OHIO DEPARTMENT TRAFFIC CRAS	LOCAL REPORT NUMBER*										
PHOTOS TAKEN OH-2 OH-3	LOCAL INFO		2,0,2,0,-,0,0,0,0,4,6,6,								
SECONDARY CRASH	-11	AGENCY NAME*	NCIC*	HIT/SKIP NUMBER OF UNITS UNIT IN ERROR 1 - SOLVED 0 4 98 - ANIMAL							
PRIVATE PROPE		6,7,0,3	L 2 - UNSOLVED	0,1,	9 8 99 - UNKNOWN						
1-CITY	1: CITY, VILLAGE, TOW		CRASH DATE /T	_	CRASH SEVERITY 1 - FATAL						
3-TOWNSHIP	TH LOCATION R	OAD NAME			ROAD TYPE	0,1,0,7,2,0,2,0,7		2 - SERIOUS INJURY SUSPECTED			
ROUTE TYPE ROUTE NUMBER PREFIX 1-NOF	TH			1.0	901	4,1,1,2,8,		3 - MINOR INJURY			
	51	ROAD NAME (ROAD,	MILEPOST, HO	USE #)	ROAD TYPE	LONGITUDE DE		SUSPECTED 4-INJURY POSSIBLE			
ROUTE TYPE ROUTE NUMBER PREFIX 1-NOI 2-SOU 3-EAS	SUNNY	BROOK	,		-8 ₁ 1 ₁ 3 ₁ 5 ₁ 3	- 11122-112-200	5 - PROPERTY DAMAGE				
REFERENCE POINT DIRECTION	ROUTE			ROAD TYPE	KD		NTERSECTION REI	ONLY			
1 - INTERSECTION 1 - NORTH 1 2 - MILE POST 2 - SOUTH	IR - INTERSTATE		HW-HIGHWAY	RD - ROAD		RSECTION OR ON AP					
1 3-HOUSE # 3 2-SOUTH 3-EAST 4-WEST	US - FEDERAL US SR - STATE ROUT	RI	- AVENUE I - BOULEVARD I		SQ - SQUARE ST - STREET	WITHIN INTE	RCHANGE AREA	NUMBER OF APPROACHES			
DISTANCE DISTANCE FROM REFERENCE UNIT OF MEASURE	CR - NUMBERED	COUNTY ROUTE CR			TE - TERRACE						
1 - MILES	TR - NUMBERED	TOWNELLD	- DRIVE I	PI - PIKE	WA - WAY	ROADWAY DIVIDED					
3 0 0 3 3-YARDS				PL - PLACE			1				
LOCATION OF FIRST HARMFUL 1 - ON ROADWAY 9 - CROSS		1		- REAR-TO-REAR	ACT	DIRECTION OF TRAVE		EDIAN TYPE DED FLUSH MEDIAN			
All I	WAY/ALLEY ACCE	1 TWO	MOTOR ,	- BACKING		1 - NORTH 2 - SOUTH	(<4	FEET)			
4 - ON ROADSIDE 12-SHAR	ED USE PATHS OR	AFII	IOLLS III	- ANGLE - SIDESWIPE, SAN	AE DIRECTION	3- EAST 4- WEST	(≥4	DED FLUSH MEDIAN FEET)			
5 - ON GORE TRAIN 6 - OUTSIDE TRAFFIC WAY 13-BIKE		2 - REA 3 - HEA		- SIDESWIPE, OPP - OTHER / UNKNO				DED, DEPRESSED MEDIAN DED, RAISED MEDIAN			
7 - ON RAMP 14-TOLL B - OFF RAMP 99-OTHE	BOOTH R / UNKNOWN						1	Y TYPE) ER/UNKNOWN			
	WORK ZON	IF TYPF	LOCATION	OF CRASH IN W	ODK ZONE	CONTOUR	CONDITIONS	SURFACE			
WORK ZONE RELATED	1 - LANE CLOSU	IRE	1-	BEFORE THE 1ST WARNING SIGN		2	1	2			
WORKERS PRESENT	2 - LANE SHIFT 3 -WORK ON SH		2-	ADVANCE WARNI		1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE			
LAW ENFORCEMENT PRESENT	OR MEDIAN 4 - INTERMITTE	ENT OR MOVING WORK	1	TRANSITION ARE ACTIVITY AREA	A	2 - STRAIGHT GRADE	2 - WET	2 - BLACKTOP, BITUMINOUS,			
