OHIO DEPARTMENT OF PUBLIC SAFETY TRAFFIC CRASH	LOCAL REPORT NUMBER*								
PHOTOS TAKEN OH-2 OH-3		$2 \cdot 0 \cdot 2 \cdot 5 \cdot - \cdot 0 \cdot 0 \cdot 0 \cdot 0 \cdot 1 \cdot 2 \cdot 5 \cdot 1$							
OH-1P OTHER	REPORTING AGENCY NAME* City of Kent Police		NCIC*	HIT/SKIP NUMBER OF UNITS UNIT IN ERR					
PRIVATE PROPERTY	6,7,0,3	2-UNSOLVED UZ UJZ 99-UNKNOWN							
county* Locality* 1-city 6 7 1 2-village Kent		CRASH DATE / TIME* CRASH SEVERITY							
3-TOWNSHIP TOTAL									
2 - SOUTH	LOCATION ROAD NAME MAIN		ROAD TYPE	41,15,3		MINOR INJURY			
T-WEST	REFERENCE ROAD NAME (ROAD, I	MILEPOST. HOUSE #)	S T ROAD TYPE	LONGITUDE DE		SUSPECTED INJURY POSSIBLE			
2 - SOUTH 3 - EAST	PROSPECT		ST	-8 ₁ 1 ₆ 3 ₆ 7 ₁		PROPERTY DAMAGE			
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPE	<u> </u>		INTERSECTION RELATED	ONLY			
1 - INTERSECTION FROM REFERENCE 1 - NORTH IR -	INTERSTATE ROUTE(TP) AL -	- ALLEY HW- HIGHWAY R	D - ROAD		RSECTION OR ON APPROA	100 miles			
3-HOUSE # 5-EAST	I EDERAL OU ROUTE		Q - SQUARE T - STREET	X WITHIN INTER	RCHANGE AREA NUM	4 BER OF APPROACHES			
DISTANCE DISTANCE CR-	NUMBERED COUNTY ROUTE CR -		E - TERRACE L - TRAIL		ROADWAY				
1-MILES TR-	MUMPEDED TOWNSHIP		A - WAY	ROADWAY DIV	TIDED				
3-YARDS	HE -	- HEIGHTS PL - PLACE			TOES .				
LOCATION OF FIRST HARMFUL EVENT 1 - ON ROADWAY 9 - CROSSOVER		NER OF CRASH COLLISION/IMPA(COLLISION 4 - REAR-TO-REAR	т	DIRECTION OF TRAVEL		****			
0 1 2-ON SHOULDER 10-DRIVEWAY/	ALLEY ACCESS TWO	WEEN 5-BACKING MOTOR 5-BACKING		1 - NORTH 2 - SOUTH	(<4 FEET	S			
4 - ON ROADSIDE 12-SHARED US	VEHI	CLES IN 6-ANGLE VSPORT 7-SIDESWIPE, SAME	DIRECTION	3 - EAST 4 - WEST	(≥4 FEET				
5 - ON GORE TRAILS 6 - OUTSIDE TRAFFIC WAY 13-BIKE LANE	2 - REAR 3 - HEAD	7. B. S.				EPRESSED MEDIAN AISED MEDIAN			
7 - ON RAMP 14-TOLL BOOTH	1	on your end on the			(ANY TYPE 9 - OTHER/UN	A Characteristic Control of the Cont			
U-011 KAMI	WORK ZONE TYPE	LOCATION OF CRASH IN WO	DV 70NE	CONTOUR	CONDITIONS	SURFACE			
	LANE CLOSURE	1 - BEFORE THE 1ST V		1	1	2			
3-\	LANE SHIFT/CROSSOVER WORK ON SHOULDER	WARNING SIGN 2 - ADVANCE WARNIN	G AREA	1 - DRY	1 - CONCRETE				
LAW ENFORCEMENT PRESENT	OR MEDIAN NTERMITTENT OR MOVING WORK	3 - TRANSITION AREA 4 - ACTIVITY AREA	2-STRAIGHT GRADE 2-WET			2 - BLACKTOP, BITUMINOUS,			
The production of the control of the	OTHER	5 - TERMINATION ARE	ΕA	3 - CURVE LEVEL 3 - SNOW ASPHA					
LIGHT CONDITION	WEATHE	R	*	9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK 4 - SLAG, GRAVEL,			
1 - DAYLIGHT 2 - DAWN/DUSK	1-CLEAR 0-1-2-CLOUDY	6 - SNOW 7 - SEVERE CROSSWINDS		OIL, GRAVEL STONE					
3 - DARK - LIGHTED ROADWAY	8 - BLOWING SAND, SOIL, DIRT,	G SAND, SOIL, DIRT, SNOW MOVING)							
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING RAIN OR FREEZI 99 - OTHER / UNKNOWN							
9 - OTHER / UNKNOWN	596 - KIBAPILISTI, NICK (SOLVES) 1104	Whete I Per exclude standard bottle to de teagure duced			7. OTTLEVONKNOWN				
NARRATIVE					A	Indicate the north			
UNIT 1 WAS DRIVING NORTH	HBOUND ON S				1	an "N" on the compass diagram.			
