OHIO DEPARTMENT TRAFFIC CRA	ASH REP	L	OCAL REPORT N	UMBER*					
PHOTOS TAKEN OH-2 O	H-3 LOCAL	_INFORMATION			2 10 2 2 2	- , 0 , 0 , 0	1.6	2,20	
SECONDARY CRASH OH-1P 0	SECONDARY CRASH OH-1P OTHER REPORTING AGENCY NAME*					HIT/SKIP 1 - SOLVED	NUMBER OF UNI		IIT IN ERROR 98 - ANIMAL
PRIVATE PROI		, 	e	<u>_U</u>	$0_16_17_10_13_1$	L 2 - UNSOLVED	0_12_1	10 L	99 - UNKNOWN SEVERITY
6 7 1 2-VILLAGE Kon	ion: city, villa f	GE, TOWNSHIP *				0,9,2,4,2,0,2,2,		5 1-FA	
3-10WNSHIP	IORTH LOCAT	TON ROAD NAME			ROAD TYPE	LATITUDE DE		2 - St	RIOUS INJURY ISPECTED
S R 43 2 E-E		$\mathbf{S} \cdot \mathbf{T}$	$ _{14,1_{16},1,3,4_{1}}$	6,2,3		NOR INJURY			
	WEST	TER RENCE ROAD NAME (ROA	D, MILEPOST, HO	USE #)	ROAD TYPE	LONGITUDE DE			JURY POSSIBLE
₩ E - E	AST BEI	RYL			$D_{\perp}R$	-8 ₁ 1 ₁₀ 3 ₁ 5 ₁ 4 ₁	9,1,0		ROPERTY DAMAGE
REFERENCE POINT DIRECTION FROM REFERENCE	In MITTER	OUTE TYPE		ROAD TYPE	DD D04D		INTERSECTION I	RELATED	
1 2-MILE POST 1 S-SOUTH				HW- HIGHWAY LA - LANE	RD - ROAD SQ - SQUARE	X WITHIN INTE	RSECTION OR ON	APPROACH	1
W-WEST	SR-STATE	KOUTE,	3L - BOULEVARD CR - CIRCLE	MP-MILEPOST OV-OVAL	ST - STREET TE - TERRACE	WITHIN INTE	RCHANGE AREA	NUMBE	R OF APPROACHES
DISTANCE DISTANCE FROM REFERENCE UNIT OF MEASURE 1 - MILES	1	ERED COUNTY ROUTE	CT - COURT	PK - PARKWAY	TL - TRAIL		ROADWA	·Υ	
1 5 2 2-FEET 3-YARDS	ROUTE			PI - PIKE PL - PLACE	WA - WAY	ROADWAY DIV	IDED		
LOCATION OF FIRST HARMFU 1 - ON ROADWAY 9 - CRO 2 - ON SHOULDER 10 - DRI 3 - IN MEDIAN 11 - RAI 4 - ON ROADSIDE 12 - SHJ 5 - ON GORE TRA 6 - OUTSIDE TRAFFIC WAY 13 - BIK 7 - ON RAMP 14 - TOL 8 - OFF RAMP 99 - OTH	WO MOTOR EHICLES IN 6 RANSPORT 7 EAR-END 8		R AME DIRECTION POSITE DIRECTION	DIRECTION OF TRAVEL N - NORTH S - SOUTH E - EAST W - WEST N - WEST N - NORTH 1 - DIVIDED FLUSH (< 4 FEET) 2 - DIVIDED FLUSH (≥ 4 FEET) 3 - DIVIDED, DEPRI 4 - DIVIDED, REPRI (ANY TYPE) 9 - OTHER/UNKNOV			SH MEDIAN SH MEDIAN PRESSED MEDIAN SED MEDIAN		
O - OIT (Adam)		C ZONE TYPE	LOCATIO	N OF CRASH IN V	WORK ZONE	CONTOUR	CONDITIO	NS	SURFACE
WORK ZONE RELATED WORKERS PRESENT	1 - LANE C	CLOSURE	I	BEFORE THE 1S WARNING SIGN	T WORK ZONE	1 1	1 1		
LAW ENFORCEMENT PRESENT L	3-WORK	SHIFT/CROSSOVER ON SHOULDER	1	ADVANCE WARN	IING AREA	2 - STRAIGHT GRADE	1 - DRY	1	- CONCRETE
	OR MEE 4 - INTER!	DIAN MITTENT OR MOVING WO	RK 4-	TRANSITION AR ACTIVITY AREA			2-WET 3-SNOW	2	- BLACKTOP, BITUMINOUS,
ACTIVE SCHOOL ZONE	5 - OTHER		5 -	TERMINATION A	AREA	4 - CURVE GRADE	4 - ICE	3	ASPHALT - BRICK/BLOCK
LIGHT CONDITION		WEAT 1 - CLEAR	THER 6 - SNOW			9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL		- SLAG, GRAVEL, STONE
2 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 2 - CLOUDY 7 3 - FOG, SMOG, SMOKE 8 4 - RAIN 9				CROSSWINDS 6 SAND, SOIL, DII G RAIN OR FREE UNKNOWN			6 - WATER (STAI MOVING) 7 - SLUSH 9 - OTHER/UNKN	9	- DIRT - OTHER/UNKNOWN
NARRATIVE								A	Indicate the north
UNIT 1 REPORTED THE	Y WERE	TRAVELING :	IN						an "N" on the compass diagram.
