December	OF PUBLIC SAFETY TRAFFIC CRASH	REPORT *DENOTE:	S MANDATORY FIELD FOR SUPPLE	MENT REPORT	·	LOCAL REPORT NUMBER	*
SECONDANY CARD   SPRINGER PROPERTY CITY OF KERT Police   O.G. 7. 0.3 2.2 1.900.02 0.2.2 3.2 1.000.02 0.000.02 0	DHOTOS TAKEN OH-2 X OH-3	LOCAL INFORMATION			2 0 2 4	- 1010101015	5, 3, 9, 2,
COMPATE AND CONTROL TRANSPORT OF THE AND CONTROL TO THE CONTROL TO	X OH-1P OTHER			NCIC*		NUMBER OF UNITS	00 4111144
COMMAN SAMPLE CONTROL LICEATION OF THE PROPERTY OF THE PROPERY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY	PRIVATE PROPERTY	City of Kent Pol	ice	6,7,0,3		0_2_0	2 98 - ANIMAL 99 - UNKNOWN
SOUTH TIPE OF UNDER PRETATE AND ASSESSMENT OF THE ASSESSMENT OF TH	COUNTY* LOCALITY* LOCATION: CI	TY, VILLAGE, TOWNSHIP*			CRASH DATE /	1000)	ISH SEVERITY
PROPERTY   BOUT NUMBER   PRETTY   BOUT NUMB	3-TOWNSHIP				04142024	/13.23 3	
BOUTE TIPE SEVEN NUMBER PART NET ACCESS ON THE PETERSCE BORD AND (ROAD, MILEPOST, ROUSE #)  ROUTE TIPE SEVEN NUMBER PART NET ACCESS ON THE PETERSCE BORD AND (ROAD, MILEPOST, ROUSE #)  ROUTE TIPE SEVEN NUMBER PART NET ACCESS ON THE PETERSCE BORD AND (ROAD, MILEPOST, ROUSE #)  ROUTE TIPE SEVEN NUMBER PART NET ACCESS ON THE PETERSCE BORD AND (ROAD, MILEPOST, ROUSE #)  ROUTE TIPE SEVEN NUMBER PART NET ACCESS ON THE PETERSCE BORD AND (ROAD, MILEPOST, ROUSE #)  ROUTE TIPE SEVEN NUMBER PART NET ACCESS ON THE PETERSCE BORD AND (ROAD) PART NUMBER PART NOT ACCESS ON THE PETERSCE BORD AND (ROAD) PART NUMBER PART NOT ACCESS ON THE PETERSCE BORD AND (ROAD) PART NUMBER PART NOT ACCESS ON THE PETERSCE BORD AND (ROAD) PART NUMBER PART NOT ACCESS ON THE PETERSCE BORD AND (ROAD) PART NUMBER PART NOT ACCESS ON THE PETERSCE BORD AND (ROAD) PART NUMBER PART NOT ACCESS ON THE PETERSCE BORD AND (ROAD) PART NUMBER PART NOT ACCESS ON THE PETERSCE BORD AND (ROAD) PART NUMBER PART NOT ACCESS ON THE PETERSCE BORD AND (ROAD) PART NUMBER PART NOT ACCESS ON THE PETERSCE BORD AND (ROAD) PART NUMBER PART NOT ACCESS ON THE PETERSCE BORD AND (ROAD) PART NUMBER PART NOT ACCESS ON THE PETERSCE BORD AND (ROAD) PART NUMBER PART NOT ACCESS ON THE PETERSCE BORD AND (ROAD) PART NUMBER PART NOT ACCESS ON THE PETERSCE BORD AND (ROAD) PART NUMBER PART NOT ACCESS ON THE PETERSCE BORD AND (ROAD) PART NUMBER PA	ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DE		
ROUTIVE   ROUT	E - EAST	FRANKLIN		$\mathbf{A}_{\perp}\mathbf{V}_{\perp}$	41,1,14,6	5,5,6	
REFERENCE FOINT 1INTERSECTION OF ADDRESS 1IN	ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH	REFERENCE ROAD NAME (RO	DAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE D	ECIMAL DEGREES 4	- INJURY POSSIBLE
REFERENCE FOINT 1INTERSECTION 1INTERSECTIO	E-EAST WW.WEST	MAPLE		$S \setminus T$	-8,1 <sub>b</sub> 3,6,0	2,7,5	
1 NATIONAL PROPERTY   1 NATIONAL PROPE	REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPE				10.7.16/33702
B. SOLIC WORK PROPERTY OF THE	1-INTERSECTION N-NORTH IR	Commence of the Commence of th			☐ WITHIN INTE	RSECTION OR ON APPROA	СН