ACTIVE SCHOOL ZONE	5-OTHER		1	TERMINATION A	REA	3 - CURVE LEVEL 4 - CURVE GRADE	3 - SNOW 4 - ICE	ASPHALT			
LIGHT CONDITION		WEATH	ER			9 - OTHER/UNKNOWN	5 - SAND, MUD, DIF	3 - BRICK/BLOCK 4 - SLAG, GRAVEL,			
1 - DAYLIGHT 4 2 - DAWN/DUSK		1 - CLEAR 2 - CLOUDY	6 - SNOW 7 - SEVERE	CROSSWINDS			OIL, GRAVEL 6 - WATER (STAND	STONE			
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	SAND, SOIL, DIR		·	MOVING)	9 - OTHER/UNKNOWN						
5 - DARK – UNKNOWN ROADWAY LIGH	G RAIN OR FREE: 'UNKNOWN	ZING DRIZZLE	7 - SLUSH 9 - OTHER/UNKNOWN								
9 - OTHER / UNKNOWN											
NARRATIVE				-			<	Indicate the north direction with			
UNIT 1 WAS TRAVELING	G EASTBO	UND ON M	ELOY				_	an "N" on the compass diagram.			
RD. APPROXIMATELY	300 YARD	S EAST OF									
SUNNYBROOK RD. A I	EER RAN	OUT IN									
FRONT OF UNIT 1 AND	WAS STR	UCK BY TI	HE								
FRONT LEFT FENDER	OF UNIT	1 CAUSING									
MINOR DAMAGE. THI	E DEER W	AS STILL C	N				N NO	T TO SCALE			
SCENE BUT DISABLED				Table States	MEL	7 (81)		and the same of th			
SCEAL BOT DISABLE	AND WA	SDISTATC	HED.								
		alla alla la									
	responses and the same fine the same state of the same	والمستقدة والمستقدات والمستقدات والمستقدات والمستقدات والمستقدات والمستقدات والمستقدات والمستقدات والمستقدات									
CRASH REPORTED DATE /TIME		DATE / TIME		RIVAL DATE / TIN		SCENE CLEARED		REPORT TAKEN BY POLICE AGENCY			
0,1,0,7,2,0,2,0,/,1,7,2,2,0			0.1.0.7				0,/,1,7,4,8	POLICE AGENCY MOTORIST			
TOTAL TIME OTHER ROADWAY CLOSED INVESTIGATION TIME		icer's name* adaway, Jose	eph		CHECKED BY OFI Ennemo:	ser, Jennifer		SUPPLEMENT			
	0 4 5		ADGE NUMBER		Снеске	BY OFFICER'S BADGE	NUMBER*	(CORRECTION OR ADDITION TO MI EXISTING REPORT SENT TO CORD			
	0 4 5 2	1 6	1	1 1	2 2	9	1 1				

LOCAL REPORT NUMBER

2,0,2,0,-,0,0,0,0,4,6,6,

		OWNER NAME: LAST, FIRS			CMNED DRUNE	THE THE ABER COME : THE SAME AS DRIVER)	DAMAGE					
<u>د</u>		KRACH, ALY			£.		DAMAGE SCALE					
z ≥				NCE ,OH 4460)1		2 1 - NONE 3 - FUNCTIONAL DAMAGE 2 2 - MINOR DAMAGE 4 - DISABLING DAMAGE					
6		IAL CARRIER: NAME, ADDR		1102 ,011 4400		RIER PHONE: INCLUDE AREA CODE		UNKNOWN				
							DAMAGED AREA(S)					
		LICENSE PLATE #	VEHICLE	EIDENTIFICATION#	VEHICLE		INDICAT	E ALL THAT APPLY				
	OH	HYA6812		3, B, O, H, T, 5, 7, 7, .	$3 \cdot 0 \cdot 6 \cdot 2 \cdot 0$		12	12				
	INSURAN VERIFIE	INSURANCE COMP.		NSURANCE POLICY #	COLO		12	12				
