. 6 . TW0 !	MOTOR		1 - NORTH 2 - SOUTH	(<4 FEET)			
3-IN MEDIAN 11-RAILWAY GR 4-ON ROADSIDE 12-SHARED US	ADE CHOSSING WEHIC	CLES IN 6-ANGLE SPORT 7-SIDESWIPE, SAME	DIRECTION	3 - EAST 4 - WEST	2 - DIVIDED F (≥4 FEET	LUSH MEDIAN)			
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	2 - REAR-	HERE I'M		4 - WEST		EPRESSED MEDIAN			
7 - ON RAMP 14-TOLL BOOTH	3 - HEAD	-ON 9 - OTHER / UNKNOW	VIN		(ANY TYPE	E)			
8-OFF RAMP 99-OTHER/UNI	(NOWN	F			9 - OTHER/UN				
WORK ZONE RELATED	WORK ZONE TYPE ANE CLOSURE	1 - BEFORE THE 1ST W		CONTOUR	CONDITIONS	SURFACE			
	ANE SHIFT/CROSSOVER	WARNING SIGN		_1_	_2_				
	/ORK ON SHOULDER R MEDIAN	2 - ADVANCE WARNING 3 - TRANSITION AREA			1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,			
	NTERMITTENT OR MOVING WORK	4 - ACTIVITY AREA				BITUMINOUS, ASPHALT			
	THER	3 - TERMINATION ARE		4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK			
LIGHT CONDITION 1 - DAYLIGHT	WEATHEI 1 - CLEAR	R 6 - SNOW	9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, OIL, GRAVEL			4 - SLAG, GRAVEL, STONE			
1 2 - DAWN/DUSK	7 - SEVERE CROSSWINDS			6 - WATER (STANDING, MOVING)	5 - DIRT				
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	3 - FOG, SMOG, SMOKE	8 - BLOWING SAND, SOIL, DIRT, 9 - FREEZING RAIN OR FREEZING			9 - OTHER/UNKNOWN				
5 - DARK – UNKNOWN ROADWAY LIGHTING	5 - SLEET, HAIL	99 - OTHER / UNKNOWN							
9 - OTHER / UNKNOWN									
NARRATIVE					A	Indicate the north direction with			
UNIT 1 WAS SB ON S. DEPEYS	TER ST.				4	an "N" on the compass diagram.			
APPROACHING E. ERIE ST.	UNIT 2 WAS EB					* * * *			
ON E. ERIE ST. AND COMMI	TTED A STOP				(î	Ž			
				&	Not To	o Scale			
SIGN VIOLATION, FAILING				S.70EPEYSTER ST.					
UNIT 1. UNIT 1 THEN STRUC	CK UNIT 2 IN			1 1					
THE INTERSECTION.		<i>a</i>	E.?ERIE?ST						
				Unit 25					
		N -		-					
				8 8	**				
CRASH REPORTED DATE / TIME	ISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED D		EPORT TAKEN BY			
[0,1,1,8,2,0,2,5]/[1,4,3,3]/[0,1,1]	8,2,0,2,5,/,1,4,3,4,	0,1,1,8,2,0,2,5,/,1,	4,3,6,0	1,1,8,2,0,2,5	5 ₁ / ₁ 1 ₁ 5 ₁ 1 ₁ 9 X	POLICE AGENCY			
TOTAL TIME OTHER TOTAL	OFFICER'S NAME*	Сн	CHECKED BY OFFICER'S NAME*						
ROADWAY CLOSED INVESTIGATION TIME MINUTE	Burton, Samant			er, James	IIMBED*	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)			
0 0 0 0 0 3 0 0 7		40.000.0000.0000.0000.0000.0000.0000.0	2 ₁ 5	5 5	OMBER				

HSY7001 OH1 1/19 [760-0820] PAGE **1** 0F **5**

LP STATE LICENSE PLATE #

1 - PASSENGER CAR

0 1 2 - PASSENGER 3 - SPORT UTILITY VEHICLE

5 - CARGO VAN

1 - NONE

FUNCTION 4 - SCHOOL TRANSPORT

2 - BUS

VEHICLE 2 - HEAD LAMPS

DEFECTS 3 - TAIL LAMPS

3 3-STRIKING

ACTION 4- STRUCK

0 1 2 - TAXI

6 - VAN (9-15 SEATS)

OF TRAILING UNITS

1-YES 2-NO 9-0THER/UNKNOWN

SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE

1 - NO CARGO BODY TYPE

/ NOT APPLICABLE

1 - INTERSECTION - MARKED

1 - TURN SIGNALS

CROSSWALK

CROSSWALK

1 - NON-CONTACT

& STRUCK

1-NONE

CONTRIBUTING 5 - UNSAFE SPEED

SEQUENCE OF EVENTS

9-OTHER/UNKNOWN

2 - FAILURE TO YIELD

3 - RAN RED LIGHT

4 - RAN STOP SIGN

6-IMPROPERTURN

2 - FIRE/EXPLOSION

5 - CARGO / EQUIPMENT

25 - IMPACT ATTENUATOR

/ CRASH CUSHION

26-BRIDGE OVERHEAD

27 - BRIDGE PIER ORABUTMENT

STRUCTURE

28-BRIDGE PARAPET

30 - GUARDRAIL FACE

_ 29-BRIDGE RAIL

LOSS OR SHIFT

3 - IMMERSION

1 2 0 1 - OVERTURNIROLLOVER

2 - NON-COLLISION

NON-MOTORIST 2-INTERSECTION - UNMARKED

5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE

WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED?