TOTAL TIME  TOTAL BOOK TO STANCE TOWN STAN	3-HOUSE # E-EAST		The second secon		☐ WITHIN INTE	RCHANGE AREA NUM	BER OF APPROACHES
PART	DISTANCE DISTANCE CR					THE CONTRACT OF THE CONTRACT O	DER OF ALT ROADILES
MOUNT   MAINTERN FIRESTMENT LEVET   1001 SOLUTION   FIRESTMENT MAINTERN FOR STANDARD LEVET   1001 SOLUTION   FIRESTMENT MAINTERN FOR STANDARD LEVET   1001 SOLUTION	FROM REFERENCE UNIT OF MEASURE 1 - MILES TR	- NUMBERED TOWNSHIP				5003-22-2	
1 - NO COLLISION 4 - REART-OPERAR 1.1 - RADICING TO REVENSYALEY ACCESS 1.1 - RADICING TO REVENSYALEY ACCESS 3.1 - RADICING 4 - ON ROADID 5 - ON GONE 5 - ON GONE 6 - OUTSIDE TRAFFIC WAY 1 - SPICE LANGE 7 - ON RAMP 9 - OTHER FATOL SOTTOM 1.1 - ALBEST TRAFFIC WAY 1 - SPICE LANGE TO REAR 1 - ALBEST TRAFFIC WAY 1 - ALBEST TR		ROUTE			ROADWAY DIV	/IDED	
S - BACKING  1. 3-1. MEDIAN 1. 1-LIANLY GRADE GROSS 3. SHARED USE PATHS OR TARLS 5-0. GROSS 5-0. GROSS 6-0. UTSIDE TRAFFLY WY 13-BIRC LAKE 7-0. UTSIDE TRAFFLY WY 13-BIRC LAKE 7-0. UTSIDE TRAFFLY 7-0. UTSIDE	LOCATION OF FIRST HARMFUL EVE	т ти	MANNER OF CRASH COLLISION/IMP	PACT	DIRECTION OF TRAVE	L MEDIAI	N TYPE
4ON ROADSIDE 4ON ROADSIDE 5ON GORE TRAILS 7ON RAMP 1-1-FOLL BOTH 1FOLL BOTH 1FOLL BOTH 1FOLL BOTH 1FOLL BOTH 1ON RAMP 1TOLL BOTH	2 01 01011 050 10 0011/51/4	V/ALLEY ACCECC	BETWEEN 5- BACKING	₹	100 March 200 Ma		
THAILS	1.0.1.	CDADE ODOCCING   3	TWO MOTOR			2 - DIVIDED F	LUSH MEDIAN
- O-OUTSIDE TRAFFIC WAY 13-BIKE LANE - T-OLE BOOTH - T-OLE	TRAILS				W-WEST		
OPT FAMIND   OPT	6 - OUTSIDE TRAFFIC WAY 13-BIKE LAN	E 3-	8 (C.) (C.) (C.) (C.) (C.) (C.) (C.) (C.)				
NONEX CURRENCE   WORKERS PRESENT   1LAKE CLOSUPE   2LAKE SHIFTCROSSOVER   2LANGE WARKING AREA   1STRAIGHT LEVEL   1ORVCETTER   1ORVCETTER   2WET   3SNOW   3TRAINITION AREA   4ROTIVITY AREA   3SNOW   4DRIVE SCHOOL ZONE   2WET   3SNOW   4DRIVE SCHOOL ZONE   4ROTIVITY AREA   4ROTIVITY AREA   4ROTIVITY AREA   4ROTIVITY AREA   4ROTIVITY AREA   4DRIVE SCHOOL ZONE   4DRIV	7 - ON MAINIF						
1-LANE CLOSURE   2-LANE SHIFT/CROSSOVER   2-LANE SHIFT/CROSSOVER   2-LANE SHIFT/CROSSOVER   3-WORK ON SHOULDER   3-WORK ON SHOULD	MODE ZONE DELATED	WORK ZONE TYPE	LOCATION OF CRASH IN V	VORK ZONE	CONTOUR	CONDITIONS	SURFACE
LAW ENFORCEMENT PRESENT   3WORK ON SMOULDER ON MEDIAN   3-TRANSTITION AREA   2-STRAIGHT LEVEL   2-STRAIGHT AREA   3-CURVE LEVEL   3-STOWN A-STRAIGHT LEVEL   2-STRAIGHT AREA   3-CURVE LEVEL   3-STOWN LEVEL   3-STOWN LEVEL   3-STOWN LEVEL   3-STOWN LEVEL   3-STOWN LEVEL   3-STRAIGHT LEVEL   2-STRAIGHT LEVEL   2-ST	1			T WORK ZONE	1 1	1 1	2
LAW ENFORCEMENT PRESENT				ING AREA	1 - STRAIGHT LEVEL	NATIONAL PROPERTY OF THE PARTY	
LIGHT CONDITION  1- DAYLIGHT  1- CLEAR  5- SHOW  1- CLEAR  6- SHOW  1- CLEAR  7- SEVERE CROSSWINDS  7- SEVER CROSSWINDS  7- SEVERE CROSSWINDS  7- SEVER CROSWINDS  7- SEVER CROSSWINDS  7- SEVER CROSSWINDS  7- SEVER CROSWINDS  7- SEVER CROSW	LAW ENFORCEMENT PRESENT	OR MEDIAN		EA	2 - STRAIGHT GRADE	2 - WET	