	- VERIFIE	TYPE OF USE	- 1	586558712 US DOT #	TOWED BY: COM	JOURNEY	10 1 2	10 11 1 2				
	COMMER		IN EMERGENCY RESPONSE	US DUT #	TOWER BY: COM	PANY NAME	9 9 3	9 3				
				HICLE WEIGHT GVWR/GCWR		RDOUS MATERIAL	0 4 -					
	INTERL	HIT/SKIP UNIT		1 - ≤10K LBS. 2 - 10,001 - 26K LBS	MATERIAL RELEASE	CLASS # PLACARD ID #	8 7 5 4	8 7 5 4				
	EQUIPP	ED	0,1	3 - >26K LBS.	PLACARD		7 5	12 7 5				
			7 - MOTORCYCLE 2-WHEELED		13-LIMO (LIVERY VEHICLE		l	12				
		2 - PASSENGER VAN (MINIVAN) 3 - SPORT LTILITY VEHICLE	8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE		19-BUS (16+ PASSENGERS 20-OTHER VEHICLE	24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-WOTORIST	10 11 2					
	UNIT TYPE	4 - PICK UP	10 - MOPED OR MOTORIZED		21 - HEAVY EQUIPMENT	26-BICYCLE	9	1 2 3				
		5 - CAPGOVAN	BICYCLE		22 - AMISIAL WITH RIDER O	27 - TRAIN	_	. 11				
ш		6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 -MOTORHOME	AYIMAL-DRAWN VEHIC	LE 99 - UNIXNOWN OR HIT/SKIP	8 7 5 4					
2		# OF TRAILING UNITS					12 7	5 12				
EHICL		WAS VEHICLE OPERATING IN AU			3 - CONDITIONAL AUTOMAI	ION 9 - UNKNOWN	11 12 1					
>	2	MODE WHEN CRASH OCCURRED	0	1 - DRIVER ASSISTANCE	4 - HIGH AUTOMATION		10 1 2	10 1 2				
		1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOUS MODE LEVEL	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		9 9 3 3	9 10 2 3				
		1 - NONE 6 - BUS - CHARTER/TOUR 11 - FIRE			16-FARM	21 - MAIL CARRIER	- 5 4 -	8 4				
	0 1 2		7 - BUS - INTERCITY 12 - MILITARY		17 - MOWING	99-OTHER/UNKNOWN	8 7 5 4	8 7 5 4				
		3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT			18 - SNOW REMOVAL		7	7 5				
		5 - BUS -TRANSIT/COMMUTER	9 - BUS - OTHER 10 - AMBULANCE	14-PUBLIC UTILITY 15-CONSTRUCTION EQUIPMENT	19 - TOWING 20 - SAFFTY SERVICE PATR	D)	•	6				
	_	Nige III	3 - VEHICLE TOWING ANOTHER		8 - POLE	12 -CONCRETE MIXER	1	12 12 12				
	0,1	INOT APPLICABLE NOTOR VEHICLE		CHACCIC	9 - CARGOTANIC	13 - AUTO TRANSPORTER	12					
	BODY	2 - BUS	4 - LOGGING		10-FLAT BED	14-GARBAGE/REFUSE	R AR	3 9 1 3 9 3				
	TYPE		7 - GRAIN/CHIPS/GRAVEL		11 - DUMP	99-OTHER/UNKNOWN	1					
			4 - BRAKES		9 - MOTOR TROUBLE	99-OTHER/UNKNOWA	6	9 9				
			5 - STEERING 6 - TIRE BLOWOUT	B - TRAILER EQUIPMENT DEFECTIVE	10 - DISABLED FROM PRIOF ACCIDENT			6 6 6				
_							- NO DAMAGE (0] - UNDERCARRIAGE [14]				