THE CURB LANE SOUT	HBOUN	D ON SOUTH	······································						
WATER STREET, UNIT 1	l REPOR	RTED UNIT 2	***************************************						(i)
MERGED INTO THEIR	LANE CA	AUSING THEN	M TO				1		lot To Scale
STRIKE THE CURB ANI	OFF TI	HE ROADWAY	7 TO						
AVOID A COLLISION. W	/ITNESS	TRAVELING						sa.	
BEHIND UNIT 1 REPOR	TED TH	E SAME.						CHERRALING	
WITNESS IS SPOUSE. U	***************************************				1				
INCIDENT DID NOT OC									
ATTEMPT TO MERGE (OR SWEI	RVE INTO TH	E						BERYL DRIVE
CHRRIANE	***************************************		***************************************			<u>.</u>			
CRASH REPORTED DATE / TIME	DISPAT	CH DATE / TIME	ARE		-	* * * * * * * * * * * * * * * * * * * *			
									OTORIST
TOTAL TIME OTHER ROADWAY CLOSED INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*		CHECKED BY OFFICER'S NAME*					UPPLEMENT
	ŀ	OFFICER'S I	BADGE NUMBER	*	Снескев	BY OFFICER'S BADGE I	NUMBER*	(0	ORRECTION OR ADDITION AN EXISTING REPORT SENT TO ODPS)
		l l	ll	1					

LOCAL REPORT NUMBER

2 10 2 2 2 - 10 10 10 11 6 2 2 20

						2 0 2 2 - 0	00101220				
UNIT # $0 \cdot 1$	INIT # OWNER NAME: LAST, FIRST, NIDDLE (X) SAME AS DRIVER) 1 1 LABRIOLA, MONICA, MARIA				HUG TOCK LUDG 1 AND CYPIC TO BUREA!	DAMAGE DAMAGE SCALE					
OWNER A	DORESS: STREET, CITY, STATE	, ZIP (X) SAME AS DRIVER)				1 - NONE 3 - FUNCTIONAL DAMAGE 2 2 - MINOR DAMAGE 4 - DISABLING DAMAGE					
	NDUSTRY RI		,OH 44200	COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	Z-WINON DAW	UNKNOWN				
						DAMAGED AREA(S) INDIGATE ALL THAT APPLY					
LP STATE	LICENSE PLATE # HXD7840		EIDENTIFICATION # $\mathbf{E}_1\mathbf{B}_1\mathbf{S}_1\mathbf{J}_1\mathbf{N}\mathbf{G}_1\mathbf{G}_1\mathbf{S}_1$	9 ₁ 1 ₁ 2 ₁ 2 ₁ 0 ₁ 1 ₁	AR VEHICLE MAKE Mercedes-B	!	E ALL THAT APPLY				
	NCE INSURANCE COMP	ANY	NSURANCE POLICY #	COLOR	VEHICLE MODEL	11 12	11 12 1				
INSURAL VERIFI		E 9	92439114	WHI	CLA-CLAS	S ₀ 1 2	10 11 1 2				
СОММЕ	TYPE OF USE RCIAL GOVERNMENT [IN EMERGENCY RESPONSE	US DOT #	TOWED BY: COMPAN	YNAME	9 9 3 3	9 9 3 3				
INTEDI	nev -		HICLE WEIGHT GVWR/GCWR		US MATERIAL CLASS # PLACARD ID #						
INTERI DEVICE EQUIP	HIT/SKIP UNI		1 - ≤10K LBS. 2 - 10,001 - 26K LBS	1 1 1 001 04000		8 4	8 7 8 7				
	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	3 - >26K LBS.	18-LIMO (LIVERY VEHICLE)	23-PEDESTRIAN/SKATER	6 11	12 6				
0.1	2 - PASSENGER VAN (MINIVAN)			19-BUS (16+ PASSENGERS)	24 - WHEELCHAIR (ANY TYPE)	10	1 2				
UNIT TYPE	3 - SPORT UTILITY VEHICLE 4 - PICK UP	9 - AUTOCYCLE 10 - MOPED OR MOTORIZED		20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT	25-OTHER NON-MOTORIST 26-Bicycle	9	9 3 3				
	5 - CARGO VAN	BIGYCLE 11 - ALL TERRAIN VEHICLE	**	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 -TRAIN	-					
, 0 ,	0 - Init ()-13 dente)	(ATV/UTV)	17 - MOTORHOME	ANDRAC-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8 🗸	4				
	# OF TRAILING UNITS	TANAMANA	A NA AUTOMATION	2 (ANIDITIANIE) 1100-1110-1110	O MARZALANSIN	11 12 7	6 5 11 12 1				
2	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED), U	1 - DRIVER ASSISTANCE	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION	NWONANU - K	10 1 2	10 1 2				
<u></u>	1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOUS MODE LEVEL	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		9 9 3 3	9 9 3 3				
	1 - NONE	6 - BUS - CHARTER/TOUR	11-FIRE	16-FARM	21 - MAIL CARRIER	8 4 4	8 4 -				
[0,1]	2 - TAXI 3 - ELECTRONIC RIDE SHARING	7 - BUS - INTERCITY 8 - BUS - SHITTLE		17 - MOWING 18 - SNOW REMOVAL	99-OTHER/UNKNOWN	8 7 6 5 4	8 7 6 5 4				
		9 - BUS - OTHER		19-TOWING		7 6	7 6				
	5 - BUS - TRANSIT/COMMUTER	10-AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL			12 12 12				