O H DIW7379

INTERLOCK DEVICE EQUIPPED

UNITTYPE 4 - PICKUP

2

0.1

CARGO

BODY

TYPE

LOCATION

AT IMPACT

 0_1

	LO	CAL REPORT NUMBER						
	2 0 2 5 - 0 0 0 0 0 7 3 1							
MEA CODE / TOAME AC DOMES		DAMAGE						
ORC 149.43(A)(1)		DAMAGE SCALE						
	1-NONE	3 - FUNCTIONAL DAMAGE						
	4 2-MINOR							
ONE: INCLUDE AREA CODE		9 - UNKNOWN						
		DAMAGED AREA(S) ICATE ALL THAT APPLY						
VEHICLE MAKE	IND	ICATE ALL THAT AFFLI						
Mazda	12	12						
VEHICLE MODEL	11 2	11 12						
MAZDA 6	10 11 1	2 10 11 1 1 2						
ME	10 2	10, 2						
	9 9 3	3 9 9 3						
MATERIAL	0 4 -							
SS # PLACARD ID #	8 7 5	4 8 7 5 4						
11 1 1 1 1	7 6 5	12 7 6						
- PEDESTRIAN / SKATER	6	11 12 6						
-WHEELCHAIR (ANY TYPE)	10 /	11 1 2						
-OTHER NON-MOTORIST	1	10 2						
-BICYCLE	9	9 3 3						
-TRAIN	_	8 11 4 -						
-UNKNOWN OR HIT/SKIP	8	7 3 5 /4						
		6						
	11 12 1	7 6 11 12						
UNKNOWN	12	12						
	10 11 1	2 10 11 1 2						
	10 2 -	10 2						
	9 3	3 9 9 3						
-MAIL CARRIER	8 4 5	7 8 4 7						
-OTHER / UNKNOWN	8 6	8 6 5 4						
	7 5	7 5						
	6	6						
	,	12 12 12						
-CONCRETE MIXER	12							
-AUTOTRANSPORTER	0 0							
-GARBAGE/REFUSE	of A R.	9 4 3 9 1 3 9 1 3						
-OTHER / UNKNOWN	,600,	8						
-OTHER / UNKNOWN	0							
-OTHER? UNKNOWN	6							
		6 6 6						
	☐-NO DAMAG	E[0] - UNDERCARRIAGE [14]						
-FIRST RESPONDER		1.000						
AT INCIDENT SCENE	☐-TOP [13]	- ALL AREAS [15]						
-OTHER / UNKNOWN								
	⊔-w	NIT NOT AT SCENE [16]						
-APPROACHING		YAL DOVINT CONTACT						
OR LEAVING VEHICLE		IAL POINT OF CONTACT						
-STANDING	0-N0 DAM							
-OTHER NON-MOTORIST		ER TO UNIT 15 - VEHICLE NOT AT SCENE						
-STANDING OUTSIDE	13-TOP	99 - UNKNOWN						
-OTHER / UNKNOWN	25-101							
-VIHER/ UNKNOWN		TRAFFIC						
-LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL						
-NOT DISCERNIBLE	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN						
-OPENING DOOR INTO	2 .2 - TWO-WAY							
ROADWAY		6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL						
-OTHER IMPROPER ACTION	# T UDOUS	31 A000 (0.01 S MODES S 0.01 A 0.00 (0.00						
	# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING						
		1 - NOT INVOLVED						
	2	2 - INVOLVED PACELYE CROSSING						
-WORK ZONE MAINTENANCE	S	3 - INVOLVED-PASSIVE CROSSING						
-STRUCK BY FALLING,	IINIT / N	ION-MOTORIST DIRECTION						
SHIFTING CARGOOR	011171	1 - NORTH 5 - NORTHEAST						
ANYTHING SET IN MOTION	5,0445.4	2 - SOUTH 6 - NORTHWEST						
BY A MOTOR VEHICLE	FROM L1 TO							
-OTHER MOVABLE OBJECT	- NOM 10	4 - WEST 8 - SOUTHWEST						
		9 - OTHER / UNKNOWN						
-WORK ZONE MAINTENANCE		1						
EQUIPMENT	HAUT COFFE	DETECTED COFFE						

OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER REDACTED PER OR JOHNSON SABATĪNE, DEBRA, ANN OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER)

6027 GERALD RD ,ASHTABULA ,OH 44004

9 - AUTOCYCLE

BICYCLE

(ATV/UTV)