LIGHT CONDITION  1 - DAYLIGHT  2 - CAMWINDISK 3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - LIGHTED ROADWAY 4 - DARK - LIGHTED ROADWAY 4 - DARK - LIGHTED ROADWAY 4 - DARK - LIGHTED ROADWAY 5 - SLEET, HAIL 5 - SLEET, HAIL 99 - OTHER / UNKNOWN  NARRATIVE  Unit #1 was southbound on Franklin Ave. Unit #2 was riding a Spin eScooter northbound in the southbound  lane to avoid Unit #1 but the units collided.  CRASH REPORTED DATE / TIME 0, 4, 1, 4, 2, 0, 2, 4, / 1, 1, 3, 2, 3, 0, 4, 1, 4, 2, 0, 2, 4, / 1, 1, 3, 5, 0, 4, 1, 4, 2, 0, 2, 4, / 1, 1, 3, 2, 5, 0, 4, 1, 4, 2, 0, 2, 4, / 1, 1, 3, 2, 5, 0, 4, 1, 4, 2, 0, 2, 4, / 1, 1, 3, 5, 0				REA	CO EXPENSED OF PROPERTY	CONTRACTOR	
1 DAVLIGHT 2 DAWN/DUSK 3 DARK - LIGHTED ROADWAY 4 DARK - LIGHTED ROADWAY LIGHTING 5 DARK - LIGHTED ROADWAY LIGHTING 9 OTHER / UNKROWN  NARRATIVE  Unit #1 was southbound on Franklin Ave. Unit #2 was riding a Spin eScooter northbound in the southbound  lane to avoid Unit #1 but the units collided.    CRASH REPORTED DATE / TIME	LIGHT CONDITION	WF	ATHER				
3 - DARK - LIGHTED RADWAY 4 - DARK -	AND A DAY AND A CONTROL OF A CO				7- OTHEROUNINOWN		
4 - RAIN 9 - FREEZING RAIN OR FREEZING DRIZZLE 5 - DARK - UNKNOWN ROADWAY LIGHTING 9 - OTHER / UNKNOWN  NARRATIVE  Unit #1 was southbound on Franklin Ave. Unit #2 was riding a Spin eScooter northbound in the southbound  lane. Unit #2 attempted to swerve to the northbound  lane to avoid Unit #1 but the units collided.  CRASH REPORTED DATE / TIME 04, 1, 1, 3, 2, 3, 0, 4, 1, 4, 2, 0, 2, 4, / 1, 3, 2, 5, 0, 4, 1, 4, 2, 0, 2, 4, / 1, 3, 5, 0  TOTAL TIME ROADWAY CLOSED INVESTIGATION TIME OFFICER'S NAME*  CATABABE NUMBER*  OFFICER'S BADGE NUMBER*  CRECKED BY OFFICER'S BADGE NUMBER*  OFFICER'S BADGE NUMBER*  CRECKED BY OFFICER'S BADGE NUMBER*  OFFICER'S BADGE NUMBER*  CRECKED BY OFFICER'S BADGE NUMBER*  OFFICER'S BADGE NUMBER*  OFFICER'S BADGE NUMBER*  CRICKED BY OFFICER'S BADGE NUMBER*  OFFICER'S BADGE NUMBER*  OFFICER'S BADGE NUMBER*  OFFICER'S BADGE NUMBER*	I i I i i i i i i i i i i i i i i i i i	1 1 1 2 1		WORZ TS			5 - DIRT
NARRATIVE  Unit #1 was southbound on Franklin Ave. Unit #2 was  riding a Spin eScooter northbound in the southbound  lane. Unit #2 attempted to swerve to the northbound  lane to avoid Unit #1 but the units collided.  CRASH REPORTED DATE / TIME  O,4,1,4,2,0,2,4,/,1,3,2,3,0,4,1,4,2,0,2,4,/,1,3,2,3,0,4,1,4,2,0,2,4,/,1,3,2,5,0,4,1,4,2,0,2,4,/,1,3,5,0  TOTAL TIME  ROADWAY CLOSED  INVESTIGATION TIME  OFFICER'S SADGE NUMBER*  OFFICER'S BADGE NUMBER*  CIERCAGE NO OFFICER'S BADGE NUMBER*	4 - DARK - ROADWAY NOT LIGHTED	4 - RAIN				7 - SLUSH	9 - OTHER/UNKNOWN
Indicate the north direction with direction with a "N" on the compass diagram.  Indicate the north direction with direction with a "N" on the compass diagram.  Indicate the north direction with directi		5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOWN	
Unit #1 was southbound on Franklin Ave. Unit #2 was riding a Spin eScooter northbound in the southbound lane. Unit #2 attempted to swerve to the northbound lane to avoid Unit #1 but the units collided.  CRASH REPORTED DATE / TIME  O[4,1,4,2,0,2,4,/,1,3,2,3]  O[4,1,4,2,0,2,4,/,1,3,2	V2 27 - 19 - 19 - 19 - 19 - 19 - 19 - 19 - 1		1 6 9 6 4				Indicate the north