PROSPECT ST THROUGH T	HE W MAIN ST					2 8 -22			
INTERSECTION, UNIT 2 WAS	S DRIVING			, , ,	- Carriera				
				N?PROSPECT	7ST PST				
WESTBOOK W MAIN SI. UNIT 2 DROVE									
THROUGH THE RED LIGHT AT THE									
INTERSECTION STRIKING UNIT 1 IN THE									
INTERSECTION.									
s?PROSPECT?ST									
CRASH REPORTED DATE / TIME DISPATCH DATE / TIME ARRIVAL DATE / TIME SCENE CLEARED DATE / TIME REPORT TAKEN BY									
0,1,2,9,2,0,2,5,/,1,7,1,3,,0,1,2,			7.1.8			POLICE AGENCY			
TOTAL TIME OTHER TOTAL	OFFICER'S NAME*	Сн	ECKED BY OFFI	CER'S NAME*		MOTORIST			
ROADWAY CLOSED INVESTIGATION TIME MINUTE	Driscoll, Sean D	CC		er, James		SUPPLEMENT (CORRECTION OR ADDITION			
	5 2 OFFICER'S BAD	IGE NUMBER*	CHECKED E	Y OFFICER'S BADGE N	IUMBER*	TO AN EXISTING REPORT SENT TO ODPS)			

HSY7001 OH1 1/19 [760-0820] PAGE **1** OF **4**

LOCAL REPORT NUMBER 2 . 0 . 2 . 5 . - . 0 . 0 . 0 . 0 . 1 . 2 . 5 . 1 . OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER) DAMAGE OWNER PHONE: INCLUDE ATEA CODE (SAME AS DRIVER)
REDACTED PER ORC 149.43(A)(1) RILEY, SAMMI, LEE DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER) 3 4808 TIMBERVIEW DR , Rootstown , OH 44266 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE DAMAGED AREA(S) INDICATE ALL THAT APPLY **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE [3, C, 4, P, D, D, E, G, 0, F, T, 5, 2, 6, 9, 5, 0]2 0 1 5 Dodge INSURANCE POLICY # COLOR VEHICLE MODEL BLK **JOURNEY** 4487117923 TYPE OF USE US DOT# TOWED BY: COMPANY NAME HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS MATERIAL CLASS # PLACARD ID # 1 - ≤10KLBS. HIT/SKIP UNIT 2 - 10,001 - 26K LBS. 0,1PLACARD 」 3 - >26K LBS. 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEFI CHAIR (ANY TYPE) 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST 10 - MOPED OR MOTORIZED 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE BICYCLE 5 - CARGO VAN 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 -TRAIN 11 - ALL TERRAIN VEHICLE ANIMAL-DRAWN VEHICLE 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - LINKNOWN OR HIT/SKIP (ATV/UTV) WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 0 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION AUTONOMOUS 2 - PARTIAL AUTOMATION 1-YES 2-NO 9-0THER/UNKNOWN 5 - FULL AUTOMATION MODE LEVEL 1 - NONE 6 - BUS - CHARTER/TOUR 11-FIRE 16-FARM 21 - MAIL CARRIER 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN 0 1 2 - TAXI 7 - BUS - INTERCITY 13 - POLICE 18-SNOW REMOVAL 19-TOWING 9 - BUS - OTHER 14 - PUBLIC UTILITY 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 1 - NO CARGO BODY TYPE 8 - POLE 12 - CONCRETE MIXER 0.1 / NOT APPLICABLE MOTORVEHICLE CHASSIS 9 - CARGO TANK 13-AUTOTRANSPORTER CARGO 2 - RUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE BODY * 7 - GRAIN/CHIPS/GRAVEL 11-DUMP 99-OTHER / UNKNOWN 00 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN 8 - TRAILER EQUIPMENT 10-DISABLED FROM PRIOR 5 - STEERING DEFECTIVE ACCIDENT 6 - TIRE BLOWOUT -NO DAMAGE [0] - UNDERCARRIAGE [14] 3 - INTERSECTION - OTHER 9 - MEDIAN/CROSSING ISLAND 1 - INTERSECTION - MARKED 6 - BICYCLE LANE 12 - FIRST RESPONDER CROSSWALK AT INCIDENT SCENE ☐-TOP [13] - ALL AREAS [15] 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS 99 - OTHER / UNKNOWN CROSSWALK B - SIDEWALK 11 - SHARED USE PATHS OR CROSSWALK - UNIT NOT AT SCENE [16] 5 - TRAVEL LANE - OTHER LOCATION TRAILS 1-NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING INITIAL POINT OF CONTACT OR LEAVING VEHICLE 14 - ENTERING OR CROSSING 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 0 1 3 - CHANGING LANES 0 - NO DAMAGE 14 - UNDERCARRIAGE 4 19-STANDING SPECIFIED LOCATION 3-STRIKING 9 - LEAVING TRAFFIC LANE 0 , 3 , 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10-PARKED DIAGRAM 99 - UNKNOWN 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN JOGGING, PLAYING 21 - STANDING OUTSIDE 11 - SLOWING OR STOPPED 13-TOP 16-WORKING DISABLED VEHICLE & STRUCK INTRAFFIC 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN 9-OTHER/UNKNOWN 12 - DRIVERLESS TRAFFIC 1-NONE 7 - LEFT OF CENTER 13 - IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 -LYING IN ROADWAY TRAFFIC CONTROL TRAFFICWAY FLOW PARKED POSITION 18-OPERATING DEFECTIVE 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14 - STOPPED OR PARKED EQUIPMENT 23 - OPENING DOOR INTO 2 - TWO-WAY 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE 5 - YIELD SIGN 2 - SIGNAL ILLEGALLY 19 - LOAD SHIFTING/FALLING/ ROADWAY 4 - RAN STOP SIGN 10-IMPROPER PASSING 3 - FLASHER 6 - NO CONTROL 15 - SWERVING TO AVOID SPILLING 99-OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING # of THROUGH LANES RAIL GRADE CROSSING 6-IMPROPERTURN 12 - IMPROPER BACKING ON ROAD 1 - NOT INVOLVED 2 2 - INVOLVED-ACTIVE CROSSING NON-COLLISION 3 - INVOLVED-PASSIVE CROSSING 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE OPPOSITE DIRECTION OF EQUIPMENT 17 - ANIMAL - FARM 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS UNIT / NON-MOTORIST DIRECTION TRAVEL 23 - STRUCK BY FALLING, 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 18-ANIMAL - DEER 12 - DOWNHILL RUNAWAY SHIFTING CARGOOR 1 - NORTH 5 - NORTHEAST 19-ANIMAL - OTHER J 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT

COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP LP STATE LICENSE PLATE # O H JLS9664 INSURANCE COMPANY