10 - MOPED OR MOTORIZED

11 - ALL TERRAIN VEHICLE

6 - BUS - CHARTER/TOUR

MOTORVEHICLE

7 - BUS - INTERCITY

9 - BUS - OTHER

4 - LOGGING

4 - BRAKES

5 - STEERING

6 - TIRE BLOWOUT 3 - INTERSECTION - OTHER

4 - MIDBLOCK - MARKED

5 - TRAVEL LANE - OTHER LOCATION

CROSSWALK

1 - STRAIGHT AHEAD

6 - MAKING LEFT TURN

7 - LEFT OF CENTER

8 - FOLLOWING TOO CLOSE / ACDA

9-IMPROPER LANE CHANGE

10-IMPROPER PASSING

12 - IMPROPER BACKING

6 - EQUIPMENT FAILURE

7 - SEPARATION OF UNITS

8 - RAN OFF ROAD RIGHT

9 - RAN OFF ROAD LEFT

10 - CROSS MEDIAN

31 - GUARDRAIL END

32 - PORTABLE BARRIER

34 - MEDIAN GUARDRAIL

35 - MEDIAN CONCRETE

BARRIER

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

33 - MEDIAN CABLE BARRIER

36 - MEDIAN OTHER BARRIER

11 - DROVE OFF ROAD

2 - BACKING

PRE-CRASH 4 - OVERTAKING/PASSING

0 1 3 - CHANGING LANES

5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN

0

MODE LEVEL

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP

VEHICLE IDENTIFICATION # VEHICLE YEAR

 $J_1M1_1GJ_11_1V_15_13_1G1_14_17_19_17_18_13_1$

INSURANCE VERIFIED INSURANCE COMPANY INSURANCE POLICY # PROGRESSIVE 972226991 TYPE OF USE US DOT# COMMERCIAL GOVERNMENT RESPONSE

VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS 1 - ≤10KLBS. HIT/SKIP UNIT 2 - 10.001 - 26K LBS $0_{\perp}1$

J 3 - >26K LBS 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART

17 - MOTORHOME

0 - NO AUTOMATION

AUTONOMOUS 2 - PARTIAL AUTOMATION

11-FIRE

12 - MILITARY

1 - DRIVER ASSISTANCE

7 - GRAIN/CHIPS/GRAVEL

7 - WORN OR SLICK TIRES

8 - TRAILER EQUIPMENT

7 - SHOULDER / ROADSIDE

DEFECTIVE

6 - BICYCLE LANE

7 - MAKING U-TURN

8 - ENTERING TRAFFIC LANE

9 - LEAVING TRAFFIC LANE

11 - SLOWING OR STOPPED

PARKED POSITION

14 - STOPPED OR PARKED

15 - SWERVING TO AVOID

NON-COLLISION

OPPOSITE DIRECTION OF

11 - CROSS CENTERLINE -

12 - DOWNHILL RUNAWAY

13 - OTHER NON-COLLISION

COLLISION WITH FIXED OBJECT - STRUCK

37 - TRAFFIC SIGN POST

38 - OVERHEAD SIGN POST

39-LIGHT/LUMINARIES

41 - OTHER POST, POLE

SUPPORT

40 - UTILITY POLE

OR SUPPORT

42 - CULVERT

ILLEGALLY

16 - WRONG WAY

TRAVEL

14-PEDESTRIAN

15-PEDALCYCLE

INTRAFFIC

12 - DRIVERLESS 13 - IMPROPER START FROM A

B - SIDEWALK

10-PARKED

18 - LIMO (LIVERY VEHICLE) 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13 - SNOWMOBILE 19-BUS (16+ PASSENGERS) 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 16 - FARM EQUIPMENT