Total Time Roadway Closed Investigation time Total Minutes Officer's Name*  Carnahan, Michael  Officer's Name*  Compass diagram.  Compass		9100000 PB 90000 PB 90000					direction with
Iane. Unit #2 attempted to swerve to the northbound  lane to avoid Unit #1 but the units collided.  CRASH REPORTED DATE / TIME  O[4,1,4,2,0,2,4,/1,3,2,3]  O[4,1,4,2,0,2,4,/1,3,2,3]  O[4,1,4,2,0,2,4,/1,3,2,3]  O[5] GENER SADGE NUMBER*  DISPATCH DATE / TIME  ARRIVAL DATE / TIME  ORDINATION TOTAL TIME  OFFICER'S NAME*  CHECKED BY OFFICER'S NAME*  CHECKED BY OFFICER'S NAME*  CHECKED BY OFFICER'S BADGE NUMBER*  CHECKED BY OFFICER'S BADGE NUMBER*  CHECKED BY OFFICER'S BADGE NUMBER*	Unit #1 was southbound on Fra	nklin Ave. Unit #2	was			47	
CRASH REPORTED DATE / TIME   DISPATCH DATE / TIME	riding a Spin eScooter northbo	ound in the southb	ound				
CRASH REPORTED DATE / TIME   DISPATCH DATE / TIME	lane. Unit #2 attempted to swe	erve to the northbo	und				
CRASH REPORTED DATE / TIME  O 4 1,4 2,0 2,4 / 1,3 2,3   TOTAL TIME  ROADWAY CLOSED  OFFICER'S BADGE NUMBER*  OFFICER'S BADGE NUMBER*  CHECKED BY OFFICER'S BADGE NUMBER*							
CRASH REPORTED DATE / TIME  OFFICER'S NAME*  CHECKED BY OFFICER'S BADGE NUMBER*  CHASH REPORTED DATE / TIME  DISPATCH DATE / TIME  ARRIVAL DATE / TIME  SCENE CLEARED DATE / TIME  SCENE CLEARED DATE / TIME  REPORT TAKEN BY  POLICE AGENCY  MOTORIST  CHECKED BY OFFICER'S NAME*  CHECKED BY OFFICER'S NAME*  CHECKED BY OFFICER'S BADGE NUMBER*  CHECKED BY OFFICER'S BADGE NUMBER*	Tane to avoid Onit #1 but the u	mus comucu.			MAPLE		
CRASH REPORTED DATE / TIME  OLA 1 1 4 2 0 2 4 / 1 3 2 3 O 4 1 4 2 0 2 4 / 1 3 2 5 O 4 1 4 2 0 2 4 / 1 3 5 O MOTORIST  TOTAL TIME ROADWAY CLOSED INVESTIGATION TIME  OFFICER'S NAME*  Carnahan, Michael  OFFICER'S BADGE NUMBER*  CHECKED BY OFFICER'S BADGE NUMBER*  CHECKED BY OFFICER'S BADGE NUMBER*  CHECKED BY OFFICER'S BADGE NUMBER*						(-N-∌)	
CRASH REPORTED DATE / TIME DISPATCH DATE / TIME ARRIVAL DATE / TIME SCENE CLEARED DATE / TIME POLICE AGENCY OF TOTAL TIME						Not To Sca	le
CRASH REPORTED DATE / TIME DISPATCH DATE / TIME ARRIVAL DATE / TIME SCENE CLEARED DATE / TIME POLICE AGENCY OF TOTAL TIME					]   [		
CRASH REPORTED DATE / TIME DISPATCH DATE / TIME ARRIVAL DATE / TIME SCENE CLEARED DATE / TIME POLICE AGENCY OF TOTAL TIME						-Unite	
CRASH REPORTED DATE / TIME DISPATCH DATE / TIME ARRIVAL DATE / TIME SCENE CLEARED DATE / TIME POLICE AGENCY OF TOTAL TIME						Unit 1	
O_4_1_4_2_0_2_4_/_1_3_2_3   O_4_1_4_2_0_2_4_/_1_3_2_3   O_4_1_4_2_0_2_4_/_1_3_2_3   O_4_1_4_2_0_2_4_/_1_3_2_5   O_4_1_4_2_0_2_4_/_1_3_5_0   OFFICER'S NAME*    TOTAL TIME ROADWAY CLOSED INVESTIGATION TIME INVESTIGATION TIME INVESTIGATION TIME OFFICER'S NAME*    Carnahan, Michael OFFICER'S BADGE NUMBER*   CHECKED BY OFFICER'S BADGE NUMBER*   OFFICER'S BA			FRANKLIN				