10,1 ₁	1 - NO CARGO BODY TYPE /NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	A111 AA16	8 - POLE 9 - CARGOTANK	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER	12					
	2 - BU\$	4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX	10-FLAT BED	14-GARBAGE/REFUSE	l a Mar. '	3 9 9 3				
TYPE			7 - GRAIN/CHIPS/GRAVEL	11-DUMP	99-OTHER/UNKNOWN						
للا		4 - BRAKES 5 - STEERING	•	9 - MOTOR TROUBLE 10 - Disabled from Prior	99-OTHER/UNKNOWN	6					
VEHICLE DEFECTS		6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT			6 6 6				
	1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12-FIRST RESPONDER	- NO DAMAGE [(]				
NON-MOTORIST	CROSSWALK 2 - INTERSECTION – UNMARKED	4 - MIDBLOCK - MARKED CROSSWALK		10 - DRIVEWAY ACCESS	AT INCIDENT SCENE 99-OTHER/UNKNOWN	☐-TOP [13]	-ALL AREAS [15]				
LOCATION AT IMPACT	ADADAURN 17	5 -TRAVEL LANE - OTHER LOCATION	B - SIDEWALK	11 - SHARED USE PATHS OR TRAILS	77-VIALAT GIRAONI	□-UNIT	NOT AT SCENE [16]				
	1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18-APPROACHING	INITIAL	POINT OF CONTACT				
1 1		2 - BACKING 3 - Changing Lanes	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION	OR LEAVING VEHICLE 19-standing	0 - NO DAMAGE					
ACTION	4 - STRUCK PRE-CRASH	4 - OVERTAKING/PASSING		15 - WALKING, RUNNING, JOGGING, PLAYING	20 - OTHER NON-MOTORIST	0 2 1-12 - REFERT DIAGRAI	O UNIT 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN				
	5 - BOTH STRIKING ACTIONS & STRUCK	5 - MAKING RIGHTTURN 6 - MAKING LEFTTURN	11-SLOWING OR STOPPED In Traffic	16 - WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE	13 - TOP	77 - CINKING WIN				
	9-OTHER/UNKNOWN	O - INANCITO EST 1 TOTAL	12-DRIVERLESS	17 - PUSHING VEHICLE	99-OTHER/UNKNOWN		TRAFFIC				
		7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ACD/	NADIZED DOCUTION	17 - VISION OBSTRUCTION 18 - 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				
		10-IMPROPER PASSING 11-DROVE OFF ROAD	15 - SWERVING TO AVOID	19-LOAD SHIFTING/FALLING/ SPILLING	ROADWAY 99-OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL				
CIRCUMSTANCES	6-IMPROPERTURN	12-IMPROPER BACKING	16-WRONG WAY	20 - IMPROPER CROSSING		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING				
SEQUENCE	OF EVENTS		NAM ACTIVATOR			4 ,	1 - NOT INVOLVED 1 2 - INVOLVED-ACTIVE CROSSING				
31 0 1 0 1		6 - EQUIPMENT FAILURE	********	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING				
		7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	TRAVEL	17 - ANIMAL — FARM 18 - ANIMAL — DEER	EQUIPMENT 23-STRUCK BY FALLING,	UNIT / NON	MOTORIST DIRECTION				
1 1		9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY	19-ANIMAL - OTHER	SHIFTING CARGO OR ANYTHING SET IN MOTION		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST				
	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10-CROSS MEDIAN	14-PEDESTRIAN	20 - MOTOR VEHICLE IN TRANSPORT	BY A MOTOR VEHICLE 24-OTHER MOVABLE OBJECT	FROM 1 TO L	2 3 - EAST 7 - SOUTHEAST				
3 LO L 8		COLLISIO	- 15-PEDALCYCLE N with fixed object	21 - PARKED MOTOR VEHICLE			4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN				
4	LAGRAN AMAINTAN	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB	50-WORK ZONE MAINTENANCE EQUIPMENT						
	26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER		44 - DITCH 45 - EMBANKMENT	51 - WALL	UNIT SPEED	DETECTED SPEED 1 - STATED / ESTIMATED SPEED				
5	STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL Barrier	SUPPORT 40 - UTILITY POLE	46 - FENCE 47 - MAILBOX	52-8UILDING 53-Tunnel	LL	2 - CALCULATED / EDR				
	28 - BRIDGE PARAPET 29 - BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE	48-TREE	54 - OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED				
4		36 - MEDIAN OTHER BARRIER	42 - CULVERT	49 - FIRE HYDRANT	99-OTHER/UNKNOWN	Si 					
L	FIRST HARMFUL EVEN	T MOSTH	ARMFUL EVENT			L					

LOCAL REPORT NUMBER
[2,0,2,2,-,0,0,1,6,2,2,0,...]