26 - BICY 22 - ANIMAL WITH RIDER OR 27 -TRA ANIMAL-DRAWN VEHICLE 99 - UNK

3 - CONDITIONAL AUTOMATION 9 - UNK 4 - HIGH AUTOMATION

COMMERCIAL CARRIER PHONE

2 0 1 6

23 - PED

24-WHE

25-0TH

21 - MAI

99-0TH

12-CON

13-AUT

14-GAR

COLOR

TOWED BY: COMPANY NAME

HAZARDOUS MAT

MATERIAL CLASS #

WHI

City Service

PLACARD

5 - FULL AUTOMATION 16-FARM 17 - MOWING

13 - POLICE 18-SNOW REMOVAL 14 - PUBLIC UTILITY 19-TOWING 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL

3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 8 - POLE CHASSIS 9 - CARGO TANK 6 - CARGO VAN/ENCLOSED BOX

10-FLAT BED 11-DUMP

99-0TH 9 - MOTOR TROUBLE 99-0TH 10-DISABLED FROM PRIOR ACCIDENT

9 - MEDIAN/CROSSING ISLAND 12-FIRS

AT II 10 - DRIVEWAY ACCESS 99-0TH 11 - SHARED USE PATHS OR TRAILS

13 - NEGOTIATING A CURVE 18-APP 14 - ENTERING OR CROSSING SPECIFIED LOCATION 19-STA

15 - WALKING, RUNNING, 20-0TH JOGGING, PLAYING 21 - STAM 16-WORKING DIS

17 - PUSHING VEHICLE 99-0TH 17 - VISION OBSTRUCTION 21 -LVIN

18-OPERATING DEFECTIVE 22 - NOT EQUIPMENT 23-OPE 19 - LOAD SHIFTING/FALLING/ ROA SPILLING

20 - IMPROPER CROSSING

16 - RAILWAY VEHICLE

17 - ANIMAL - FARM

18-ANIMAL - DEER

19-ANIMAL - OTHER

20 - MOTOR VEHICLE IN

21 - PARKED MOTOR VEHICLE

TRANSPORT

45 - EMBANKMENT

49-FIRE HYDRANT

43-CURB

44 - DITCH

46-FENCE

48-TREE

47 - MAILBOX

99-0TH

22 - WOR

23-STR

24-0TH

50 - WOR

51 - WALL

52 - BUILDING

53-TUNNEL

54 - OTHER FIXED OR JECT

99-OTHER/UNKNOWN

UNIT SPEED 0 2 5 POSTED SPEED

2 , 5

DETECTED SPEED 1 - STATED / ESTIMATED SPEED 1 2 - CALCULATED / EDR 3 - UNDETERMINED

HSY8304 OH1U 1/19 [760-0820]

