OFF PUBLIC SAFETY TRAFFIC CRASH	REPORT *DENOTES MANDA	TORY FIELD FOR SUPPLEME	NT REPORT	L	OCAL REPORT NUMBEI	?*	
PHOTOS TAKEN 0H-2 0H-3	LOCAL INFORMATION	4		2 0 2 3	- 10,010,0	8 1 4 B	
X OH-1P OTHER	REPORTING AGENCY NAME*		NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR	
SECONDARY CRASH PRIVATE PROPERTY	City of Kent Police	10,0	5,7,0,3 ,	1 - SOLVED	0,2,	98 - ANIMAL 199 - UNKNOWN	
COUNTY* LOCALITY* LOCATION: CITY	Y, VILLAGE, TOWNSHIP*			CRASH DATE /T	IME* CR	ASH SEVERITY	
6 7 1 1 3-TOWNSHIP Kent				0.5262023	(1.1.2.0 5	- FATAL	
ROUTETYPE ROUTE NUMBER PREFIX N - NORTH	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DEG		SERIOUS INJURY SUSPECTED	
S - SOUTH E - EAST	ROCKWELL		$\mathbf{S}_{\perp}\mathbf{T}_{\perp}$	41,15,8	0.3.6.	- MINOR INJURY SUSPECTED	
	REFERENCE ROAD NAME (ROAD, MILE	EPOST, HOUSE #)	ROAD TYPE	LONGITUDE DE		- INJURY POSSIBLE	
S - SOUTH	439				,	- PROPERTY DAMAGE	
	· · · · · · · · · · · · · · · · · · ·		<u> </u>	$-81_{0}361_{1}$	/_3	ONLY	
REFERENCE POINT DIRECTION 1-INTERSECTION FROM REFERENCE 1. INTERSECTION IN MORTH IR-	ROUTE TYPE INTERSTATE ROUTE(TP) AL - ALL	ROAD TYPE .ey hw-highway ri	D - ROAD	r	NTERSECTION RELATE		
2 - MILE POST S - SOUTH US -	FEDERAL US ROUTE AV - AVE		- SQUARE	WITHIN INTER	RSECTION OR ON APPRO	ACH	
3-H003E# E-EAST	STATE ROUTE		r - STREET	WITHIN INTER	CHANGE AREA NUI	WBER OF APPROACHES	
DISTANCE DISTANCE CR-	NUMBERED COUNTY ROUTE CT - COU		- TERRACE		ROADWAY		
1 - MILES TR - 2 - FEET	NUMBERED TOWNSHIP DR - DRIV		A - WAY	ROADWAY DIV	INFN		
3-YARDS	HE - HEIG	GHTS PL - PLACE		П комписти			
LOCATION OF FIRST HARMFUL EVEN	· · · · · · · · · · · · · · · · · · ·	OF CRASH COLLISION/IMPAC	т	DIRECTION OF TRAVEL	. MEDIA	AN TYPE	
1 - ON ROADWAY 9 - CROSSOVER 2 - ON SHOULDER 10 - DRIVEWAY/	MALLEY ACCESS BETWEEN	ISION 4-REAR-TO-REAR 5-BACKING		N - NORTH	1 - DIVIDED (<4 FEE	FLUSH MEDIAN	
U 1 3-IN MEDIAN 11-RAILWAY G	RADE CROSSING L TWO MOT VEHICLES	SIN 6-ANGLE		S - SOUTH E - EAST	2 - DIVIDED FLUSH MEDIAN		
4 - ON ROADSIDE 12-SHARED US 5 - ON GORE TRAILS	SE PATHS OR TRANSPO 2 - REAR-END	,		W - WEST		(≥4 FEET) DIVIDED, DEPRESSED MEDIAN	
6-OUTSIDE TRAFFIC WAY 13-BIKE LANE	3 - HEAD-ON	9 - OTHER / UNKNOW			4 - DIVIDED,	RAISED MEDIAN	
7 - ON RAMP 14-TOLL BOOTS 8 - OFF RAMP 99-OTHER / UN					(ANY TYP 9 - OTHER/U		
	WORK ZONE TYPE L	LOCATION OF CRASH IN WO	DI ZONE	CONTOUR	CONDITIONS	SURFACE	
WORK ZONE RELATED	LANE CLOSURE	1 - BEFORE THE 1ST V		1	1 1	SOMAGE	
	LANE SHIFT/CROSSOVER	WARNING SIGN 2 - ADVANCE WARNIN	G ARFA	1 - STRAIGHT LEVEL		1 - CONCRETE	
	WORK ON SHOULDER OR MEDIAN	3-TRANSITION AREA	.,.,,		2-WET	2 - BLACKTOP,	
	INTERMITTENT OR MOVING WORK OTHER	4 - ACTIVITY AREA 5 - TERMINATION ARE	Α.		3 - SNOW	BITUMINOUS, ASPHALT	
	Jinek	J-TERMINATION AND	·n	4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK	
LIGHT CONDITION	WEATHER	GALOVA		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL,	
1 - DAYLIGHT 1 2 - DAWN/DUSK	- 0 01011017	SNOW SEVERE CROSSWINDS			6 - WATER (STANDING,	STONE	
3 - DARK - LIGHTED ROADWAY		BLOWING SAND, SOIL, DIRT,			MOVING)	5 - DIRT 9 - OTHER/UNKNOWN	
4 - DARK ROADWAY NOT LIGHTED 5 - DARK UNKNOWN ROADWAY LIGHTING		FREEZING RAIN OR FREEZII - OTHER / UNKNOWN	VG DRIZZLE		7 - SLUSH) ommodition	
9 - OTHER / UNKNOWN	,				9 - OTHER/UNKNOWN		
NARRATIVE						Indicate the north	
UNIT 2 WAS PARKED ON RO	CKWELLST UNIT					direction with an "N" on the	
	70					compass diagram.	