O_4_1_4_2_0_2_4_/_1_3_2_3   O_4_1_4_2_0_2_4_/_1_3_2_3   O_4_1_4_2_0_2_4_/_1_3_2_3   O_4_1_4_2_0_2_4_/_1_3_2_5   O_4_1_4_2_0_2_4_/_1_3_5_0   OFFICER'S NAME*    TOTAL TIME ROADWAY CLOSED INVESTIGATION TIME INVESTIGATION TIME INVESTIGATION TIME OFFICER'S NAME*    Carnahan, Michael OFFICER'S BADGE NUMBER*   CHECKED BY OFFICER'S BADGE NUMBER*   OFFICER'S BA							
O   A   A   A   A   A   A   A   A   A							
TOTAL TIME ROADWAY CLOSED INVESTIGATION TIME TOTAL MINUTES OFFICER'S NAME*  Carnahan, Michael OFFICER'S BADGE NUMBER*  CHECKED BY OFFICER'S BADGE NUMBER*  CHECKED BY OFFICER'S BADGE NUMBER*  CHECKED BY OFFICER'S BADGE NUMBER*	CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIM	IE	SCENE CLEARED	DATE / TIME R	EPORT TAKEN BY
TOTAL TIME ROADWAY CLOSED INVESTIGATION TIME TOTAL MINUTES OFFICER'S NAME*  Carnahan, Michael  OFFICER'S NAME*  Carnahan, Michael  OFFICER'S BADGE NUMBER*  Checked by OFFICER'S NAME*  Hadaway, Joseph  OFFICER'S BADGE NUMBER*  Checked by OFFICER'S BADGE NUMBER*	0.4.1.4.2.0.2.4./.1.3.2.3.0.4.1	1,4,2,0,2,4,/,1,3,2	3 0 4 1 4 2 0 2 4 /	1,3,2,5,0	4.1.4.2.0.2.	4./.1.3.5.0	POLICE AGENCY
OFFICER'S BADGE NUMBER*  CAPITATION, INTERIOR INTERIOR SEPTION OF ADDITION TO AN EXISTING REPORT SEAT TO COPS)  TO AN EXISTING REPORT SEAT TO COPS)	TOTAL TIME OTHER TOT	AL OFFICER'S NAME*		CHECKED BY OFFI	CER'S NAME*		MOTORIST
	RUADWAY CLOSED   INVESTIGATION TIME   MINU						(CORRECTION OR ADDITION
				2 1 1	BY OFFICER'S BADGE I	NUMBER*	TO AN EXISTING REPORT SENT TO COPS)

LOCAL REPORT NUMBER

<b>W</b>	ERVICE - PROTECTION						2 0 2 4 -	$0_{\perp}$	0,0,0,5,3,9,2,
	OWNER NAME: LAST, FIRS			OWNE	R PHONE: No	ORC 149.43(A)(1)			MAGE
	NOVAK, ROP  ODRESS: STREET, CITY, STATE		гн	I	acted per	ONO 143.43(A)(1)	1 - NONE	DAMA	AGE SCALE  3 - FUNCTIONAL DAMAGE
	ILLOW ST,		40				2 2-MINOR D	AMAG	
COMMERC	IAL CARRIER: NAME, ADDR			Con	MERCIAL CARRIES	PHONE: INCLUDE AREA CODE		9 - U	NKNOWN
				Ш	1	<del></del>			GED AREA(S) ALL THAT APPLY
	LICENSE PLATE # HJH1136		LE IDENTIFICATION # $\mathbf{F}_1\mathbf{F}_1\mathbf{X}_1\mathbf{F}_11_10_17_10_10_1$	0.4.9.	2 0 1		12		47
	INSURANCE COMP	ANY	INSURANCE POLICY #		COLOR	VEHICLE MODEL	11 12 1		11 12 1
X INSURAN VERIFI		IDE 9	9234J304284		SIL	A3 SPORTI	BACK,	2	10 11 1 1
СОММЕ	TYPE OF USE  RCIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT#	TOWE	D BY: COMPAN	IY NAME	9 10 2 3	3	9 10 2 3
		T VI	EHICLE WEIGHT GVWR/GCWR			OUS MATERIAL	8 4 -	,	0 4 -
INTERL	OCK HIT/SKIP UNI	#OCCUPANTS	1 - ≤10KLBS. 2 - 10,001 - 26KLBS.		MATERIAL RELEASED	CLASS # PLACARD ID #	8 7 5	4	8 7 5 5
EQUIPE		0 2	3 - >26K LBS.		PLACARD	للللا لل	7 6 5	11 _	12 7 6
	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED			VERY VEHICLE) - PASSENGERS)	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE)	10 /	<	12
$\begin{bmatrix} 0_1 1_1 \end{bmatrix}$	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE		20 - OTHER VE		25 - OTHER NON-MOTORIST	_	10	2
UNITTYPE		10 - MOPED OR MOTORIZED BICYCLE		21 - HEAVY E		26-BICYCLE	9	9	3 3