LOCAL REPORT NUMBER

2,0,2,5,-,0,0,0,0,0,7,3,1,

UNIT#	OWNER NAME: LAST, FIRE	ST, MIDDLE (SAME AS DRIVER)		OWNER PHONE: INC.	UDE AIEA CODE (SAMEAS DRIVER) ER ORC 149.43(A)(1)		DAMAGE			
	Z BARWEN, BRADLE 1, JAI			REDACTED PE	R ORC 149.43(A)(1)	DAMAGE SCALE				
	OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER) 32167 SPRINGSIDE LN ,solon ,OH 44139					1 - NONE 3 - FUNCTIONAL DAMAGE 2 - MINOR DAMAGE 4 - DISABLING DAMAGE				
	SPKINGSIDI		H 44139	COMMEDIAL CARRIED	PHONE: INCLUDE AREA CODE	December 1997 and 199	AGE 4 - DISABLING DAMAGE UNKNOWN			
COMMERC	THE TOTAL ORIGINAL ADDRESS, ST. 1, S. A. L. L.					DAMAGED AREA(S)				
LP STATE	LICENSE PLATE #	VEHICLE	IDENTIFICATION #	VEHICLE YE	AR VEHICLE MAKE		E ALL THAT APPLY			
	JMG4071	$J_1F_12_1GP_1A_1B$	3.C3.H9.2.1.1.4	435 201	7 Subaru	12	12			
INSURA VERIFI	INSURANCE COMP	PANY IN	NSURANCE POLICY #	COLOR	VEHICLE MODEL	11 12	11 12			
VERIFI		SIVE 95	55756779	BLK	CROSSTRI	11 1 2	10			
СОММЕ	TYPE OF USE RCIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT#	TOWED BY: COMPAN Bakers Towing		9 9 3 3	9 3 3			
		VE	HICLE WEIGHT GVWR/GCWR		US MATERIAL		- 00-			
INTER	OCK HIT/SKIP UNI	#OCCUPANTS	1 - ≤10KLBS. 2 - 10,001 - 26KLBS	■ RELEASED	CLASS # PLACARD ID #	8 7 5 4	8 7 5 5			
EQUIP	PED —		3 - >26K LBS.	PLACARD	للللك لللك	7 6 5	12 7 5			
	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED		18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER		12			
[0]3	3 - SPORT UTILITY VEHICLE	8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE		19-BUS (16+ PASSENGERS) 20-OTHER VEHICLE	24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST	10/2	10 2			
UNITTYPE	4 - PICKUP	10 - MOPED OR MOTORIZED		21 - HEAVY EQUIPMENT	26-BICYCLE	9	9 3 3			
	5 - CARGO VAN	BICYCLE 11 - ALL TERRAIN VEHICLE	177 - 170 B. 187 B. 187 B. 1	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 -TRAIN	-	8 4			
	6 - VAN (9-15 SEATS)	(ATV/UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	6 4			
	# of TRAILING UNITS					11 12 7	6 11 12			
1	WAS VEHICLE OPERATING IN AU			3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	10 12 2	10 11 12			
, 2	1-YES 2-NO 9-OTHER/UNK			4 - HIGH AUTOMATION 5 - FULL AUTOMATION		10 2	10 2			
	1-1E3 2-NU 7-UINER/UNK	NOWN AUTONOMOUS MODE LEVEL	- LUMBORN LANGERS	J - 1 OLL AUTUMNTION		9 9 3	9 3			
0.1	1 - NONE	6 - BUS - CHARTER/TOUR		16-FARM	21 - MAIL CARRIER	8 4 7	8 4			
[0,1]	2 - TAXI			17 - MOWING	99 - OTHER / UNKNOWN	8 6 3 4	8 6 3 4			
SPECIAL	3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT	9 - BUS - STHER		18-SNOW REMOVAL 19-TOWING		7 6	7 6			
FUNCTION	5 - BUS - TRANSIT/COMMUTER		15 - CONSTRUCTION EQUIPMENT				42 42			
0.1	1 - NO CARGO BODY TYPE	3 - VEHICLE TOWING ANOTHER	5 - INTERMODAL CONTAINER	8 - POLE	12 - CONCRETE MIXER		12 12 12			
	/ NOT APPLICABLE	MOTORVEHICLE		9 - CARGO TANK	13-AUTOTRANSPORTER	a'a r	* •			
BODY	2 - BUS	4 - LOGGING	7 004111/01/100/0041/01	10-FLAT BED	14-GARBAGE/REFUSE	9 8 3 9	Je 3 9 ₩ 3			
TYPE			7 - GIANINGHIP SHINAVEL	11-DUNP	99 - OTHER / UNKNOWN		†			
لـــــا	1 - TURN SIGNALS	4 - BRAKES		9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	6	•			
	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE	10-DISABLED FROM PRIOR ACCIDENT)	6 6 6			
						- NO DAMAGE [0	J - UNDERCARRIAGE [14]			
. F F E	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 [15]			
NON-MOTORIST	2 - INTERSECTION - UNMARKED	CROSSWALK		11 - SHARED USE PATHS OR	99-OTHER / UNKNOWN	<u></u>				