1 WAS BACKING OUT OF A	URIVEWAY AND					·	
STRUCK UNIT 2.							
		, <u></u>					
	770	43	9ROCKWE	LLST.			
						Not To Sca	
				11			
				'		ROCKWELLST,	
				!			
					Unit 2		
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVA					
					<u> </u>	I MOTOBIET	
TOTAL TIME OTHER TOTA ROADWAY CLOSED INVESTIGATION TIME MINUT		Сн	ECKED BY OFFI	CER'S NAME*		MOTORIST	
MINU!		www.ro*	A	APPIGENIA SANGE	LIMPED*	SUPPLEMENT (CORRECTION OF ADDITION TO AN EXISTING REPORT SENT TO ODES)	
	OFFICER'S BADGE N	MOMBEK	GHECKED I	Y OFFICER'S BADGE N	UNBER"	O NE ENGLISE DEPOS SERI 10 (UPS)	
HSY7001 OH1 1/19 [760-0820]						PAGE OF	

LOCAL REPORT NUMBER

2-0-2-3--0-0-0-8-1-4-8-

UNIT # 0 1	OWNER NAME: LAST, FIR PALMERTO	ST, MIDDLE (SAME AS DRIVER) N. DONNA TI	RENE		.ude area code (same as driver) RC 149.43 (A)(1)(mm	DAMAGE) DAMAGE SCALE				
OWNER A	DDRESS: STREET, CITY, STATE	, ZIP (same as driver)		Land 1 1	T T C DC N	1 - NONE 3 - FUNCTIONAL DAMAGE				
	OCKWELL S CIAL CARRIER: NAME, ADD		14240	COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN				
						DAMAGED AREA(S) INDICATE ALL THAT APPLY				
	HDA4753		EIDENTIFICATION # 0.0681	2 4 7 2 0 1	AR VEHICLE MAKE Toyota	12	12			
INSURA VERIFI	 ,		NSURANCE POLICY # 484377	COLOR SIL	VEHICLE MODEL PRIUS	10 11 12 1 2	10 12 12 2			
Сомме	TYPE OF USE RCIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT #	TOWED BY: COMPAN	Y NAME	9 9 3	3 9 9 3 3			
INTER DEVICE EQUIP	E HIT/SKIP UNI PED	T 0 2	HICLE WEIGHT GVWR/GCWR 1 - ≤10K lbs. 2 - 10,001 - 26K lbs. 3 - >26K lbs.	MATERIAL	CLASS # PLACARD ID #	8 7 6 5	8 7 6 5 4			
O 1 UNIT TYPE	3 - SPORT LITTLETY VEHICLE	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - MOPED OR MOTORIZED BICYCLE 11 - ALL TERRAIN VEHICLE (ATV / UTV)	12-GOLF CART 13-SNOWMOBILE 14-SINGLE UNITTRUCK 15-SEMI-TRACTOR 16-FARM EQUIPMENT 17-MOTORHOME	18 - LIMO (LIVERY VEHICLE) 19 - BUS (164 PASSENGERS) 20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	10 9 8	11 12 1 1 2 2 1 1 1 1 1 1 1 1 1 1 1 1 1			
	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED 1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOUS	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	9 - UNKNOWN	10 11 12 1 2 2 9 3 3 3	10 11 12 1 2 1 1 1 2 1 1 1 1 1 1 1 1 1 1			
01 SPECIAL FUNCTION	3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE On 4 - School transport 9 - Bus - Other 14 - Public utility		12 - MILITARY 13 - POLICE	16-FARM 17-MOWING 18-SNOW REMOVAL 19-TOWING 20-SAFETY SERVICE PATROL	21 - MAIL CARRIER 99 - Other / Unknown	8 7 6 5	8 7 6 6 6 12 12 12 12 12 12 12 12 12 12 12 12 12			
O 1 CARGO BODY TYPE	1 - NO CARGO BODY TYPE /NOT APPLICABLE 2 - BUS	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE 4 - LOGGING	CHASSIS	8 - POLE 9 - CARGO TANK 10-FLAT BED 11-DUMP	12 - CONCRETE MIXER 13 - AUTOTRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	9 3 9	3 9 3 3			
VEHICLE DEFECTS	1 - TURN SIGNALS 2 - HEAD LAMPS 3 - TAIL LAMPS	4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	7 - WORN OR SLICKTIRES 8 - TRAILER EQUIPMENT DEFECTIVE	9 - MOTOR TROUBLE 10-disabled from Prior Accident	99 - OTHER / UNKNOWN	6	6 6 6			
