

CR NUMBER 23-19316	ACCIDENT DATE 12/06/23	ACCIDENT TIME 1158	DAY OF WEEK WEDNESDAY	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 1434 E. MAIN ST. KENT, OH 44240			WEATHER CLOUDY	
VEHICLE NO. 1 SAME			VEHICLE NO. 2 (OR PROPERTY DAMAGED)	
DRIVER LAST FIRST MIDDLE DOB TRAUTMAN SALLY R 10/14/1940			DRIVER LAST FIRST MIDDLE DOB KASUMURTHY DEEPAK 04/14/2000	
ADDRESS 4440 SANDLEWOOD DR.			ADDRESS 608 HICKORY MILLS CIR	
CITY, STATE, ZIP KENT, OH 44240			CITY, STATE, ZIP KENT, OH 44240	
DRIVER'S LICENSE NUMBER STATE OH			DRIVER'S LICENSE NUMBER STATE OH	
VEHICLE OWNER'S NAME LAST FIRST MIDDLE TRAUTMAN SALLY R			VEHICLE OWNER'S NAME LAST FIRST MIDDLE THIMMISSETTY BRAVAN KUMAR RED	
ADDRESS 4440 SANDLEWOOD DR.			ADDRESS 608 HICKORY MILLS CIR	
CITY, STATE, ZIP KENT, OH 44240			CITY, STATE, ZIP KENT OH 44240	
VEHICLE YEAR MAKE MODEL COLOR 2021 CHEVY EQUINOX SILVER			VEHICLE YEAR MAKE MODEL COLOR 2015 VOLKSWAGEN PASSAT CHROME	
LICENSE PLATE NUMBER STATE JMJ7012 OH			LICENSE PLATE NUMBER STATE KBV5296 OH	
INSURANCE COMPANY STATE FARM 3518320-SPP-35			INSURANCE COMPANY GEICO 6133109774	
PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT X			PARTS OF VEHICLE DAMAGED <input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT X	
DESCRIBE HOW ACCIDENT OCCURRED				
UNIT 1 WAS STOPPED AT THE EXIT OF 1434, E. MAIN ST.				
UNIT 2 BACKED UP STRIKING UNIT 1.				
OFFICER /SUPERVISOR SIGNATURE Ofc Rebeke #210			SKETCH HOW ACCIDENT OCCURRED E. MAIN ST.	