UNIT#	OWNER NAME: LAST, FIR)	OWI		(Ballon se voinell)	DAMAGE					
$\lfloor 0 \rfloor 2 \rfloor$	CALANNI, J	OHN, R			- , - ,	<u></u>	DAMAGE SCALE					
OWNERA	DDRESS: STREET, CITY, STATE	E, ZIP (X) SAME AS DRIVER)	OTT 449.00				1 - NONE 3 - FUNCTIONAL DAMAGE					
	RYN MAWR		,UH 44266			DUGUE	2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN					
COMMERC	CIAL CARRIER: NAME, ADD	RESS, CITY, STATE, ZIP		l. Gor	MMERCIAL CARRIER	PHONE: INCLUDE AREA CODE						
LP STATE	LICENSE PLATE #	VEUTOL	E IDENTIFICATION #		VEHICLE YE	AR VEHICLE MAKE	DAMAGED AREA(S) INDICATE ALL THAT APPLY					
	HVN1327		MM3 KC5 0 6	8:4:5:	2 0 1		12		40			
			INSURANCE POLICY#		COLOR	VEHICLE MODEL	11 12 1		11 12			
X INSURA VERIFI	GEICO		14447182496		BLK	QX60	10	2	10			
	TYPE OF USE		US DOT #	TOWE	D BY: COMPAN	Y NAME	10 2	1	10, 22			
COMME	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE	<u> </u>	ـــــا ر	UATARRA	III A I I WENT A I	9 9 3	3	9 3 3			
INTER	LOCK	#OCCUPANTS VI	EHICLE WEIGHT GVWR/GCWR 1 - <10K LBS.			US MATERIAL CLASS # PLACARD ID #						
DEVICE EQUIP	E HIT/SKIP UNI		2 - 10,001 - 26K LBS					4				
- LUOIT		01	3 - >26K LBS.		PLACARD		7 6	11 12	1 6 8			
	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED			VERY VEHICLE) - Passengers)	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE)	10 /	12	\geq ,			
0.1	3 - SPORT HITH ITY VEHICLE	9 - AUTOCYCLE		20 - OTHER V		25 - OTHER NON-MOTORIST	"	10 2	7			
UNIT TYPE	4 - PICK UP	10 - MOPED OR MOTORIZED		21 - HEAVY E		26-BICYCLE	9	9 3	3			
	5 - CARGO VAN	BICYCLE	16-FARM EQUIPMENT		WITH RIDER OR	27 - TRAIN	-	8 4	-			
	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-	DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	<u> </u>	√ 4			
	# of TRAILING UNITS						12	برپ	5 12			
7	WAS VEHICLE OPERATING IN AU	ITONOMOUS	0 - NO AUTOMATION	3 - CONDITIO	NÁL AUTOMATION	9 - UNKNOWN	12		12			
,	MODE WHEN CRASH OCCURRED		1 - DRIVER ASSISTANCE	4 - HIGH AUT	FOMATION		10	2	10 11 2			
2	1-YES 2-NO 9-OTHER/UNK	Nototionious	2 - PARTIAL AUTOMATION	5 - FULL AU	TOMATION		10 2	3	9 10 2 3			
	1 - NONE	MODE LEVEL 6 - BUS - CHARTER/TOUR	11 - FIRE	16-FARM		21 - MAIL CARRIER	8 4)*	8 3 4			
0.1	2 - TAXI	7 - BUS - INTERCITY		17 - MOWING		99-OTHER/UNKNOWN	8 7 5	4	8 7 5 4			
SPECIAL	3 - ELECTRONIC RIDE SHARING			18-SNOW RE		W VIII VIII VIII VIII VIII VIII VIII VI	7 6					
FUNCTION	4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14-PUBLIC UTILITY	19-TOWING			6		6			
	5 - BUS - TRANSIT/COMMUTER	10-AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20-SAFETY	SERVICE PATROL			12	12 12			
Λ 1	1 - NO CARGO BODY TYPE			8 - POLE		12-CONCRETE MIXER	12	ā				
	/ NOT APPLICABLE 2 - BUS	MOTOR VEHICLE		9 - CARGOTA		13-AUTOTRANSPORTER	9.9	/ * \				
BODY	2 - 805	4 - LOGGING	H ORANIANIANANANANANANANANANANANANANANANANA	10 - FLAT BE	D	14-GARBAGE/REFUSE	• 	3	9 7 3 9 9 3			
TYPE			7 - GRAHMONT SYGNAVEL	11-DUMP		99-OTHER/UNKNOWN		*	'B			
L1_	1 - TURN SIGNALS	4 - BRAKES		9 - MOTORTI		99-OTHER/UNKNOWN	6		j a			
VEHICLE	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT DEFECTIVE	10-DISABLE ACCIDEN	D FROM PRIOR			6	6 6			
DELECTO	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DE1 E0117E	NOUIDEN			☐-NO DAMAGE	[0] [] - U	NDERCARRIAGE [14]			