	1 1 1	1 - INTERSECTION - MARKED 3 - INTERSECTION - OTHER 6 - BICYCLE LANE CROSSWALK 4 - MIDBLOCK - MARKED 7 - SHOULDES/ ROADSI		6 - BICYCLE LANE 7 - SHOULDER / ROADSIDE	9 - MEDIAN/CROSSING ISL: 10-DRIVEWAY ACCESS	AND 12-FIRST RESPONDER AT INCIDENT SCENE	□-TOP 1 13 1	- ALL AREAS [15]				
	NON-MOTORIST	2 - INTERSECTION - UNMARKED	CROSSWALK		11 - SHARED USE PATHS OF	an aturn tun mandi	H-104 [13]	- ALL AREAS (15)				
	AT IMPACT	CRCSSWALK	5 - TRAVEL LANE - OTHER LOCATIO		TRAILS		- UNIT	NOT AT SCENE [16]				
			1 - STRAIGHT AHEAD	7 - MAXING U-TURN	13 - NEGOTIATING A CURVE		INITIAL POINT OF CONTACT					
	. 3	2-NON-COLLISION 0 1	2 - BACKING		14 - ENTERING OR CROSSIN SPECIFIED LOCATION	G OR LEAVING VEHICLE 19-STANDING	0 - NO DAMAGE					
	ACTION	ACTION 4 - STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 10 - PARKED 10 - PARKED 11 - SLOWING OR STOPPED 12 - DR VERLESS		15 - WALKING, RUNNING,	20 - OTHER NON-MOTORIST		UNIT 15 - VEHICLE NOT AT SCENE					
				11 - SLOWING OR STOPPED	JOGGING, PLAYING	21 - STANDING OUTSIDE	DIAGRAM 13-TOP	99 - UNKNOWN				
				114 1 1000 1 19	16 - WORKING 17 - Pushing Vehicle	DISABLED VEHICLE 99 - OTHER / UNKNOWN	13-104					
							TRAFFIC					
		1 - NONE 2 - FAILURE TO YIELD	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ACD	DARKED BOCKTION	17 - VISION OBSTRUCTION 19 - OPERATING DEFECTIVE	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE	TRAFFICWAY FLOW	TRAFFIC CONTROL				
			9-IMPROPER LANE CHANGE	14-STOPPED OR PARKED	EQUIPMENT	23 - OPENING DOOR INTO	1 - ONE-WAY 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN				
		4 - RAN STOP SIGN	10-IMPROPER PASSING	15 - SWERV AG TO AVOID	19-LCAD SHIFTING/FALLS SPILLING			3 F_ASHER 6-NO CONTROL				
(5)		5 - UNSAFE SPEED 5 - MPROPERTLAN	11 - DROVE OFF ROAD 12 - IMPROPER BACKING	6 - WROLG WAY	29 - IV PROPER CROSSING	99-OTHER IMPROPER ACTION	# of THROUGH LANES	RAIL GRADE CROSSING				
EVENT(S	SEQUENCE	OF EVENTS	er many on previous		- 1		ON ROAD	1 - YOT INVOLVED				
ΕV				EVENTS			2	2 NO VED-ACT VE JAGSNIVS				
	1 1 8	1 - OVERTURNIROLLOVER 8 78 50 25114	6 - EQUIPMENT FAILURE	IT CROSS CENTERLINE — COPOSSITE DIFECT OF F	16 - RAILWAY VESTICLE	22 - WORK ZONE MAINTENANGE EQUIPMENT		3 - NVOLVED-PASSIVE GROSSING				
		3 - IMMERSION	G - BAN DEE BOAD LEET	TRAVEL	TE AND VAL - FARM 18 - ANIMAL - JEER	23 - STRECK BY FALLING,	UNIT / NON-	MOTORIST DIRECTION				
	2	4 - JACKANIFE		12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION	19-ANIMAL - STHER	SHIFTING CARGO OR ANYTHING SET IN MOTION		1 - NORTH 5 - NORTHEAST				