NON-MOTORIST LOCATION AT IMPACT	CROSSWALK 2-INTERSECTION - UNMARKED	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION	6 - BICYCLE LANE 7 - SHOULDER/ROADSIDE 8 - SIDEWALK	9 - MEDIAN/CROSSING ISLAND 10-DRIVEWAY ACCESS 11-SHARED USE PATHS OR TRAILS	12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN	- NO DAMAGE (- TOP (13) - Unit	0]			
3 ACTION	3-STRIKING UZ	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHTTURN 6 - MAKING LEFTTURN	9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN	0 - NO DAMAG	TO UNIT 15 - VEHICLE NOT AT SCENE			
1,2	2-FAILURE TO YIELD 3- RAN RED LIGHT	7-LEFT OF CENTER 8-FOLLOWING TOO CLOSE / ACDA 9-IMPROPER LANE CHANGE	DADICED DOCUTION	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/FALLING/	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY	TRAFFICWAY FLOW 1 - ONE-WAY 2 - TWO-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN 6 2 - SIGNAL 5 - YIELD SIGN			
CONTRIBUTING CIRCUMSTANCES	4 - RAN STOP SIGN 5 - Unsafe Speed 6 - Improper Turn	10-IMPROPER PASSING 11-DROVE OFF ROAD 12-IMPROPER BACKING	15 - SWERVING TO AVOID 16 - Wrong Way	SPILLING 20-IMPROPER CROSSING	99-OTHER IMPROPER ACTION	# of THROUGH LANES	3 - FLASHER 6 - NO CONTROL RAIL GRADE CROSSING			
SEQUENCE	OF EVENTS			Table Washing Admin		ON ROAD	1 - NOT INVOLVED			
1 2 1	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		3 - INVOLVED-PASSIVE CROSSING			
2 <u> </u>	2 - FIRE/EXPLOSION 7 - SEPARATION OF OVERTS 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 14 - JACKKNIFE 9 - RAN OFF ROAD LEFT 13 - OTHER NON-COLLISION 15 - CARGO / EQUIPMENT 10 - CROSS MEDIAN 14 - PEDESTRIAN 14 - PEDESTRIAN 15 - CARGO / EQUIPMENT 10 - CROSS MEDIAN 14 - PEDESTRIAN 16 - CROSS OR SHIFT		18-ANIMAL — DEER 19-ANIMAL — OTHER 20-MOTOR VEHICLE IN TRANSPORT 21-PARKED MOTOR VEHICLE	23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	UNIT/NOI $oxed{1}$ from $oxed{1}$ to $oxed{L}$	4 - WEST 8 - SOUTHWEST				
4	25 - IMPACT ATTENUATOR / CRASH CUSHION	31-GUARDRAIL END 32-PORTABLE BARRIER	N WITH FIXED OBJECT 37-TRAFFIC SIGN POST 38-OVERHEAD SIGN POST	43 - CURB 44 - DITCH	50 - WORK ZONE MAINTENANCE EQUIPMENT	UNIT SPEED	9 - OTHER / UNKNOWN DETECTED SPEED			
5	26-BRIDGE OVERHEAD STRUCTURE 27-BRIDGE PIER OR ABUTMENT 28-BRIDGE PARAPET	33-MEDIAN CABLE BARRIER 34-MEDIAN GUARDRAIL BARRIER 35-MEDIAN CONCRETE	41 - OTHER POST, POLE	45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE	51 - WALL 52 - Building 53 - Tunnel 54 - Other Fixed Object	POSTED SPEED	1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED			
	29-BRIDGE RAIL 30-GUARDRAIL FACE	BARRIER 36-MEDIAN OTHER BARRIER	OR SUPPORT 42 - CULVERT	49-FIRE HYDRANT	99 - OTHER / UNKNOWN	. SSILO SFEED				

	OWNER NAME: LAST, FIRS LEON, KAYL		,		UDE AREA CODE (SAME AS DRIVER) RC 149.43 (A)(1)(mm	DAMAGE				
OWNER AT	DRESS: STREET, CITY, STATE	, ZIP (SAME AS DRIVER)	V. D. V. N	requested per p	142.48 (A)(1)(IIII)	DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE 2 - 3 - MINOR DAMAGE 4 - DISABILING DAMAGE				
		HLLICOTHE	E,OH 45601	···		2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN				
COMMERC	IAL CARRIER: NAME, ADDR	RESS, CITY, STATE, ZIP		COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	DAMAGED AREA(S)				
LP STATE	LICENSE PLATE #	VEHICLE	IDENTIFICATION #	VEHICLE YE		INDICATE ALL THAT APPLY				