VERIFIED GEICO COMMERCIAL GOVERNMENT RESPONSE INTERLOCK DEVICE EQUIPPED 0 3 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE UNITTYPE 4 - PICKUP ______ # OF TRAILING UNITS SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE FUNCTION 4 - SCHOOL TRANSPORT VEHICLE 2 - HEAD LAMPS **DEFECTS 3 - TAIL LAMPS** NON-MOTORIST 2-INTERSECTION - UNMARKED LOCATION AT IMPACT ACTION 4- STRUCK 0_1 CONTRIBUTING 5 - UNSAFE SPEED SEQUENCE OF EVENTS 1 2 0 1 - OVERTURNIROLLOVER ANYTHING SET IN MOTION 13 - OTHER NON-COLLISION 2 - SOUTH 6 - NORTHWEST 20 - MOTOR VEHICLE IN 5 - CARGO / EQUIPMENT BY A MOTOR VEHICLE 10 - CROSS MEDIAN 14-PEDESTRIAN FROM | 2 | TO | 1 | TRANSPORT 7 - SOUTHEAST 3 - EAST LOSS OR SHIFT 24 - OTHER MOVABLE OBJECT 15 - PEDAL CYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 8 - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER / UNKNOWN 25 - IMPACT ATTENUATOR 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43-CURB 50 - WORK ZONE MAINTENANCE EQUIPMENT / CRASH CUSHION 32 - PORTABLE BARRIER 38 - OVERHEAD SIGN POST 44 - DITCH UNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 51-WALL 33 - MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 45 - EMBANKMENT 1 - STATED / ESTIMATED SPEED STRUCTURE 34 - MEDIAN GUARDRAIL SUPPORT 52 - BUILDING 0,2,5 46-FENCE 27 - BRIDGE PIER ORABUTMENT 2 - CALCULATED / EDR BARRIER 40 - UTILITY POLE 53-TUNNEL 47 - MAILBOX 28-BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54 - OTHER FIXED OR JECT 48-TREE 3 - UNDETERMINED POSTED SPEED _ 29-BRIDGE RAIL OR SUPPORT 99 - OTHER / UNKNOWN 49-FIRE HYDRANT 36 - MEDIAN OTHER BARRIER 30-GUARDRAIL FACE 42 - CULVERT 2 | 5

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

LOCAL REPORT NUMBER

2.0.2.5.-.0.0.0.0.1.2.5.1.

								0,0,0,1,2,3,1				
UNIT	2	OWNER NAME: LAST, FIRS ROCKICH, L	T, MIDDLE (SAME AS DRIVE OGAN, AUS	STIN	REDACTED PE	UDE AFEA CODE (X) SAME AS DRIVER) ER ORC 149.43(A)(1)	DAMAGE DAMAGE SCALE					
0WN	ER AD	DRESS: STREET, CITY, STATE,	ZIP (X SAME AS DRIVER)				1 - NONE 3 - FUNCTIONAL DAMAGE					
1792 WATERFORD CT 1518, Akron, OH 44313 COMMERCIAL CARRIER: NAME ADDRESS, CITY, STATE, ZIP						PHONE: INCLUDE AREA CODE	2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN					
001111	L.	TAL DARRIER. NAME, ADDR	233,011 1,31A12,21F		L L L L	I I I I I	DAMAGED AREA(S)					
LP ST		LICENSE PLATE #		LE IDENTIFICATION #	VEHICLE YE	2	INDICAT	E ALL THAT APPLY				
	Helibas	KIJ6338		6,6,6,3,L,0,2,1,8 INSURANCE POLICY #	3,1,4, 2,0,0, color	Monda VEHICLE MODEL	11 12 1	11 12				
X	ERIFIE	STATE FAI		4032134-SFP-35	BLK	CIVIC	10 11 1 2	10 11 1 1				
	OMMER	TYPE OF USE	IN EMERGENCY	US DOT #	TOWED BY: COMPAN	Y NAME	9 10 2 3	10, 2 2				
	Estation.		#OCCUPANTS	/EHICLE WEIGHT GVWR/GCWR	HAZARDO	OUS MATERIAL		- 004 -				
	NTERL EVICE QUIPP	HIT/SKIP UNIT		1 - ≤10KLBS. 2 - 10,001 - 26KLBS.	RELEASED	CLASS # PLACARD ID #	8 7 6 5 4	8 7 5 5				
_			7 - MOTORCYCLE 2-WHEELED	3 - >26K LBS. 12-GOLF CART	PLACARD 18-LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	6 11	12 7 6 5				
. 0	1.	2 - PASSENGER VAN (MINIVAN)	8 - MOTORCYCLE 3-WHEELED	13-SNOWMOBILE	19-BUS (16+ PASSENGERS)	24-WHEELCHAIR (ANY TYPE)	10	11 1 2				