AT IMPACT	CROSSWALK	5 - TRAVEL LANE - OTHER LOCATION		TRAILS		- UNIT	NOT AT SCENE [16]			
	1 - NON-CONTACT	1 - STRAIGHT AHEAD		13 - NEGOTIATING A CURVE	18-APPROACHING OR LEAVING VEHICLE	INITIAL	POINT OF CONTACT			
4		2 - BACKING 3 - CHANGING LANES	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION	19-STANDING	0 - NO DAMAGE	14 - UNDERCARRIAGE			
ACTION	4 - STRUCK PRE-CRASH	4 - OVERTAKING/PASSING		15 - WALKING, RUNNING,	20 - OTHER NON-MOTORIST	0 9 1-12 - REFER TO	UNIT 15 - VEHICLE NOT AT SCENE			
	5 - BOTH STRIKING ACTIONS	5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED	JOGGING, PLAYING 16 - WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE	13-T0P	99 - UNKNOWN			
	& STRUCK 9-OTHER/UNKNOWN	6 - MAKING LEFTTURN	INTRACTIO	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN	. 50 18				
	7.10/2020	7 - LEFT OF CENTER		17 - VISION OBSTRUCTION	21 -LYING IN ROADWAY	A PROPERTY OF A	TRAFFIC CONTROL			
	2 - FAILURE TOYIELD	8 - FOLLOWING TOO CLOSE / ACDA	PARKED POSITION	18-OPERATING DEFECTIVE	22 - NOT DISCERNIBLE	TRAFFICWAY FLOW 1 - ONE-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN			
0.4	3 - RAN RED LIGHT	9-IMPROPER LANE CHANGE	14 - STOPPED OR PARKED ILLEGALLY	EQUIPMENT 19-LOAD SHIFTING/FALLING/	23 - OPENING DOOR INTO ROADWAY	2 .2 - TWO-WAY	4 2 - SIGNAL 5 - YIELD SIGN			
CONTRIBUTING	4 - RAN STOP SIGN	10 - IMPROPER PASSING 11 - DROVE OFF ROAD	15 - SWERVING TO AVOID	SPILLING	99 - OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL			
CIRCUMSTANCES	5 - UNSAFE SPEED 6 - IMPROPERTURN	12 - IMPROPER BACKING	16 - WRONG WAY	20 - IMPROPER CROSSING		# of THROUGH LANES	RAIL GRADE CROSSING			
SEQUENCE	OF EVENTS					ON ROAD	1 - NOT INVOLVED			
2.0	1 - OVERTURNIDALI AVER	4 - FOUIDMENT CAULING	NON-COLLISION 11-CROSS CENTERLINE —	14 DATI WAY VEHICLE	22 WORK TONE MAINTENANCE	2	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING			
1 2 0	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	16-RAILWAY VEHICLE 17-ANIMAL — FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT					
2000 00 00	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	TRAVEL	18-ANIMAL - DEER	23 - STRUCK BY FALLING, SHIFTING CARGOOR	UNIT / NON-	MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST			
2	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	12 OTHER NON COLLISION	19-ANIMAL — OTHER 20-MOTOR VEHICLE IN	ANYTHING SET IN MOTION	N/ED	2 - SOUTH 6 - NORTHWEST			
002	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14 - PEDESTRIAN	TRANSPORT	BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM 4 TO				
3		COLLISION	15-PEDALCYCLE N WITH FIXED OBJECT	21 - PARKED MOTOR VEHICLE			4 - WEST 8 - SOUTHWEST			
a	25 - IMPACT ATTENUATOR	31 - GUARDRAIL END		43-CURB	50 - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN			
91	/ CRASH CUSHION 26-BRIDGE OVERHEAD	32 - PORTABLE BARRIER		44 - DITCH	EQUIPMENT 51 - WALL	UNIT SPEED	DETECTED SPEED			
5	STRUCTURE	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	CUDDART	45 - EMBANKMENT 46 - FENCE	52 - BUILDING	0,1,5,	1 - STATED / ESTIMATED SPEED			
	27 - BRIDGE PIER ORABUTMENT 28 - BRIDGE PARAPET	BARRIER	40 - UTILITY POLE	47 - MAILBOX	53 - TUNNEL	V - V	2 - CALCULATED / EDR			
6	29-BRIDGE RAIL	35 - MEDIAN CONCRETE 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	A) - CINE IL INMINI	000 07 M POTO 8 19 19 19 19 19 19 19 19 19 19 19 19 19	2 5				
_ 1	FIRST HARMFUL EVEN	T MOST H	ARMFUL EVENT			_ 2 _ 5 _				