	1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER			CROSSING ISLAND	12-FIRST RESPONDER	_	_				
NON-MOTORIST	CROSSWALK 2 - INTERSECTION - UNMARKED	4 - MIDBLOCK - MARKED CROSSWALK		10-DRIVEW		AT INCIDENT SCENE 99-OTHER/UNKNOWN	□-TOP [13]	☐ - Al	LL AREAS [15]			
LOCATION AT IMPACT	CROSSWALK	5 -TRAVEL LANE - OTHER LOCATIO		TRAILS	USE PATHS OR	77-VITICAT UNANOMA	□ -UN	IT NOT AT SCE	NE [16]			
AT IMPAGE	1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN		TING A CURVE	18-APPROACHING						
	A. 11511 ASI (1554)				IG OR CROSSING	OR LEAVING YEHICLE		AL POINT OF CO				
1	3-STRIKING 0 1	2 - BACKING 3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE		ED LOCATION	19-STANDING	0 - NO DAM/		- UNDERCARRIAGE			
ACTION	4. STRUCK PRE-URASH	4 - UVERTAKING/PASSING		15 - WALKING	3, RUNNING, , PLAYING	20-OTHER NON-MOTORIST	U U 1-12 - REFE DIAG	3 8 8 8	- VEHICLE NOT AT SCENE - UNKNOWN			
	5 - BOTH STRIKING ACTIONS		11 - SLOWING OR STOPPED	16 - WORKIN		21 - STANDING OUTSIDE DISABLED VEHICLE	13 - TOP	99	- UNKNOWN			
	& STRUCK 9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	IN TAKET TO	17 - PUSHING		99-OTHER/UNKNOWN						
	1 - NONE	7 - LEFT OF CENTER		17. VISIAN A	BSTRUCTION	21 - LYING IN ROADWAY		TRAFFIC				
	2 - FAIL URE TO YIELD	8-FOLLOWING TOO CLOSE / ACI	ALBURA BARITIAN		NG DEFECTIVE	22 - NOT DISCERNIBLE	TRAFFICWAY FLOW 1 - ONE-WAY		AFFIC CONTROL ROUNDABOUT 4-STOP SIGN			
0.9.	3 - RAN RED LIGHT	9-IMPROPER LANE CHANGE	14-STOPPED OR PARKED	EQUIPME	ENT	23-OPENING DOOR INTO			ROUNDABOUT 4 - STOP SIGN SIGNAL 5 - YIELD SIGN			
	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY 15-SWERVING TO AVOID	19 - LOAD SH SPILLING	IFTING/FALLING/	ROADWAY	2 - TWO-WAY	1 1 1	FLASHER 6 - NO CONTROL			
CIRCUMSTANCES	5 - UNSAFE SPEED	11 - DROVE OFF ROAD			ER CROSSING	99 - OTHER IMPROPER ACTION	# or TUDOUCU LANCE	DAY	OD ADE ADARONIA			
	6-IMPROPERTURN	12-IMPROPER BACKING		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			# OF THROUGH LANES ON ROAD		GRADE CROSSING NOT INVOLVED			
SEQUENCE	OF EVENTS		NON-COLLIETON				. 4 ,		INVOLVED-ACTIVE CROSSING			
1 1 3	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE		16 - RAILWAY	VEHIÇLE	22 - WORK ZONE MAINTENANCE			NVOLVED-PASSIVE CROSSING			
1 1 3	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	17 - ANIMAL		EQUIPMENT	*****	AN MARATTE	DIDECTION			
	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	12. DOMANIUI I DIMANNAV	18-ANIMAL		23 - STRUCK BY FALLING, SHIFTING CARGO OR	UNIT/N	ON-MOTORIST I	DIRECTION VORTH 5-NORTHEAST			
2[]	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	12 ATUED NAM CALLICIAN	19 - ANIMAL 20 - MOTOR V		ANYTHING SET IN MOTION		2 - 9	SOUTH 6-NORTHWEST			
	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10-CROSS MEDIAN	14 - PEDESTRIAN	TRANSPO	TRC	BY A MOTOR VEHICLE 24-Other Movable object	FROM 1 TO	2 3-8	EAST 7 - SOUTHEAST			
3		861156			MOTOR VEHICLE				WEST 8 - SOUTHWEST			
I .	25 - IMPACT ATTENUATOR	COLLISIO 31-GUARDRAIL END	N WITH FIXED OBJECT 37-Traffic sign post	- STRU 43-CURB	GK.	50 - 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	AUGRARM	45 - EMBANK	MENT	51 - WALL			1 - STATED / ESTIMATED SPEED			