		- TANDAR BERGERAKAN PERMENTAN	9 - AUTOCYCLE 10 - MOPED OR MOTORIZED		20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT	25 - OTHER NON-MOTORIST 26 - BICYCLE	9 -	9 3				
		5 - CARGO VAN	BICYCLE		22 - ANIMAL WITH RIDER OR	27 -TRAIN	<u> </u>	0 11 4				
u /		0 - VAN (9-13 3CA13)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 6 4				
MEHIGHE		# of TRAILING UNITS					11 12 7	6 11 12 1				
VE		WAS VEHICLE OPERATING IN AU' MODE WHEN CRASH OCCURRED			3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION	9 - UNKNOWN	10 11 1 2	10 11 1				
2	2	1-YES 2-NO 9-OTHER/UNK	AUTUMUU	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		9 10 2 3	10 2				
_		1 - NONE	MODE LEVE 6 - BUS - CHARTER/TOUR		16-FARM	21 - MAIL CARRIER	8 4 -	8 4 -				
0			7 - BUS - INTERCITY		17 - MOWING	99-OTHER / UNKNOWN	8 7 5 4	8 7 5				
SPE	SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE FUNCTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER				18-SNOW REMOVAL 19-TOWING		7 6 5	7 6 5				
FUNC	IIUN	5 - BUS - TRANSIT/COMMUTER		15 - CONSTRUCTION EQUIPMENT				12 12 12				
0.1				01110010	8 - POLE	12 - CONCRETE MIXER	12					
CAF	CARGO 2.RUS		MOTORVEHICLE 4 - LOGGING	/ 01000101115101 0050 00V	9 - CARGOTANK 10 - Flat Bed	13 - AUTOTRANSPORTER 14 - GARBAGE/REFUSE	a Ma					
BODY TYPE				7 004111101110010041151	11-DUMP	99 - OTHER / UNKNOWN	9 3 9 9	1 3 9 1 3 9 3 3				
7					9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	6					
VEH	VEHICLE 2 - HEAD LAMPS 5 - STEERING DEFECTS 3 - TAIL LAMPS 6 - TIRE BLOWOUT		5 - STEERING 6 - TIRE BLOWOUT	B - TRAILER EQUIPMENT 1 DEFECTIVE	10 - DISABLED FROM PRIOR ACCIDENT		42)	6 6 6				
DEFE	.013			C0000000000000000000000000000000000000	9 - MEDIAN/CROSSING ISLAND		- NO DAMAGE [0	UNDERCARRIAGE [14]				
		CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED			12 - FIRST RESPONDER AT INCIDENT SCENE	□- TOP [13]	- ALL AREAS [15]				
LOCA	NON-MOTORIST 2-INTERSECTION - UNMARKED CROSS		CROSSWALK 5 -TRAVEL LANE - OTHER LOCK		11 - SHARED USE PATHS OR TRAILS	99 - OTHER / UNKNOWN	□-unit i	IOT AT SCENE [16]				
AT IM	100000000000000000000000000000000000000		1 - STRAIGHT AHEAD		13 - NEGOTIATING A CURVE	18-APPROACHING		TOTAL VOLINE 1203				
3		3 NON COLLISION 3 PACKING			14 - ENTERING OR CROSSING	OR LEAVING VEHICLE	INITIAL I 0 - NO DAMAGE	POINT OF CONTACT 14 - UNDERCARRIAGE				
			3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	SPECIFIED LOCATION 15 - WALKING, RUNNING,	19-STANDING 20-OTHER NON-MOTORIST		UNIT 15 - VEHICLE NOT AT SCENE				
ACI	ACTION 4 - STRUCK PRE-CRASH 4 - CVERTAKING/PASSINI 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN & STRUCK 6 - MAKING LEFTTURN		5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED	JOGGING, PLAYING	21 -STANDING OUTSIDE	DIAGRAM 13-TOP	99 - UNKNOWN				