	5 - CARGO VAN 6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE	16 - FARM EQUIPMENT 17 - MOTORHOME		WITH RIDER OR DRAWN VEHICLE	27 -TRAIN 99 - UNKNOWN OR HIT/SKIP	7.	7	
. 00.	# of TRAILING UNITS	(ATV/UTV)	Tr-moronione.			yy-onkhown ok musikir	49	,	6
							11 12 1		6 11 12 1
	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED			3 - CONDITIO 4 - HIGH AUT	DNAL AUTOMATION FOMATION	9 - UNKNOWN	10 11 1	2	10 11 1 2
_ 2	1-YES 2-NO 9-OTHER/UNK			5 - FULL AUT	OMATION		10 2	3	10 2
	1 - NONE	MODE LEVEL 6 - BUS - CHARTER/TOUR		16-FARM		21 - MAIL CARRIER	8 4 -	,	8 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	8 - BUS - SHUTTLE		18 - SNOW RE	MOVAL		7 6 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 S	SERVICE PATROL		•		•
NW1 1001	1 - NO CARGO BODYTYPE			8 - POLE		12 - CONCRETE MIXER	9 Sele	12	12 12
$0_1$	/ NOTAPPLICABLE	MOTORVEHICLE	CHASSIS	9 - CARGOTA	NK	13 - AUTOTRANSPORTER	12 0 0	-	
BODY	2 - BUS	4 - LOGGING	7 004111101110010041151	10 - FLAT BED	3	14-GARBAGE/REFUSE	9 8 8 9 9 9	9	Æ 3 9 <b>₩</b> 3
TYPE			7 - GRAIN/CHIPS/GRAVEL	11-DUMP		99-OTHER / UNKNOWN		4	<u></u>
	1 - TURN SIGNALS	4 - BRAKES		9 - MOTOR TE		99-OTHER / UNKNOWN	6		
	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOUT	B - TRAILER EQUIPMENT DEFECTIVE	ACCIDEN	D FROM PRIOR IT			6	6 6
	1 - INTERSECTION - MARKED	2 147506567168 67450	( DIAVALELANE	O MERIANIC	COACCING ICI AND	10 FIRST DESCRIPTED	- NO DAMAGE	[0]	- UNDERCARRIAGE [14]
لـــــا	CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED		9 - MEDIAN/C 10 - DRIVEWA	CROSSING ISLAND AY ACCESS	12 - FIRST RESPONDER AT INCIDENT SCENE	□-TOP [13]		-ALL AREAS [15]
NON-MOTORIST LOCATION	2 - INTERSECTION - UNMARKED CROSSWALK	CROSSWALK	B - SIDEWALK		USE PATHS OR	99-OTHER/UNKNOWN			
AT IMPACT		5 - TRAVEL LANE - OTHER LOCATIO		TRAILS			□-0N	II NU	TAT SCENE [16]
		1 - STRAIGHT AHEAD 2 - BACKING	- 1. H.		TING A CURVE IG OR CROSSING	18-APPROACHING OR LEAVING VEHICLE	varie - variety (1980)		DINT OF CONTACT
_5_	0 1	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE		ED LOCATION	19-STANDING	0 - NO DAMA		14 - UNDERCARRIAGE
ACTION	4 - STRUCK PRE-CRASH	4 - CVERTAKING/PASSING	IU-PARKED	15 - WALKING	G, RUNNING, , PLAYING	20 - OTHER NON-MOTORIST	1 2 1-12 - REFE		JNIT 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN
	5 - BOTH STRIKING ACTIONS & STRUCK	5 - MAKING RIGHTTURN 6 - MAKING LEFTTURN	11 - SLOWING OR STOPPED INTRAFFIC	16 - WORKING		21 - STANDING OUTSIDE DISABLED VEHICLE	13-T0P		// - OHIMOWN
	9-OTHER/UNKNOWN	6 - MAKING LEFT TORN		17 - PUSHING	VEHICLE	99 - OTHER / UNKNOWN		TR	AFFIC
	1-NONE	7 - LEFT OF CENTER		17 - VISION O	BSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW		TRAFFIC CONTROL
	2 - FAILURE TO YIELD	8 - FOLLOWING TOO CLOSE / ACT	DA PARKED POSITION  14 - STOPPED OR PARKED	18-OPERATII EQUIPME	NG DEFECTIVE	22 -NOT DISCERNIBLE	1 - ONE-WAY		1 - ROUNDABOUT 4 - STOP SIGN
$0_1$	4 - RAN STOP SIGN	9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING	ILLEGALLY	19 - LOAD SHI	IFTING/FALLING/	23 - OPENING DOOR INTO ROADWAY	2 2 - TWO-WAY		6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