		5 - CARGO / EQUIPMENT LOSS OR SHIFT	13 - OTHER NON-COLLISION 20 - MOTGR VEHICLE IN B 10 - CROSS MEDIAN 14 - PEDESTRIAN TRANSPORT 24 - 0		BY A MOTOR VEHICLE 24-OTHER WOVABLE CBJECT	FROM 4 TO L	3 - SOUTH 6 - VORTHWEST 3 - EAST 7 - SOUTHEAST					
	3L 1 15-PEDALCYCLE 21				21 - PARKED MOTOR VEHIC	LE 24-010CK WUVABEE CBJ2U1	4 - WEST B - SOUTHWES					
		25 - IMPACT ATTENUATOR	COLLISIO 31 - GUARDRAIL END	IN WITH FIXED OBJECT 37 - TRAFFIC SIGN POST	43-CURB	5C - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN				
	4	/ CRASH CUSHION	32 - PORTABLE BARRIER	38-OVERHEAD SIGN POST	44 - DITCH	EQUIPMENT	UNIT SPEED	DETECTED SPEED				
		26 - BRIDGE OVERHEAD STRUCTURE	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	39 - LIGHT / LUMINARIES Support	45 - EMBANKMENT	51 - WALL 52 - Building	0 2 5	1 - STATED / ESTIMATED SPEED				
	اللااد	27 - BRIDGE PIER OR ABUTMENT BARRIER 40-UTILITY POLE		46 - FENCE 47 - MAILBOX	53 - TUNNEL	0,2,5	2 - CALCULATED / EDR					
	61 3 1	28-BRIDGE PARAPET 35-MEDIAN CONCRETE 41-OTHER POST, POLE 1 29-BRIDGE RAIL BARRIER OR SUPPORT			48-TREE 49-FIRE HYDRANT	54 - OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED				
		30-GUARDRAIL FACE 36-MEDIAN OTHER BARRIER 42-CULVERT				99 - OTHER / UNKNOWN						
	1	FIRST HARMFUL EVEN	T MOST	HARMFUL EVENT			2 , 5					

OHO DEPARTMENT MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER					
								2,0,2,0,-,0,0,0,0,4,6,6,					
UNIT # NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER					
0,1 KRACH, ALYSSA, LEA								0,8,0,5,1,9,9,5,2,4, F					
ADDRESS: STREET, CITY, STATE, ZIP 2057 CRESTVIEW AVE ,ALLIANCE ,OH 44601 INJURED TAKEN TO: MEDICAL FACILITY (MAME, CITY) SAFETY EQUIPMENT USED TAKEN BY 10 4									CONTACT	PHONE - INCLUDE AREA CO	ODF		
F INJURIES INJU	INJURES INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY ERUIPMEN										ATD BAC III	SAGE EJECTION	TRANSCO
S TAKE	N I							USED 0 4	DOT-COM	PLIANI	SAGE EJECTION	TRAPPED 1	
OL STATE OPE	ERATOR LICENSE NUMBER OFFENSE CHAP				SE CHAR	GED	LOCAL	OFFENSE DESC	RIPTION		CITATIO	M NUMBER	
O H U	D5468	15					CODE						
🔼 OL CLASS ENDO	RSEMENT CTUPTO 2	RESTRICTION SELECT OF	DIST	VER TRACTED	_	HOL / DRUG SUSPE		CONDITION		OHOL TEST		ORUG TEST(S) T Selectorio 4
4	_,	1 1 11 1 11 1	8Y	1	=	COHOL MAF	KIJUANA	1 .	1	1	1		