			6 - MAKING LEFTTURN	INTIMETIC	16 - WORKING 17 - PUSHING VEHICLE	DISABLED VEHICLE 99 - OTHER / UNKNOWN	37.79					
		9-OTHER/UNKNOWN 1-NONE	7 - LEFT OF CENTER	12-DRIVERCESS	17 - VISION OBSTRUCTION	21 -LYING IN ROADWAY	A 70-0 100 A 100 C 1	TRAFFIC CONTROL				
0000		2 - FAILURE TO YIELD	8 - FOLLOWING TOO CLOSE / A	DIDI/ED DOGITION	18 - OPERATING DEFECTIVE	22 - NOT DISCERNIBLE	TRAFFICWAY FLOW 1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN				
0	3		9-IMPROPER LANE CHANGE 10-IMPROPER PASSING	ILLEGALLY	EQUIPMENT 19-LOAD SHIFTING/FALLING/	23 - OPENING DOOR INTO ROADWAY	2 2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL				
	BUTING	E UNCAFE OBEED	11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	SPILLING 20 - IMPROPER CROSSING	99-OTHER IMPROPER ACTION						
) I Z		6-IMPROPERTURN	12 - IMPROPER BACKING	10 - Iniona mai	20 - IMPROPER CRUSSING		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED				
S) LNE SEQU	ENCE	OF EVENTS		NON-COLLISION			2	1 2 - INVOLVED-ACTIVE CROSSING				
ı ₁ _2	0	1 - OVERTURNIROLLOVER 6 - EQUIPMENT FAILURE 11 - CROSS C		11 - CROSS CENTERLINE —	OSS CENTERLINE — 16 - RAILWAY VEHICLE			3 - INVOLVED-PASSIVE CROSSING				
63			7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	TRAVEL	18-ANIMAL — FARM 18-ANIMAL — DEER	EQUIPMENT 23 - STRUCK BY FALLING,	UNIT / NON-I	MOTORIST DIRECTION				
2	ш	4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 13 - OTHER N		12 OTHER NON COLLICION	19-ANIMAL — OTHER 20-MOTOR VEHICLE IN	SHIFTING CARGOOR ANYTHING SET IN MOTION	727	1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST				
2007 VI 10		5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14 - PEDESTRIAN	TRANSPORT	BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM 3 TO 4	3 - EAST 7 - SOUTHEAST				
3			COLLISI	ON WITH FIXED OBJECT	21-PARKED MOTOR VEHICLE - STRUCK			4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN				
4		LABRAIL AUGUSTAN	31 - GUARDRAIL END 32 - PORTABLE BARRIER	37 - TRAFFIC SIGN POST	43 - CURB 44 - DITCH	50 - WORK ZONE MAINTENANCE EQUIPMENT	IIIIT COESS					
		26 - BRIDGE OVERHEAD	33 - MEDIAN CABLE BARRIER	39 - LIGHT / LUMINARIES	44 - DETCH 45 - EMBANKMENT	51 -WALL	UNIT SPEED	DETECTED SPEED 1 - STATED / ESTIMATED SPEED				
5		STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	AO HITH ITWOOLE	46-FENCE 47-MAILBOX	52 - BUILDING 53 - TUNNEL	0 2 5	2 - CALCULATED / EDR				
			PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE		47 - MAILBOX 48 - TREE	54 - OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED				
6	ш	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	BARRIER 36 - MEDIAN OTHER BARRIER	OR SUPPORT 42 - CULVERT	49-FIRE HYDRANT	99 - OTHER / UNKNOWN	\$2.000 PERSON STATE STAT					
1	L	FIRST HARMFUL EVEN	T 1 1 MOST	HARMFUL EVENT			2 5					