	HND3810		12.9.F.L.3.1.2. SURANCE POLICY #	9,2,2, 2,0,1, color	Ford VEHICLE MODEL	11 12	11 12			
INSURAL VERIFI	NATIONAL NATIONAL	L GENERAL20		GRY	FOCUS	10 12 2	10 12 1 2			
Паомия	TYPE OF USE	IN EMERGENCY RESPONSE	US DOT #	TOWED BY: COMPAN	YNAME	10 2	10, 22			
COMME	<u> </u>	VEL	IICLE WEIGHT GVWR/GCWR		US MATERIAL					
DEVICE EQUIP	HIT/SKIP UNI	#UGGUPANIS	1 - ≤10K LBS. 2 - 10,001 - 26K LBS 	I L DELEASED	CLASS # PLACARD ID #	8 7 6 5	8 7 6 5 4			
	1 - PASSENGER CAR		12 - GOLF CART 13 - SNOWMOBILE	18-LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	10	12			
[0,1]	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE	14-SINGLE UNIT TRUCK	19-BUS (16+ PASSENGERS) 20-OTHER VEHICLE	24 - WHEELCHAIR (ANY TYPE) 25 - Other Non-Motorist	<u></u>	10 2 2			
UNIT TYPE	4 - PICK UP 5 - CARGO VAN	10 - MOPEO OR MOTORIZED Bicycle	15 - SEMI-TRACTOR 16 - FARM EQUIPMENT	21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR	26 - BICYCLE 27 - Train	9	9 3 3			
	6 - VAN (9:15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8 7 5 74				
لــــا	# OF TRAILING UNITS	(ALE) UTY				11 12 7	6 5 11 12 1			
	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED		0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	10 12 1	10 12 1			
2	1-YES 2-NO 9-OTHER/UNK	1 U 1	1 - DRIVER ASSISTANCE 2 - Partial automation	4 - HIGH AUTOMATION 5 - FULL AUTOMATION		10 2	10 2			
	1 - NONE	MODE LEVEL	11 - FIRE	16-FARM	21 - MAIL CARRIER	9 3 3	9			
	2 - TAXI	7 - BUS - INTERCITY	12 - MILITARY	17 - MOWING	99 - OTHER / UNKNOWN	B 7 5 4	8 7 6 4			
SDECIAL	3 - ELECTRONIC RIDE SHARING		13 - POLICE	18-SNOW REMOVAL		7 8 5	7 6 5			
FUNCTION	4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	9 - BUS - OTHER 10 - AMBULANCE	14-PUBLIC UTILITY 15-CONSTRUCTION EQUIPMENT	19-TOWING 20-SAFETY SERVICE PATROL		Ü				
Λ 1	1 - NO CARGO BODY TYPE	3 - VEHICLE TOWING ANOTHER		8 - POLE	12 - CONCRETE MIXER	12	12 12 12			
$\begin{bmatrix} 0_1 1_1 \end{bmatrix}$	/ NOT APPLICABLE 2 - BUS	MOTOR VEHICLE 4 - LOGGING	CHASSIS 6 - CARGO VAN/ENCLOSED BOX	9 - CARGOTANK 10-FLAT BED	13 - AUTO TRANSPORTER	~ NA ~				
BODY Type	- *		7 - GRAIN/CHIPS/GRAVEL	11 - DUMP	14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	9 (3 9	a 9 3 9 3 3			
	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICKTIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	6				
VEHICLE	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT Defective	10-DISABLED FROM PRIOR ACCIDENT			6 6 6			
			6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	14 FIRST RESPONDED	☐-NO DAMAGE [01			
	CROSSWALK	4 - MIDBLOCK - MARKED	7 - SHOULDER / ROADSIDE	10 - DRIVEWAY ACCESS	12 - FIRST RESPONDER AT INCIDENT SCENE	□-TOP [13]	-ALL AREAS [15]			
LOCATION	2 - INTERSECTION UNMARKED CROSSWALK	CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION	8 - SIDEWALK	11 - SHARED USE PATHS OR TRAILS	99 - OTHER / UNKNOWN	☐ - UNIT	NOT AT SCENE [16]			
AT IMPACT	1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18-APPROACHING					
. 4 .			8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING	OR LEAVING VEHICLE 19 - STANDING	INITIA 0 - NO DAMAG	L POINT OF CONTACT E 14 - UNDERCARRIAGE			
			9 - LEAVING TRAFFIC LANE 10 - PARKED	SPECIFIED LOCATION 15-WALKING, RUNNING,	20 - OTHER NON-MOTORIST	0 8 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE DIAGRAM OR UNIXIONITY				