OFF PUBLIC SAFETY MOTORIST / NON-MOTORIST						LOCAL REPORT NUMBER								
SAFETY - MERVI	ICE - PROTECTION	010K131 / 140) -	1010	K12				2 · 0 ·	2 5 - 0 0	$_{\perp}0_{\perp}0$	0.7.3	3_1	
UNIT#	NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER						
0,1	SABATINE, KYLER, JOSEPH								0 + 7 + 1 + 0 + 2 + 0 + 0 + 4 + 2 + 0 + M					
	RESS: STREET, CITY, STATE, ZIP 27 GERALD RD, ASHTABULA, OH 44004							CONTACT PHONE - INCLUDE AREA CODE REDACTED PER ORC 149.43(A)(1)						
INJURIES								SEATING POSITION AIR BAG USAGE EJECTION TRAPPED						
5	TAKEN BY USED USED 0 4							USED 0 4	DOT-COMPLIANT 0 1 2				1 1 ,	
OL STATE		LICENSE NUMBER		OFFENS	SE CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION			ON NUMBER	-1	
O H	REDAC	REDACTED PER ORC 4501:1-12												
OL CLASS	ENDORSEMEN SELECT UP TO 2			VER TRACTED	_	OHOL / DRUG SUSPE		CONDITION	STATUS T	OHOL TEST YPE VALUE		TYPE RESU	S) LT SELECTUPTO4	
. 4 .			ВУ	1	=	LCOHOL MAF	RIJUANA	. 1 .	1	1	1	1		
UNIT #	NAME: AST	FIRST, MIDDLE			υ۰	THER DRUG				DATE OF BIRTH		AGE	GENDER	
0.2.		IEN, NATHAN, S.	ANFO	RD					. 1 . 0	1	0.4	375,0 -02-5	M	
	STREET, CITY, S								CONTACT	PHONE - INCLUDE AREA CO	0DE			
32167	SPRIN	GSIDE LN ,solon	,OH 4	4139					REDA	ACTED PER	ORC	149.43	3(A)(1)	
INJURIES		EMS AGENCY (NAME)	-		AKEN TO	MEDICAL FACILITY	(NAME, CITY)		DOT-Co	SEATING POSITION	AIR BAG U	SAGE EJECTION	N TRAPPED	
<u>2</u> 5	BY							USED 0 4	Шмс н Е		1	1 1 1		
OL STATE		LICENSE NUMBER TED PER ORC 450	1.1 12	OFFENS		RGED	LOCAL	OFFENSE DESC	RIPTION		Mark Commence Commence	CITATION NUMBER		
OH	7.		1.1-12	331.	19		X	Operation of			2757			
OL CLASS	SELECT UP TO 2		DIS	VER TRACTED	_	COHOL / DRUG SUSPE	E CTED RIJUANA	CONDITION	STATUS T	YPE VALUE		TYPE RESU	LT SELECTUPTO4	
4		1 2 12 1 1 2	BY	1 ,	=	THER DRUG	NUMNA	1 ,	1 1	1	1	1	0 11 2	
UNIT#	NAME: LAST	, FIRST, MIDDLE			_					DATE OF BIRTH		AGE	GENDER	
													نـــا	
ADDRESS:	STREET, CITY, S	STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE					
0											1 1			
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED1	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED	DOT-Co		AIR BAG U	SAGE EJECTION	N TRAPPED	
OL STATE	BY	LICENSE NUMBER		OFFENS	T CUA	RGED LOCAL OFFENSE DESCR			MC HELMET CIT			ATION NUMBER		
ORIS	OPERATOR	LIGENSE NOMBER		OFFER	SE CHAI	CODE			KIP IION	on an order				
OL CLASS	ENDORSEMEN				ALC	OHOL / DRUG SUSPE	ECTED	CONDITION		OHOL TEST		DRUG TEST(
	SELECT UP TO 2		DIS	TRACTED	□ A	LCOHOL MAF	RIJUANA		STATUS	YPE VALUE	STATUS	TYPE RESU	LT SELECTOP 104	
		0513100 000131011		10.044	0	THER DRUG		AL DESTRU						
1 - FATAL	IRIES	1- FRONT - LEFT SIDE	1- NOT DEP	IR BAG	10 3311	1-CLASS A	5	OL RESTRIC 1-ALCOHOL INTER		1 - NOT DISTRACTED	1000	- NONE GIVEN	ATUS	
	SERIOUS INJURY	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2- DEPLOYE			2 - CLASS B		2 - CDL INTRASTAT		2 - MANUALLY OPERATING ELECTRONIC COMMUN	CATION	-TEST REFUSED		
3 - SUSPECTED 4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE	3 - DEPLOYE 4 - DEPLOYE	ED SIDE ED BOTH FRO	NT / SIDE	3 - CLASS C 4 - REGULAR CLASS		3 - CORRECTIVE LE 4 - FARMWAIVER	NSES	DEVICE (TEXTING, TYP DIALING)		- TEST GIVEN, CO SAMPLE / UNU:		
5 - NO APPAREN		4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5-NOTAPP		ICABLE (OHIO = D) 5 - EXCEPT CLASS			A BUS 3 - TALKING ON HANDS-FREE			4 - TEST GIVEN, RESULTS KNOWN 5 - TEST GIVEN, RESULTS			
INJURED	TAKEN BY	5 - SECOND - MIDDLE	9- DEPLOYI	MENT UNKNO	WN	5 - M/C MOPED ONLY 6 - NO VALID OL		6 - EXCEPT CLASS A & CLASS B BUS		4 - TALKING ON HAND-HEL		UNKNOWN	:20L12	
1 - NOT TRANSP /TREATED AT	and the second second	6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	FI	ECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO		COMMUNICATION DEVI	CE	ALCOHOL TE	ST TYPE	
2 - EMS		(M0TORCYCLE SIDE CAR)	1-NOTEJE			H - HAZMAT		8 - INTERMEDIATE RESTRICTIONS	LICENSE	ELECTRONIC DEVICE	1	- NONE - BLOOD		
3 - POLICE 9 - OTHER / UNK	MOWIN	8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE	2 - PARTIAL 3 - TOTALLY	LY EJECTED		M - MOTORCYCLE P - PASSENGER		9 - LEARNER'S PER RESTRICTIONS	MIT	6 - PASSENGER 7 - OTHER DISTRACTION		- URINE		
		10 - SLEEPER SECTION OF TRUCK CAB	4- NOTAPP			N-TANKER		10 - LIMITED TO DAY		INSIDE THE VEHICLE		- BREATH		
1 - NONE USED	QUIPMENT	11 - PASSENGER IN OTHER	T	RAPPED		Q - MOTOR SCOOTER R - THREE-WHEEL MO	TOPOVOLE	11 - LIMITED TO EMI 12 - LIMITED - OTHE		8 - OTHER DISTRACTION O THE VEHICLE) ISINE 5	-OTHER		
2 - SHOULDER B		ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1-NOTTRA			S - SCHOOL BUS	TORGTGLE	13 - MECHANICAL DI (SPECIAL BRAK		9 - OTHER / UNKNOWN	1	- NONE	TTYPE	
3 - LAP BELT ON 4 - SHOULDER &	ILY USED Lap belt used	PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED	2 - EXTRICA MECHAN	ITED BY IICAL MEANS		T - DOUBLE & TRIPLE		CONTROLS, OR O	THER	CONDITION		- BLOOD		
5 - CHILD REST	IILD RESTRAINT SYSTEM - CARGO AREA 3- FREED BY			EANS	X - TANKER / HAZMAT ADAPTIVE DEV 14 - MILITARY VEHI			2 PRITAMENTE NOMINAL			3 - URINE 4 - OTHER			
	RAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR				GENDER F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	S WITHOUT	3 - EMOTIONAL (E.G., DEPRE ANGRY, DISTURBED)	SSED,	.D,		
7 - BOOSTER SE		(NON-TRAILING UNIT) 15 - NON-MOTORIST				M - MALE		16-0UTSIDE MIRRO		4 - ILLNESS	1	1 - AMPHETAMINES		
8 - HELMET US		99 - OTHER / UNKNOWN				U -OTHER / UNKNOWN		17 - PROSTHETIC AII 18 - OTHER		5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.		- BARBITURATES		
9 - PROTECTIVE (ELBOW, KNE								20 771121		6 - UNDERTHE INFLUENCE OF MEDICATIONS / DRUG	4	- CANNABINOIDS		
10 - REFLECTIVE	CLOTHING									/ALCOHOL	5	- COCAINE	Inc	
11 - LIGHTING - F / BICYCLE ON										9-OTHER/UNKNOWN		- OPIATES / OPIO - OTHER	In?	
99 - OTHER / UNK	CNOWN	IOWN										- NEGATIVE RES	ULTS	