5	27 - BRIDGE PIER OR ABUTMENT	34-MEDIAN GUARDRAIL Barrier	40 11711 1737 001 5	46 - FENCE 47 - MAILBOX	ŧ	52 - BUILDING 53 - Tunnel		L	J 2-CALCULATED/EDR			
	28-BRIDGE PARAPET	35 - MEDIAN CONCRETE	41 - OTHER POST, POLE	48 - TREE	,	54 - OTHER FIXED OBJECT	POSTED SPEED		3 - UNDETERMINED			
6	29 - BRIDGE RAIL 30 - GUARDRAIL FACE	BARRIER 36-Median Other Barrier	UB CIEDDURT	49 - FIRE HY	DRÄNT	99-OTHER/UNKNOWN	FUSIEU SPEEU					
I .	TOST HADNEHI EVEN						4 1 1					
	EIDET HADRIEIT EVEL	CE I MACCEL	4.5.1104C112 EVENT					1				

STRUBBLE SATERIA MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER							
										2,0,2,2,-,0,0,0,1,6,2,2,0					
UNIT#	1 '	FIRST, MIDDLE OLA, MONICA,	MAR	TA					DATE OF BIRTH AGE GENDER 0 8 2 7 1 9 7 6						
	STREET, CITY, ST		111711	117						PHONE - INCLUDE AREA C					
ADDRESS:	NDUST	RY RD ,Rootstov	vn ,OH	[44 2 60	6				L	······································					
INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED TA	AKEN TO:	: MEDICAL FACILIT	Y (NAME, GITY)	SAFETY EQUIPMENT USED	DOT-Co	MPLIANI	N AIR BAG	USAGE EJECTION	TRAPPED		
	BY L	IGENSE NUMBER		OFFENS	E OUAS	ocen .	Locar	0,4	MC HELMET 0 1 1						
¥4	UPERAIUR L	TOCUSE NOMBEK		OFFENSI	E UHAR	(uEU	LOCAL	OFFENSE DESC	K1P110N		CITAT	TION NUMBER			
O H OL CLASS	ENDORSEMENT SELECT UPTO2	RESTRICTION SELECT					CONDITION		OHOL TEST	OTATUS I	DRUG TEST(S				
, 4 ,	SELECT OF TOZ		BY	TRACTED 1			ARIJUANA	l. ₁ .	STATUS T	YPE VALUE	STATUS	TYPE RESULT	SELECT UPTO 4		
UNIT#	NAME: LAST,	FIRST MIDDLE			L 01	THER DRUG	***************************************	1	_1_	DATE OF BIRTH		AGE	GENDER		
. 0 . 2 .		NNI, JOHN, R							0.7	1 1 1 1 9	.5.6		GENDER		
	: STREET, CITY, ST				······································					PHONE - INCLUDE AREA C		<u>~ </u>	<u> </u>		
=	RYN MA	AWR ST ,Ravenn	a ,OH	44266))						
2	INJURED TAKEN BY	EMS AGENCY (NAME)		INJUREDTA	AKEN TO:	: MEDICAL FACILIT	Y (NAME, CITY)	USED	□DOT-Co	MPLIANT	AIR BAG	USAGE EJECTION	TRAPPED		
OL STATE		ICENSE NUMBER		OFFENSI	Е СНАП	RGED	LOCAL	0 4		LMET 0 1	DITAT	1			
O, H,				331.0		. vy ## PF	CODE	Driving in M			1	CITATION NUMBER 21938			
<u> </u>	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT					CONDITION		OHOL TEST YPE VALUE	STATUS	DRUG TEST(S)				
. 4 .], ,	BY	1		LCOHOL M. THER DRUG	ARIJUANA	1	1	1	1	1			
UNIT#	NAME: LAST,	FIRST, MIDDLE	<u> </u>		∟ ∪	וובת טמטע				DATE OF BIRTH		AGE	GENDER		
L1															
ADDRESS:	: STREET, CITY, ST	ATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
0	T			T				1			1				
STADDRESS:	INJURED TAKEN BY	EMS AGENCY (NAME) INJURE			NJURED TAKEN TO: MEDICAL FACILITY (NAME, GITY) USED USED			□ DOT-Co		N AIR BAG	USAGE EJECTION	TRAPPED			
OL STATE		ICENSE NUMBER		OFFENSE				OFFENSE DESC				TATION NUMBER			
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OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT	DIS.	VER TRACTED		HOL / DRUG SUS		CONDITION	ALC STATUS T	OHOL TEST YPE VALUE	STATUS	DRUG TEST(S TYPE RESULT) Eselect up 104		
, ,			BY			COHOL M.	ARIJUANA					, , , ,	י וו ון		
CONTRACTOR STATE	JRIES	SEATING POSITION		IR BAG	2.01 (c. 10)	OL CLA	SS	OL RESTRIC	Constitution of the state of	DRIVER DISTRACT	ION	TEST STA	TUS.		