	5 - BOTH STRIKING ACTIONS & STRUCK	5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED In traffic	JOGGING, PLAYING 16-WORKING	21 - STANDING OUTSIDE Disabled vehicle	13 - TOP	99 - UNKNOWN			
	9-OTHER/UNKNOWN	6 - MAKING LEFTTURN	12 - DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		TRAFFIC			
			DEBUTE BASITION	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL			
	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8 - FOLLOWING TOO CLOSE / ACDA 9 - IMPROPER LANE CHANGE	14-STOPPED OR PARKED	18-OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO	1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 6 2 - SIGNAL 5 - YIELD SIGN			
UL	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID	19-LOAD SHIFTING/FALLING/ SPILLING	ROADWAY 99 - OTHER IMPROPER ACTION	2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL			
CIRCUMSTANCES	5 - UNSAFE SPEED 6 - IMPROPERTURN	11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY	20-IMPROPER CROSSING	77 FUTTER IMPROPER AUTION	# of THROUGH LANES	RAIL GRADE CROSSING			
SEQUENCE						ON ROAD	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING			
1 2 1 0	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	NON-COLLISION 11-CROSS CENTERLINE —	16-RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING			
	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	****************	17-ANIMAL — FARM	EQUIPMENT 23 - STRUCK BY FALLING,	UNIT / NOI				
2[3 - IMMERSION 4 - JACKKNIFE	O DANINEC DOAD LEET	12-DOWNHILL RUNAWAY	18-ANIMAL — DEER 19-ANIMAL — OTHER	SHIFTING CARGO OR ANYTHING SET IN MOTION		1 - NORTH 5 - NORTHEAST			
	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10. 00000 HENLEH	13-OTHER NON-COLLISION 14-Pedestrian	20-MOTOR VEHICLE IN TRANSPORT	BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM 4 TO L	3 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST			
3	EAGG OF GITT 1		15-PEDALCYCLE	21 - PARKED MOTOR VEHICLE	E-1-0111EN MOTABLE (DIEC)	10	4 - WEST 8 - SOUTHWEST			
4	25 - IMPACT ATTENUATOR	31 - GUARDRAIL END	WITH FIXED OBJECT 37-TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN			
*	/ CRASH CUSHION 26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	38-OVERHEAD SIGN POST 39-LIGHT/LUMINARIES	44 - DITCH 45 - EMBANKMENT	EQUIPMENT 51 - WALL	UNIT SPEED	DETECTED SPEED			
5	STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	SUPPORT 40 - UTILITY POLE	46-FENCE	52 - BUILDING 53 - TUNNEL		1 - STATED / ESTIMATED SPEED			
	28 - BRIDGE PARAPET	35 - MEDIAN CONCRETE	41 - OTHER POST, POLE	47 - MAILBOX 48 - TREE	54 - OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED			
6	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	BARRIER 36-MEDIAN OTHER BARRIER	OR SUPPORT 42 - CULVERT	49-FIRE HYDRANT	99 - OTHER / UNKNOWN	1 00150 01550				
	EXPCT HADMEIN EVEN		ADMEN EVENT			<u> </u>				

OHIO DEPARTMENT MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER							
								2-0-2-30-0-0-8-1-4-8-							
UNIT # NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER							
0.1	0_1_RAKIC, ROBERT, PAUL ADDRESS: STREET, CITY, STATE, ZIP									$0 \cdot 2 \cdot 2 \cdot 1 \cdot 2 \cdot 0 \cdot 0 \cdot 4$					