OFF PUBLIC SAFETY MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER								
Management AIDIOKT21 IADN-IAIDIOKT21								2_0_	2 . 0 . 2 . 5 0 . 0 . 0 . 0 . 1 . 2 . 5 . 1						
UNIT#	NIT # NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH AGE GENDER					
0,1	RILEY, SAMMI, LEE									0 + 2 + 2 + 0 + 1 + 9 + 8 + 0 + 4 + 4 + F					
	STREET, CITY, S	REDACTED PER ORC 149.43(A)(1)													
0	8 TIMBERVIEW DR ,ROOTSTOWN ,OH 44266 RES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMEN									SEATING POSITI	ON AIR BAG	USAGE	EJECTION	TRAPPED	
5	TAKEN BY							USED 0 4	□ DOT-C:	LMET 0 1			. 1 .	1	
OL STATE	OPERATOR	LICENSE NUMBER		OFFENS	SE CHAI	RGED	LOCAL	OFFENSE DESC					JMBER		
O. H.	REDAC	CTED PER ORC 450	1:1-12				CODE								
OL CLASS	ENDORSEMEN SELECT UP TO 2			VER TRACTED	ALC	OHOL / DRUG SUSPE	CTED	CONDITION	STATUS T	SHITATS	DRUG TEST(S) STATUS TYPE RESULT SELECT UP TO				
	36120101102		BY	1	=	LCOHOL MAF	ANAULIS	4		YPE VALUE		1	KESOLI	SEEEGIFFION	
4				1	□ 0	THER DRUG		1		1	_1_	<u> </u>	عاب ا	بالبال	
UNIT #		FIRST, MIDDLE	HOTEL	ī						DATE OF BIRTH		. .	AGE	GENDER	
0,2	: STREET, CITY, S	ICH, LOGAN, A	USIII	١					75	1 6 1 9		9 2	5	$\lfloor M \rfloor$	
		ERFORD CT 151	Q Akr	on O	H 11	313				PHONE - INCLUDE AREA ACTED PER		C 14	9.43	(A)(1)	
0	INJURED	EMS AGENCY (NAME)	o ,AKI			MEDICAL FACILITY	OUME CITY	SAFETY EQUIPMENT							
5	TAKEN BY	EMS AGENCY (NAME)		INJUKEDI	AKEN TO	MEDICAL FACILITY	(NAME, CLIT)	USED 0 4	□MC HE	UN AIR BAC	ON AIR BAG USAGE EJECTION TRAPPED				
OL STATE		LICENSE NUMBER		OFFENS			LOCAL	OFFENSE DESC	RIPTION		CITA	TON NU	JMBER		
OH	REDAC	TED PER ORC 450)1:1-12	313.0)3C1	Ĺ	X	Traffic Contr	ol Sign		285	14			
OL CLASS	ENDORSEMEN SELECT UP TO 2			VER TRACTED	_	OHOL / DRUG SUSPE		CONDITION	STATUS T	YPE VALUE	STATUS	DRUG TYPE	RESULT	SELECTUPT04	
4 .			BY	1	=	LCOHOL MAR	RIJUANA	1 1	1	1	1.	. 1			
UNIT#	NAME: LAST	FIRST, MIDDLE			<u> </u>	THER BROW				DATE OF BIRTH		T	AGE	GENDER	
197000000															
ADDRESS	: STREET, CITY, S	TATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
10R										1 1 1	1 1	- 1	- 1	1 1	
INJURIES	INJURED	EMS AGENCY (NAME)		INJUREDI	AKEN TO	MEDICAL FACILITY	(NAME, CITY)		DOT-C:	SEATING POSITI	ON AIR BAG	USAGE	EJECTION	TRAPPED	
ON/	TAKEN BY					USED			MC HELMET						
OL STATE	OPERATOR LICENSE NUMBER				OFFENSE CHARGED LOCAL OFFENSE DESC			RIPTION			CITATION NUMBER				
OL CLASS	SELECT UP TO 2			VER Tracted		DHOL / DRUG SUSPE		CONDITION	STATUS T	YPE VALUE	STATUS	TYPE	RESULT	SELECT UP TO 4	
			"		=	THER DRUG	(IOOAIIA		l	_ •	1 1	1		11 11 1	
INJU	JRIES	SEATING POSITION	A	IR BAG		OL CLASS	5	OL RESTRIC	TION(S)	DRIVER DISTRAC	TION	Т	EST STA		
1 - FATAL	SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1-NOTDEP			1 - CLASS A		1 - ALCOHOL INTER		1 - NOT DISTRACTED 2 - MANUALLY OPERATI	MC AN	1 - NONE	GIVEN		