UNIT # NAM	ME: LAST, FI	RST, MIDDLE							ا الـــــــــــــــــــــــــــــــــــ	DATE OF BIRTH		AGE	GENDER
									denote the second secon				
ADDRESS: STREE	ET, CITY, STAT	TE, ZIP							CONTACT	PHONE - INCLUDE AREA C	DDE	2	
											11	1 1	
Z TAKE	JRED EI	MS AGENCY (NAME)		INJUREDI	AKEN 10:	MEDICAL FACILITY	NAME CITY)	SAFETY EQUIPMENT	NT DOT-COMPLIANT SEATING POSITION AIR BAG USAGE				TRAPPED
									MC HELMET				
OL STATE OPE	ERATOR LIC	CENSE NUMBER		OFFEN:	SE CHAR	RGED	LOCAL CODE	OFFENSE DESC	RIPTION		CITATIO	ON NUMBER	
	DRSEMENT	RESTRICTION SELECT 19	2 TO 2 DDD	VED	ALCO	NIOL / PRIIO CHERT	OTED	CONSTRUCT	ALC	OHOL TEST		DUO TECTIC	
	ECT UP TO 2	322372		IRIVER ALCOHOL / DRUG SUSPECTED CONDITION			COMPLICA	STATUS TYPE VALUE STATUS			TYPE RÉSUL	T SELECT UP TO 4	
					OT	HER DRUG							
UNIT # NAM	ME: LAST, FI	RST, MIDDLE								DATE OF BIRTH		AGE	GENDER
L ADDRESS AVAIL													
ADDRESS: STREE	ET, CITY, STAT	TE, ZIP							CONTACT	PHONE - INCLUDE AREA O	ODE		
ADDRESS: STREET	IIDED E	MS AGENCY (NAME)		Tanzanen	TAME NO.	MEDICAL PACTURE		Taxaaa aaaaa			1		
TAKE		MIS AGENCY (NAME)		INJURED	IAKEN IU:	MEDICAL FACILITY	HAME, CITY)	SAFETY EQUIPMENT USED	DOT-Cor		AIR BAG U	SAGE EJECTION	TRAPPED
				OFFEN	OFFENSE CHARGED LOCAL OFFENSE			OFFENSE DESC	CRIPTION CITY			DN NUMBER	
OL STATE OPE							CODE				- OTTAIN	WION NOMBER	
OF OFWOOD FILES	DRSEMENT ECT UP TO 2	RESTRICTION SELECT U		VER TRACTED	ALCO	HOL / DRUG SUSPE	CTED	CONDITION	ALC STATUS TY	OHOL TEST		DRUG TEST(S	
0			84	TIMETED	=	LCOHOL MAF	RIJUANA		STATUS TT	VALUE	STATUS	TYPE RESUL	T SELEUTURIO 4
L INJURIES		SEATING POSITION		LIR BAG	01	THER DRUG OL CLASS	:	OL DESTRIC	TIDAYE	DOLUED DIETRIC			
1 - FATAL		1 - FRONT - LEFT SIDE	1 - NOT DEP	T. Districts		1 - CLASS A		OL RESTRIC		1-NOT DISTRACTED		TEST STA	ATUS
2 - SUSPECTED SERIOL 3 - SUSPECTED MINOR		(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOY			2 CLASS B 3 CLASS C		2 - CDL INTRASTAT		2 MANUALLY OPERATING	ICATION -	TEST REFUSED	
4 - POSSIBLE INJURY		3 - FRONT - RIGHT SIDE		ED BOTH FRO	NT/SIDE	4 - REGULAR CLASS		3 - CORRECTIVE LE	WZEZ	DEVICE (TEXTING, TYP DIALING)		SAMPLE / UNUS	
5 - NO APPARENT INJU	JRY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT APP	11027110	G-V	(OHIO = D) 5 - M/C MOPED ONLY		5 - EXCEPT CLASS		3 -TALKING ON HANDS-FR	EE	-TEST GIVEN, RE	