ADDRESS:		CONTACT PHONE - INCLUDE AREA CODE													
S AUU9 E	2069 ECHO RD ,Stow ,OH 44224 NJURIES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT										Redacted per ORC 149.43				
ENON 5	TAKEN BY	EMIS AUCHUT (NAME)		USED					DOT-COM	IPLIANT	0 1	AIR BAG	JSAGE EJECTION	TRAPPED	
OL STATE		ICENSE NUMBER		OFFENSE	CHAR	RGED	LOCAL	0 4		L	<u> </u>	CITATI	ION NUMBER		
ADDRESS: 2069 H INJURIES OL STATE OL H, OH CLASS	Redact	ed per ORC 4501	:1-12	l			CODE	Starting and	Backing			2531			
OL CLASS	ENDORSEMENT SELECT UP TO 2	DORSEMENT RESTRICTION SELECT UP TO 3 DRIVI			VER ALCOHOL / DRUG SUSPECTED CONDITION			ALCOHOL TEST STATUS TYPE VALUE STA		77.	DRUG TEST(S				
. 4 .	SELECT DE 102		BY	TRACTED	=	COHOL MAF	ANAUUR	1	, .	1	ALUE		TYPE RESULT	T SELECTUPTO 4	
UNIT #	NAME: LAST, F	THE THIRD S			0T	THER DRUG		1	_1	DATE	F DYDTH	1		LAENDED	
0,17	NAME: LASI,	- IKSI, MIDDLE								DATEU	F BIRTH		AGE	GENDER	
	STREET, CITY, ST.	ATE, ZIP	1984						CONTACT PHONE - INCLUDE AREA CODE					السيا	
10R	. ,								Redacted per ORC 149.43						
INJURIES	INJURED I	EMS AGENCY (NAME)		INJURED TA	KEN TO:	MEDICAL FACILITY	(NAME, CITY)		- DOT-Cor	SEA			USAGE EJECTION	TRAPPED	
NO	BY							USED	MC HEL	MET L	1	J L			
OL STATE		ICENSE NUMBER		OFFENSE	CHAR	RGED	LOCAL CODE	OFFENSE DESC	RIPTION			CITATI	ION NUMBER		
ADDRESS: INJURIES OL STATE		ed per ORC 4501		<u> </u>					·	01101 	·-				
≦ OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT		VER ALCOHOL / DRUG SUSPECTED CONDITION TRACTED ALCOHOL MARIJUANA			STATUS TYPE VALUE STATUS TYPE RESULT SELECTUPT								
			"`_	1 OTHER DRUG 1								11 11 1			
UNIT#	NAME: LAST, F	FIRST, MIDDLE							DATE OF BIRTH AGE GENDEI					GENDER	
ADDRESS:	STREET, CITY, ST.	ATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
010	T	w/		· · · · · ·					SEATING POSITION AIR BAG USAGE EJECTION TRAPPED						
ADDRESS:	TAKEN BY	EMS AGENCY (NAME)		INJUREDTA	KEN TO:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-COM	APLIANT	ATING POSITION	N AIR BAG	USAGE EJECTION	TRAPPED	
		ICENSE NUMBER		OFFENSE	DFFENSE CHARGED LOCAL OFFENSE DESC			<u> </u>			TON NUMBER				
OL STATE					•••••		CODE				ION HOMBER				
OL CLASS.	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT			ALCO	HOL / DRUG SUSPE	CTED	CONDITION	ALC STATUS TY	OHOLTE		STATUS I	DRUG TEST(S		
	SELECT DE 102		BY	FRACTED	_	.COHOL MAF	ANAULIS	:	31AIU3	,	/ALUE :	STATUS	TYPE RESUL	T SELECTUPIO4	
	RIES	SEATING POSITION		IR BAG	OT	THER DRUG		OL RESTRIC	TION(S)		DISTRACI	TION	TEST STA	THE	
1 - FATAL		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1,- NOT DEP		Asola	1-CLASS A		1-ALCOHOL INTER	\$6.16.1 HERE LEGISLO 4	. 1 - NOT DIS	or No America Street	1 of all 11 mg 57	1 - NONE GIVEN		
2 - SUSPECTED 3 - SUSPECTED	SERIOUS INJURY	2 - FRONT - MIDDLE	2 - DEPLOYE 3 - DEPLOYE			2 - CLASS B 3 - CLASS C		2 - CDL INTRASTAT 3 - CORRECTIVE LE	State of the State of S	ELECTR	LLY OPERATING Ronic Commun	ICATION	2 - TEST REFUSED 3 - TEST GIVEN, CON	VTÄMINÄTED	
4 - POSSIBLE IN	1 No. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3 - FRONT - RIGHT SIDE	100	D BOTH FRONT	/ SIDE	4 - REGULAR CLASS) V = (1)	4 - FARM WAIVER	1000	DEVICE DIALIN	(TEXTING,TYP G)	ING,	SAMPLE / UNUS/	ABLE	