3 - SUSPECTED		2 - FRONT - MIDDLE	2 - DEPLOYE 3 - DEPLOYE			2 - CLASS B 3 - CLASS C		2 - CDL INTRASTAT 3 - CORRECTIVE LE		ELECTRONIC COMMU	NICATION	3 - TEST	GIVEN, CON	TAMINATED	
4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE		D BOTH FRO	NT/SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER		DEVICE (TEXTING, TY DIALING)	PING,		CIVEN DES	BLE ULTS KNOWN	
3 - NO APPARENT INJUNT (MOTORCYCLE PASSENGER)				NENT UNKNO	WN	5 - M/C MOPED ONLY		6 - EXCEPT CLASS		3 - TALKING ON HANDS-I COMMUNICATION DE	ON HANDS-FREE				
INJURED 1 - NOT TRANSP	INJURED TAKEN BY 5 - SECOND - MIDDLE 6 - NO VALID OL							& CLASS B BUS 7 - EXCEPT TRACTO	D TDAILED	4 - TALKING ON HAND-HI COMMUNICATION DE		10000000			
/TREATED A	Party Commercial Comme	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)		ECTION	175	OL ENDORSE	MENT	8 - INTERMEDIATE		5 - OTHER ACTIVITY WIT	HAN	1 - NONE		T TYPE	
2 - EMS 3 - POLICE		8 - THIRD - MIDDLE	1 - NOTEJE			H - HAZMAT M - MOTORCYCLE		9-LEARNER'S PER	MIT	6 - PASSENGER		2 - BL00			
9 - OTHER / UNK	KNOWN	9 - THIRD - RIGHT SIDE	3-TOTALLY		ED P - PASSENGER RESTRICTION			RESTRICTIONS	7 - OTHER DISTRACTION			3 - URINE 4 - BREATH			
SAFETY E	QUIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4-NOTAPP	LICABLE		N - TANKER Q - MOTOR SCOOTER		10 - LIMITED TO DAY 11 - LIMITED TO EMI		8 - OTHER DISTRACTION		5 - OTHE			
1 - NONE USED		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA		RAPPED	J.	R-THREE-WHEEL MO	TORCYCLE	12 - LIMITED - OTHE		THE VEHICLE 9 - OTHER / UNKNOWN		DR	UG TEST	TYPE	
2 - SHOULDER E 3 - LAP BELT ON	BELT ONLY USED NLY USED	(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOTTRAI 2 - EXTRICA			S - SCHOOL BUS	TDAN FRO	13 - MECHANICAL DI (SPECIAL BRAK)	ES, HAND			1 - NONE			
	& LAP BELT USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	MECHAN	ICAL MEANS		T - DOUBLE & TRIPLE X - TANKER / HAZMAT		CONTROLS, OR O ADAPTIVE DEVI		1 - APPARENTLY NORMA		2 - BL00 3 - URIN			
5 - CHILD RESTRAINT SYSTEM -		Y Chanical Mi	L MEANS 14 - MILITARY VEH			14 - MILITARY VEHICLE	E THI STORE IN PRIMITE			4 - OTHER					
6 - CHILD REST REAR FACIN	RAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES		3 - EMOTIONAL (E.G., DEP ANGRY, DISTURBED)		DRUG	TEST RE	SULT(S)	
7 - BOOSTER SEAT 15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRRO 17 - PROSTHETIC AII		4 - ILLNESS 5 - FELL ASLEEP, FAINTE	n		HETAMINES				
8 - HELMET USED 99 - OTHER / UNKNOWN 9 - PROTECTIVE PADSUSED				U -OTHER / UNKNOWN		18-OTHER		FATIGUED, ETC.			ITURATES ODIAZEPINI	ES			
(ELBOW, KNI	EES, ETC.)									6 - UNDER THE INFLUEN OF MEDICATIONS / DR			IABINOIDS		
10 - REFLECTIVE 11 - LIGHTING -										/ALCOHOL 9-OTHER/UNKNOWN		5 - COCA 6 - OPIA	INE TES / OPIOID	s	
/ BICYCLE OF	NLY											7 - 0THE	R		
99 - OTHER / UNK	KNUWN											8 - NEGA	TIVE RESUL	TS	

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