1 - FATAL 2 - Suspected	SERIOUS INJURY	1-FRONT-LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP 2 - DEPLOYI			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER 2 - CDL INTRASTAT	the state of the	1 - NOT DISTRACTED 2 - MANUALLY OPERATIN		1 - NONE GIVEN 2 - TEST REFUSED			
3 - SUSPECTED	MINOR INJURY	2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOYI	ED SIDE	T/CINE	3 - CLASS C		3 - CORRECTIVE LE		ELECTRONIC COMMUN DEVICE (TEXTING, TYP	ICATION !	3 - TEST GIVEN, CON SAMPLE / UNUSA			
4 - POSSIBLE IN 5 - NO APPAREN		4 - SECOND – LEFT SIDE (Motorcycle passenger)	4 - DEPLOYE 5 - NOT APP				4 - FARM WAIVER 5 - EXCEPT CLASS	N BUS	DIALING) 3 -TALKING ON HANDS-FREE		4 - TEST GIVEN, RESULTS KNOWN				
INJURED	TAKEN BY	S - SECOND - MIDDLE	9 - DEPLOYI	MENT UNKNOW	VN .	5 - M/C MOPED ONL) 6 - NO VALID OL		6 - EXCEPT CLASS & CLASS B BUS		COMMUNICATION DEV 4 - TALKING ON HAND-HEI	CE	5 - TEST GIVEN, RES Unknown	SULTS		
1 - NOT TRANSP /Treated at		6 - SECOND - RIGHT SIDE 7 - Third - Left side	E.J	ECTION	7-EXCEPT TRACT			7 - EXCEPT TRACTO		COMMUNICATION DEVI 5 - OTHER ACTIVITY WITH	CE AN	ALCOHOL TES	ST TYPE		
2 · EMS		(MOTORCYCLE SIDE CAR) 8-THIRD - MIDDLE	1 - NOT EJE	CTED		H - HÁZMAT		RESTRICTIONS		ELECTRONIC DEVICE 6 - PASSENGER		1 - NONE 2 - BLOOD			
3-POLICE 9-OTHER/UNK	KNOWN	9-THIRD - RIGHT SIDE	2 - PARTIAL 3 - TOTALLY	LY EJECTED Ejected		M - MOTORCYCLE P - Passenger		9 - LEARNER'S PER RESTRICTIONS		7 - OTHER DISTRACTION		3 - URINE			
SAFETY E	QUIPMENT	1.10 - SLEEPER SECTION OF TRUCK CAB	4 - NOT APP	LICABLE		N - TANKER Q - MOTOR SCOOTER		10 - LIMITED TO DAY	44, 15, 8, 9, 9, 9,	INSIDE THE VEHICLE 8-OTHER DISTRACTION O	UTSIDE	4 - BREATH 5 - OTHER			
1 - NONE USED	BELT ONLY USED	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	1. 1 - NOTTRA	RAPPED	in Artifet of	R - THREE-WHEEL I	in all series to the	12 - LIMITED - OTHE	경험에서 이 그림 없는	THE VEHICLE 9-OTHER/UNKNOWN		DRUG TEST	TYPE		
3 - LAP BELT ON	NLY USED	(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	2 - EXTRICA	TED BY		S - SCHOOL BUS T - Double & Tripl	.E TRAILERS	13 - MECHANICAL DI (SPECIAL BRAK) CONTROLS, OR O	S, HAND	CONDITION		1 - NONE 2 - BLOOD			
	& LAP BELT USED RAINT SYSTEM –	12 - PASSENGER IN UNENCLOSED CARGO AREA	3 - FREED B			X - TANKER / HAZM	医动物性性 節報	ADAPTIVE DEVI	CES)	1 - APPARENTLY NORMAL	20,70787	3 - URINE			
FORWARD FA	ACING RAINT SYSTEM -	13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR	NON-ME(CHANICAL MEA	ANS	GENDE	IR	15 - MOTOR VEHICLE		2 - PHYSICAL IMPAIRMEN 3 - EMOTIONAL (E.G., DEPRI	SSED,	4 - OTHER			
REAR FACING	G	(NON-TRAILING UNIT)				F - FEMALE M - Male		AIR BRAKES 16 - OUTSIDE MIRRO	R	ANGRY, DISTURBED) 4 - ILLNESS		DRUG TEST RE	1 2 2 3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		
7 - BOOSTER SE 8 - HELMET US		99 - OTHER / UNKNOWN				U - OTHER / UNKNOW	/N	17 - PROSTHETIC ALI		5 - FELL ASLEEP, FAINTED FATIGUED, ETC.	,	2 - BARBITURATES			
9 - PROTECTIVE (ELBOW, KNE								· 18-OTHER		6- UNDER THE INFLUENCE OF MEDICATIONS / DRU		3 - BENZODIAZEPIN 4 - CANNABINOIDS	ES		
10 - REFLECTIVE	CLOTHING									/ALCOHOL	40	5 - COCAINE)ė		
11 - LIGHTING - I / BICYCLE ON	NLY									9-OTHER/UNKNOWN		6-OPIATES/OPIOIC 7-OTHER	V)		
99-OTHER/UNK	CNOWN		er Gales									8 - NEGATIVE RESU	LTS		

SHIP DEPARTMENT OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER							
									2,0,2,2,-,0,0,0,1,6,2,2,0,_,					
UNI	T #	NAME: LAS	T, FIRST, MIDDLE			· ·		DATE OF BIRTH AGE GENDER						
L	FSS	STREET, CITY,	STATE 719					CONTACT PHONE - INCLUDE AREA CODE						
OCCUPAN ADDR		01 ((22), 011 1)	VIAIL, ZIF		•			TO THE WAR WATER AND THE AND T						
E INJUR	IES	INJURED	EMS Agency (NAME)		INJURED TAKEN TO: Medical Facility	TY (NAME, CITY)	SAFETY EQUIPMENT	<u> </u>	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
		TAKEN BY				•	USED	DOT-COMPLIANT MC HELMET		1		1		
UNI.	Τ#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE							
<u> </u>														
INJUR		INJURED TAKEN							SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
1								MC HELMET		<u></u>	1			
UNI.	Γ#	NAME: LAS	T, FIRST, MIDDLE					ĐAT	E OF BIRTH		AGE	GENDER		
L Anns	FSS	STREET, CITY,	STATE 71D					CONTACT PHONE	- 100 Upc 4054 00					
ADDR		0111221/0111/	31774 211					CONTROLL	- INCEODE AREA COI	JE.				