CONTRIBUTING CIRCUMSTANCES	5-UNSAFE SPEED	11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	SPILLING On IMPRODE	G Er Crossing	99-OTHER IMPROPER ACTION			30 Per (05) Apr. (15) and (15) 5 Per (15) 20 Per (15)
	6-IMPROPERTURN	12 - IMPROPER BACKING		ZU-IMPROPE	, Chossing		# OF THROUGH LANES ON ROAD		RAIL GRADE CROSSING  1 - NOT INVOLVED
SEQUENCE	OF EVENTS		NON-COLLISION				2		1 2 - INVOLVED-ACTIVE CROSSING
1 2 0	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE —	16 - RAILWAY		22 - WORK ZONE MAINTENANCE			3 - INVOLVED-PASSIVE CROSSING
		7 - SEPARATION OF UNITS	TRAVEL	17 - ANIMAL - 18 - ANIMAL -		EQUIPMENT 23 - STRUCK BY FALLING,	UNIT / N	ON-M	OTORIST DIRECTION
2	3 - IMMERSION 4 - JACKKNIFE	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY	19-ANIMAL		SHIFTING CARGOOR ANYTHING SET IN MOTION	5400000 T 47900 000		1 - NORTH 5 - NORTHEAST
	5 - CARGO / EQUIPMENT	10-CROSS MEDIAN	13 - OTHER NON-COLLISION 14 - PEDESTRIAN	20 - MOTOR VI TRANSPO		BY A MOTOR VEHICLE	FROM _1 TO	2	2 - SOUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST
3	LOSS OR SHIFT		15 - PEDALCYCLE	21 - PARKED I	MOTORVEHICLE	24 - OTHER MOVABLE OBJECT	FRUM 10	-	4 - WEST 8 - SOUTHWEST
	25 - IMPACT ATTENUATOR	COLLISIO 31 - GUARDRAIL END	ON WITH FIXED OBJECT 37 - TRAFFIC SIGN POST	- STRU 43-CURB	CK	50 - WORK ZONE MAINTENANCE			9 - OTHER / UNKNOWN
4	/ CRASH CUSHION	32 - PORTABLE BARRIER		44 - DITCH		EQUIPMENT	UNIT SPEED		DETECTED SPEED
	26-BRIDGE OVERHEAD STRUCTURE	33 - MEDIAN CABLE BARRIER	AUDDARE	45 - EMBANK	MENT	51 - WALL 52 - BUILDING	Man Nen Ner		1 - STATED / ESTIMATED SPEED
5	27 - BRIDGE PIER ORABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	40 - UTILITY POLE	46 - FENCE 47 - MAILBOX	(	53 - TUNNEL	$\begin{bmatrix} 0_{\perp} 2_{\perp} 5_{\perp} \end{bmatrix}$		2 - CALCULATED / EDR
6 .	28-BRIDGE PARAPET 29-BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE	48 - TREE		54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	POSTED SPEED		3 - UNDETERMINED

49-FIRE HYDRANT

99-OTHER / UNKNOWN

29-BRIDGE RAIL

30-GUARDRAIL FACE

36 - MEDIAN OTHER BARRIER 42 - CULVERT

☐ FIRST HARMFUL EVENT ☐ 1 MOST HARMFUL EVENT

2 5

LOCAL REPORT NUMBER

~	O MI							2 0 2 4 -	0_	$0_{+}0_{+}0_{+}5_{+}3_{+}9_{+}2_{+}$
UNIT #	OWNER NAME: LAST, FIRST SKINNY LAB	T, MIDDLE ( SAME AS DRIVER S INC. dba	SPIN	Re	dacted per	ÖR	C 149.43(A)(1)			AMAGE AGE SCALE
OWNER AD	DRESS: STREET, CITY, STATE,	ZIP ( SAME AS DRIVER)		IL	929	80.580		1 - NONE	DAINI	3 - FUNCTIONAL DAMAGE
			TH FLOOR ,S					2-MINOR		GE 4 - DISABLING DAMAGE
COMMERC	CIAL CARRIER: NAME, ADDR	ESS, CITY, STATE, ZIP			DMMERCIAL CARRIE	RPHU	NE: INCLUDE AREA CODE		10 .03	GED AREA(S)
LP STATE	LICENSE PLATE #	VEHICL	LE IDENTIFICATION #		VEHICLE YE	EAR	VEHICLE MAKE			ALL THAT APPLY
للتا	INSURANCE COMPA	LI L	THE HEAD POLY OF #	11	COLOR		VEHICLE MODEL	11 12		11 12
INSURAN VERIFI	ED TINSURANCE COMP	ANY	INSURANCE POLICY #		ORG		VEHICLE MODEL	10 2	2	10 11 1 2