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OFFIGURE SAFETY OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER 2 0 2 5 - 0 0 0 0 0 7 3 1							
	T								0,0,0				
UNIT#	UNIT # NAME: LAST, FIRST, MIDDLE							E OF BIRTH		AGE	GENDER		
ADDRESS: STREET, CITY, STATE, ZIP							CONTROL BUONE						
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
TALIUDITE	THURED	JURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT						CLATING DOCITION	L AIR DAC HEACE	LEIEGTION	ITDADDED		
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN 10: MEDICAL FACILI	INJURED TAKEN TO: Medical Facility (NAME, CITY) SAFETY EQUISED		DOT-COMPLIANT MC HELMET	SEATING POSITION	L AIK BAG USAGE	EJECTION	TRAPPED		
UNIT#	NAME: LAST, FIRST, MIDDLE							E OF BIRTH		AGE	GENDER		
								1 1 1					
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE							
INJURIES	INJURED TAKEN BY	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)		SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
UNIT#	NAME-146	T FIRST MIDDLE					DAT	E OF BIRTH		ACE	GENDER		
UNII#	NAME: LAS	T, FIRST, MIDDLE					DAI	E OF BIKIN		AGE	GENDER		
ADDRESS	: STREET, CITY,	STATE ZID					CONTACT PHONE	- INCLUDE AREA CO					
ADDRESS	. or keer, or 1,	STATE, ZIF					CONTACT FIIONE	- INCLUDE AREA CO	DE.				
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	ITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	ВУ						MC HELMET			نـــال			
UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
						5							
ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
										_			
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	ITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	ВУ				,		MC HELMET			رار			
	34	JRIES		Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG U	SAGE			
1 - FATA		DYOUG THE WOL	1 - NONE US VEHICLE	SED - COCCUPANT		IT – LEFT SIDE ORCYCLE DRIV	(FR)						
		RIOUS INJURY	2 - SHOULDE	ER BELT ONLY USED 2 - FRONT - MIDDLE			2 - DEPLOYED FRONT						
240 T VC00000	SIBLE INJU	NOR INJURY	3 - LAP BEL	T ONLY USED 3 - FRONT - RIGHT SIDE									
	PPARENT 1		4 - SHOULDE	ER & LAP BELT USED 4 - SECOND - LEFT SID (MOTORCYCLE PASS			- FRANKINE						
J- 140 A		而是情性是人		ESTRAINT SYSTEM - 5 - SECOND - MIDDLE			5 - NOT APPLICAB			LE			
2 110-		TAKEN BY		D FACING 6 - SECOND - RIGHT SID ESTRAINT SYSTEM - 7 - THIRD - LEFT SIDE			9 - DEPLOYMENT UNKNOWN						
	TRANSPOR EATED AT S		REAR FA	ACING (MOTORCYCLE SIDE			CAR) EJECT			ION			
2- EMS			7 - BOOSTER					1 - NOT EJ	ECTED				
3 - P0L1	ICE		8 - HELMET	T USED 9 - THIRD - RIGHT SIE 10 - SLEEPER SECTION				LLY EJECTED					
9 - OTH	ER / UNKNO	OWN		TIVE PADS USED			HER ENCLOSED 3 - TOTALLY EJECTED						
	GEN	IDER		KNEES, ETC.)		O AREA (NON-TE PICK-UP WITH CAL	RAILING UNIT, 4 - NOT APPLICABLE						
F-FEMA	ALE			TIVE CLOTHING G – PEDESTRIAN		ENGER IN UNE							
M - MAL			/ BICYCL			O AREA LING UNIT	1 - NOTTRAPPED						
U - OTHE	R / UNKNO	WN	99- OTHER /	UNKNOWN		LING ONLI NG ON VEHICLE	EXTERIOR 2 - EXTRICATED BY MECHAN			ECHANIC	CAL		
					(NON-	TRAILING UNIT)	IVICANS			CHANIC	A.I.		
						MOTORIST R / UNKNOWN		MEANS		CHANIC	AL		
	ST, FIRST, MIDD						The same of the sa	E OF BIRTH		AGE	GENDER		
		, TERRENCE	, Р				$0_{\perp}6_{\perp}0_{\perp}$			5 ₁ 8 ₁	M		
COSTELLO, TERRENCE, P ADDRESS: STREET, CITY, STATE, ZIP 5511 MILL ST ,ERIE, ,PA 16509						CONTACT PHONE - INCLUDE AREA CODE REDACTED PER ORC 149.43(A)(1							
			10509				L			AGE			
	ST, FIRST, MIDD	LE					DAI	E OF BIRTH		AGE	GENDER		
ADDRESS: STREET, CITY, STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE L						
710011200	· orneen, orrin	VIII. C, 2.11					- MOLUDE AREA OVUE						
NAME: LAST, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER				
									1 1 1				
ADDRESS	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE						
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