INJUR	IES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILIT	TY (NAME, CITY)	SAFETY EQUIPMENT	DOT 0	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
l		TAKEN BY					USED	DOT-COMPLIANT MC HELMET	11	L	, ,	 1		
UNI.	Γ#	NAME: LAS	T, FIRST, MIDDLE				1	DAT	E OF BIRTH	T	AGE	GENDER		
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ADDR	DRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
	T	Vil III DE D	T							l				
INJUR		INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: Medical Facilit	TY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
			JRIES	SAFETY	PEQUIPMENT USED		SEATING POS	1-1-1		AIR BÁG U	SAGE	L		
1 - 1	ATA	rich weit da		1 - NONE US	ED-	1 - FRON	T – LEFT SIDE		1 - NOT DE	ange kan in distrib				
2 - 9	SUSP	ECTED SE	RIOUS INJURY	建设设施的	OCCUPANT	* 100 Kg 25 15	ORCYCLE DRIV T – MIDDLE	ER) 2 = DEPLOYED FRONT						
	V. S.C.	第 24年前的	NOR INJURY		ER BELT ONLY USED 2 - FRONT - MIDDLE T ONLY USED 3 - FRONT - RIGHT SIDE			조존 (요리에 남았다. 그리다 경기록하다. '무리-그런데 없는 바로에 되면 그렇지 하게 하고 하다. 그 것						
	V. 3	IBLE INJU PPARENT 1			R & LAP BELT USED	ENGER)	Company of the second	DEPLOYED BOTH Front/Side						
					STRAINT SYSTEM -	5 = NOT APPLICABLE								
	9.000	TRANSPOR	TAKEN BY		D FACING 6 - SECOND - RIGHT SIC ESTRAINT SYSTEM - 7 - THIRD - LEFT SIDE			DE 9 - DEPLOYMENT UNKNOWN						
		ATED AT S		REAR FA		CAR)		EJECTI	ON					
A345.0	EMS			7 - BOOSTER		4 - 55 HOW DR	D – MIDDLE D – RIGHT SIDE							
	POLI	47 o 1 1 1 1 1 1 1	NA/AI	8 - HELMET		TO - SLEEPER SECTION C				LLY EJECT				
	JIRE	R / UNKNO	IDER		KNEES, ETC.)	A CANADA SAN AND A	ENGER IN OTH O AREA (NON-TR	化氯化二甲二甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基		3 - TOTALLY EJECTED 4 - NOT APPLICABLE				
F-F	EMÁ	有可能的 网络数 	IDEK		IVE CLOTHING	* * * * * * * * * * * * * * * * * * *	ICK-UP WITH CAI ENGER IN UNE	and a contract of tableton as the first term in the first	E D	\$\$ (4), s				
M - N	/ALE			11 - LIGHTING / BICYCLI	G ← PEDESTRIAN E ONLY	CARG	0 AREA	NOLUGE A						
U - 0	THE	R / UNKNO	WN	99 - OTHER/	UNKNOWN	[[4] 经收收 医多种腺体丛	LING UNIT IG ON VEHICLE	E EVTEDIAD			D BY MECHANICAL			
						(NON-	TRAILING UNIT)	化氯化物 化二氯化二甲酚 医克尔克氏管	MEANS	BY NON-MI	ECHANIC.	ÅI		
							MOTORIST R/UNKNOWN		MEANS		CHANIO			
NAM	E: LAS	T, FIRST, MIDD	LE		그 일을 하는 그 교육을 하는 것이 하는 것이 모양을 하는 것이다.	a≱, kankija Teridabey	<u> </u>	DAT	E OF BIRTH	SMC CARACTER Y	AGE	GENDER		
ED	WA	ARDS,	JASON, GLE	NN				1,1,2,	1,1,9,	7 8		 		
-		STREET, CITY,	•		T 44366			CONTACT PHONE	- INCLUDE AREA GO	DE				
	5115 INDUSTRY RD ,Rootstown, ,OH 44266 NAME: LAST, FIRST, MIDDLE							DATE OF STREET						
MAINELEAGY I ING J. MIDULE						DAI	E OF BIRTH	_ , _ ,	AGE	GENDER				
ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE	INCLUDE AREA CO			لــــــا				
		····									<u></u>			
NAMI	E: LAS	T, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER		
Appr	Ecc.	STREET, CITY,	CTATE 71D			DE BUT TERMS AS MAY 11								
S ADDR	E00:	OINCEI, GIIY,	JIMI E, LIP					CONTACT PHONE - INCLUDE AREA CODE						
I				manufacture to the contract				<u> </u>						