5 NO APPAREN	IT INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT APP	LICABLE Ment unknowi	N	(OHIO = D) 5 - M/C MOPED ONLY		5 - EXCEPT CLASS			G ON HANDS FR Nication Devi	(EE 1350) 5	4 - TEST GIVEN, RES 5 - TEST GIVEN, RES	A Martin Tollar	
And heading a tribe. The same	TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE				6 - NO VALIO OL		& CLASS B BUS		4 - TALKIN	G ON HAND HEL NICATION DEVI	LD	UNKNOWN		
1 - NOT TRANSP /treated at		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	San San September	ECTION	y to Twee 1	OL ENDORSE)	MENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE	医二角性 医毛膜大线	5-OTHER	ACTIVITY WITH	AN .	ALCOHOL TE	ST TYPE	
2 - EMS 3 - POLICE		8-THIRD - MIDDLE	1 - NOT EJE 2 - PARTIAL			H - HAZMAT M - MOTORCYCLE		RESTRICTIONS 9 - LEARNER'S PER	MIT	ELECTI 6-PASSEN	RONIC DEVICE IGER	医乳油化物质	2 BLOOD		
9 - OTHER / UNK	(NOWN	9 - THIRD - RIGHT SIDE 10 - Sleeper Section	3-TOTALLY	EJECTED		P - PASSENGER		RESTRICTIONS			DISTRACTION THE VEHICLE	100	3 - URINE 4 - Breath		
SAFETY E	QUIPMENT	OF TRUCK GAB	4 - NOT APP	LICABLE		N - TANKER Q - Motor Scooter		10 - LIMITED TO DAY 11 - LIMITED TO EMI	经分分配通行 化烷基	8-OTHER	DISTRACTION O		5 OTHER		
1 - NONE USED 2 - Shoulder B	SELT ANIV HEEN	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	1 - NOTTRAI	RAPPED		R - THREE-WHEEL MO	TORCYCLE	12 - LIMITED - OTHE		THE VE	HICLE /Unknown		DRUG TEST	TYPE	
3 - LAP BELT ON	ILY USED	(NON-TRAILING UNIT, BÙS, Pick-up with Cap)	2 - EXTRICA	TED BY		S - SCHOOL BUS T - Double & Triple	TRAILERS	(SPECIAL BRAK CONTROLS, OR O	ES, HAND	· · · · · · · · · · · · · · · · · · ·	ONDITION		1 - NONE 2 - Blood		
4 - SHOULDER & 5 - Child resti	LAP BELT USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	MECHAN 3 - FREED B	ICAL MEANS Y		X - TANKER / HAZMAT		ADAPTIVE DEVI	CES)	1 - APPARE	NTLY NORMAL		3 - URINE		
FORWARD FA	ACING	13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR		CHANICAL MEA	NŠ	GENDER	errest) (i jarr)	14 - MILITARY VEHI 15 - MOTOR VEHICLE	영경 시작되는 - (Comment of the second s		San	4 - OTHER		
6 - CHILD REST Rear Facino	RAINT SYSTEM - G	(NON-TRAILING UNIT)		F-FEMALE				AIR BRAKES 16-OUTSIDE MIRRO			ISTURBED)		DRUG TEST RI	2000	
7 - BOOSTER SE 8 - Helmet Usi	a tribula Abda 4	15 - NON-MOTORIST 99 - OTHER/UNKNOWN				M - MALE U - OTHER / UNKNOWN	\$4.7 3.1	17 - PROSTHETIC AII	建设有电路控制 化 对	5 - FELL AS	LEEP, FAINTED		1 - AMPHETAMINES 2 - BARBITURATES		
9 - PROTECTIVE	PAOS USED							18-OTHER		FATIGUE 6 - UNDER	ED, ETC. The influenci	Γ	3 - BENZODIAZEPIN	VES	
(ELBOW, KNE 10 - REFLECTIVE											ICATIONS / DRU	IGS .	4 - CANNABINOIDS 5 - COCAINE		
11 - LIGHTING - F /Bicycle on	PEDESTRIAN									9-OTHER/			6-OPIATES/OPIOI	DS	
99 - OTHER/UNK				V-0								Sec. 10. 42	7 - OTHER 8 - NEGATIVE RESU	ILTS	

© OUD DESCRIPE OCCUPANT / WITNESS ADDENDUM								LOCAL REPORT NUMBER 2						
	UNIT#	NAME: LAS	T, FIRST, MIDDLE				очена не	2 0 2 3 - 0 0 0 0 8 L 4 8						
ľ	. 01		IERTON, LEA	H, HELE		0,9,1,9,2,0,0,3								
LNVG	ADDRESS:	STREET, CITY,	STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE									
OCCUPAN			ELL ST ,Kent	t,OH 4424	Redacted per ORC 149,43									
	INJURIES 5	INJURED TAKEN BY	EMS Agency (NAME)		DOT-COMPLIANT O 3 AIR BAG USAGE EJECTION TRAPPED									
	UNIT#	NAME: LAS	T, FIRST, MIDDLE		DAT	E OF BIRTH		AGE	GENDER					