INJURED TAKE		5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	A-DEPLOYI	MENT UNKNO	JWN	6 - NO VALID OL		& CLASS B BUS		COMMUNICATION DEVI 4 - TALKING ON HAND HEL		TEST GIVEN, RE	20112
1 - NOT TRANSPORTED /TREATED AT SCEN		7 - THIRD - LEFT SIDE	E.	JECTION	- W. P. Park	OL ENDORSE	MENT	7 - EXCEPT TRACTO		COMMUNICATION DEVI 5 - OTHER ACTIVITY WITH		ALCOHOL TE	ST TYPE
2 - EMS (MOTORCYCLE SIDE CAR) 1 - NOT EJECT 3 - POLICE - B - THIRD - MIDDLE - 2 - POLICE - 2 - P		CTED H HAZMAT RE			RESTRICTIONS	RESTRICTIONS ELECTR		CTRONIC BEVICE 1 - NONE					
3 - POLICE 9 - OTHER / UNKNOWN		9 - TH IRO - RIGHT SIDE	3 - TOTALLY	LY EJECTED		M - MOTORCYCLE P - PASSENGER		PESTRICTIONS	RMIT	6 - PASSENGER 7 - OTHER DISTRACTION		- URINE	
SAFETY EQUIP	MENT	10-SLEEPER SECTION 3-TP / K D4B	1 V01150P			N TANKER		10-HM11E0 10-01/		INSIDE THE VEHICLE		-BREATH	
1 - NONE USED		11 - FASSENGER IN OTHER ENGLOSED CARGO AREA	T	RAPPED		R-THREE WHEEL MO	TOROVOLE	11 - LITHTED TOEST 12 - LIMITED - OTHE		3 OT REP DISTRACTION THE VEHICLE	errailt if	odit4€ K	
2 - SHOULDER BELT OF 3 - LAP BELT ONLY US		NOW TRAILING UNIT BUS PICK-UP WITH CAP	1 - NOTTRA			3 30#70.803		13 - MECHANICAL D SPECIAL BRAK		9-07HER UNKNOWN		DRUG TEST	TYPE
4 - SHOULDER & LAP B		12 - PASSENGER IN UNENCLOSED		NICAL MEANS	S	T DOUBLE & TRIPLE X - TANKER / HAZMAT	TRAILERS	CONTROLS, OR O	THER	CONDITION	2	-BLOOD	
5 - CHILD RESTRAINT SYSTEM – CARGO AREA FORWARD FACING 13 - TRAILING UNIT		3 - FREED BY NON-MECHANICAL MEANS				14 - MILITARY VEHI		1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMENT		3-URINE 4-OTHER			
6 - CHILD RESTRAINT REAR FACING	SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				GENDER F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	S WITHOUT	3 - EMOTIONAL (E.G. DE RE ANCRY/DISTURBED)	SSED,	RUG TEST R	FSIII T/C)
7 - BOOSTER SEAT		15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRRO		4- ILLNESS	And the second	-AMPHETAMINE	and the second second
8 - HELMET USED	uies.	99 - OTHER / UNKNOWN				U - OTHER / UNKNOWN		17 - PROSTHETIC AL 18 - OTHER	0	5 - FELL ASLEEP, FAINTED FATIGUED, ETC.		BARBITURATES	
9 - PROTECTIVE PADS (ELBOW, KNEES, ET								· ·		6 - UNDER THE INFLUENCE OF MEDICATIONS / DRU	Ε	- BENZODIAZEPII - CANNABINOIDS	
10 - REFLECTIVE CLOTE	and the said					120	- 1	7		ALCOHOL	5	- COCAINE	
11 - LIGHTING - PEDESTRIAN / BICYCLE ONLY										9-OTHER/UNKNOWN	1 1 1 1 1 1 1 1 1 1	6-OPIATES/OPIOIDS 7-OTHER	
99 - OTHER / UNKNOWN				. 4	1.19						100	- NEGATIVE RESL	JLTS