ij	42222													
OCCUPAN	ADDRESS:	: STREET, CITY,	STATE, ZIP			CONTACT PHONE - INCLUDE AREA CODE								
0	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: Medical Facili	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
	UNIT#	NAME: LAS	r, FIRST, MIDDLE	. W. Spiel III in g		ne di Beed Browns		DAT	E OF BIRTH	,	AGE	GENDER		
<u>-</u>														
OCCUPAN	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE				
20	INJURIES	INJURED TAKEN BY	EMS Agency (NAME)		INJURED TAKEN TO: Medical Facili	ITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	UNIT#	NAME: LAS	T, FIRST, MIDOLE	TT to the second state of the second					E OF BIRTH		AGE	GENDER		
			,,,,		AGE GENERAL AGE									
PANT	ADDRESS:	STREET, CITY,	STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE									
OCCUPAN	**********	**************************************				I		T	1	,				
	INJURIES	TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPM USED			DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
Ī		INJU	RIES	SAFET	EQUIPMENT USED		SEATING POS	TION		AIR BAG U	AGE			
	1 - FATA	《各位》 全位《中		1 - NONE US VEHICLE	ED - OCCUPANT		T – LEFT SIDE ORCYCLE DRIV	(FR)						
			RIOUS INJURY Nor injury	HOUSE WELL SERVICE	ULDER BELT ONLY USED 2 - FRONT - MIDD				2 - DEPLOYED FRONT 3 - DEPLOYED SIDE					
		SIBLE INJU	연병 열면 시작들이 살고 있다.	3 - LAP BELT		3 - FRONT = RIGHT SIDE 4 - SECOND - LEFT SIDE			4 - DEPLOYED BOTH					
	5 - NO A	PPARENT I	NJURY	数据4.00mm (A.1.18)	ER & LAP BELT USED ESTRAINT SYSTEM –		ORCYCLE PASS ND – MIDDLE	ENGER)	FRONT/SIDE 5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN					
	a distant Syriam	Santania (Santania)	TAKEN BY	FORWARI) FACING	6 - SEC0	ND – RIGHT SID	E:						
		TRANSPOR ATED AT S		6 - CHILD RE REAR FAI	STRAINT SYSTEM – CING	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE		CAR)	EJECTION 1 - NOT EJECTED					
	2 - EMS			7 - BOOSTER	SEAT							11/6/200 15/44/43		
	3 - POLI			8 - HELMET		10 - SLEEPER SECTION (LLY EJECTE	.D			
	9 - 01 HE	ER / UNKNO	WN DER		IVE PADS USED KNEES, ETC.)				3 - TOTALLY EJECTED 4 - NOT APPLICABLE					
	F-FEMA	केपा, भेट भेट अंट			IVE CLOTHING		PICK-UP WITH CAF ENGER IN UNEI		TRAPPED 1-NOTTRAPPED					
	M - MALE		A/N	/ BICYCLI	G – PEDESTRIAN E ONLY	CARG	O AREA							
	, , , , , ,	- OTHER / UNKNOWN 13 - TRAILING UNIT. 14 - RIDING ON VEHIC							2 - EXTRIC MEANS	ATED BY M	ECHANIC	CAL		
						15 - NON-	TRAILING UNIT) MOTORIST R/UNKNOWN		3 - FREED MEANS	BY NON-ME	CHANIC	AL .		
	NAME: LAS	ST, FIRST, MIDD	e kaj de deleggeringe integratie (196 LE	to a deministration	gergegen ein im der han jier zu zu eine zu zu der Weiter der			DAT	E OF BIRTH	er gazari a fi ugʻalir	AGE	GENDER		
SSENI	Apparac	OTDEET	OTATE 710					CONTROL			<u> </u>	<u> </u>		
MITN	AUUKESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE L	1			
S	NAME: LAST, FIRST, MIDDLE								E OF BIRTH		AGE	GENDER		
WITNESS	ADDRESS: STREET, CITY, STATE, ZIP								CONTACT BLONE					
W	Application of the house of the second of th								CONTACT PHONE - INCLUDE AREA CODE					
ESS	NAME: LAS	ST, FIRST, MIDD	e e e e e e e e e e e e e e e e e e e					DATE OF BIRTH AGE GENDER						
EVE W	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
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