	TYPE OF USE	IN EMERGENCY	US DOT#	TOW	ED BY: COMPAN	NY NA	ΛE	10 2 -	1.	10 2 -
COMME	RCIAL GOVERNMENT	RESPONSE	EHICLE WEIGHT GVWR/GCWR		HAZARD		ATERIAL	9 8 3 4 -	J <sup>3</sup>	9 0 4 —
INTERL	OCK HIT/SKIP UNIT	#UCCUPANTS	1 - ≤10KLBS. 2 - 10,001 - 26KLBS	.   □	MATERIAL RELEASED	CLAS	S # PLACARD ID #	8 7 5	4	7 5 5
EQUIP	PED —		3 - >26K LBS.		PLACARD			7 6 5	11 _	12 7 6 5
2.0	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED	12 - GOLF CART 13 - SNOWMOBILE		.IVERY VEHICLE) 5+ PASSENGERS)		PEDESTRIAN / SKATER Wheelchair (any type)	10 /	<	12 1 2
2 <sub>0</sub>	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE	14 - SINGLE UNIT TRUCK	20-OTHER	VEHICLE	25 -0	OTHER NON-MOTORIST	<i>-</i>	10	2 -
UNITTYPE	4 - PICK UP 5 - CARGO VAN	10 - MOPED OR MOTORIZED BICYCLE	15 - SEMI-TRACTOR 16 - FARM EQUIPMENT		EQUIPMENT L WITH RIDER OR		BICYCLE TRAIN	9 (	9	3 4 _ 3
	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL	L-DRAWN VEHICLE	99-	UNKNOWN OR HIT/SKIP	8	V 7	5 4
	# OF TRAILING UNITS	EM382500						11 12 1	7	5 11 12
	WAS VEHICLE OPERATING IN AUT		D - NO AUTOMATION		IONAL AUTOMATION	9-1	INKNOWN	10 11 1	2	10 12 1 2
_ 2 _	1-YES 2-NO 9-OTHER/UNKN	U	1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	4 - HIGH AU 5 - FULL AU				10 2	1	10 2
	1 - NONE	MODE LEVEL  6 - BUS - CHARTER/TOUR		16-FARM		21 1	MAIL CARRIER	9 9 3	3	9 3 3
0.3		7 - BUS - INTERCITY	12 - MILITARY	17 - MOWIN	G		OTHER / UNKNOWN	8 7 5	4	8 7 5 4
	3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT	8 - BUS - SHUTTLE 9 - BUS - OTHER	13 - POLICE	18-SNOW F				7 6 5		7 6 5
FUNCTION	5 - BUS - TRANSIT/COMMUTER		14 - PUBLIC UTILITY 15 - CONSTRUCTION EQUIPMENT						41	2 12 12
0.1				8 - POLE		12-0	CONCRETE MIXER	12	12	
O 1 CARGO	/ NOT APPLICABLE 2 - BUS	MOTORVEHICLE 4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX	9 - CARGOT 10 - FLAT BI			AUTOTRANSPORTER GARBAGE/REFUSE	~ M ~	1	
BODY TYPE			7 - GRAIN/CHIPS/GRAVEL	11-DUMP	LU		OTHER / UNKNOWN	9 3	9	√ <sup>E</sup> 3 9 <b>1</b> 3 9 <b>3</b> 3
1 1 1		4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MOTOR	TROUBLE	99-0	OTHER / UNKNOWN	6	1	00
		5 - STEERING 6 - TIRE BLOWOUT	B - TRAILER EQUIPMENT DEFECTIVE	10 - DISABL ACCIDE	ED FROM PRIOR NT				6	6 6
		3 - INTERSECTION - OTHER	6 - BICYCLE LANE	O MEDIAN	I/CROSSING ISLAND	12.1	FIRST RESPONDER	- NO DAMAG	[0]	- UNDERCARRIAGE [14]
	CROSSWALK	4 - MIDBLOCK - MARKED	7 - SHOULDER / ROADSIDE	10 - DRIVEV			AT INCIDENT SCENE	☐- <b>TOP</b> [13]		- ALL AREAS [ 15 ]
LOCATION	2 - INTERSECTION - UNMARKED CROSSWALK	CROSSWALK  5 -TRAVEL LANE - OTHER LOCATION	B - SIDEWALK	11-SHARES	D USE PATHS OR	99 - (	OTHER / UNKNOWN	<b>□</b> -υ	NIT NO	DT AT SCENE [16]
AT IMPACT	1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTI	ATING A CURVE	18-	APPROACHING			
5	2-NON-COLLISION . O. 1	2 - BACKING 3 - CHANGING LANES	8 - ENTERING TRAFFIC LANE		ING OR CROSSING IED LOCATION		OR LEAVING VEHICLE STANDING	0 - NO DAM		DINT OF CONTACT  14 - UNDERCARRIAGE
ACTION	4 - STRUCK PRE-LRASH	4 - OVERTAKING/PASSING	9 - LEAVING TRAFFIC LANE 10 - PARKED	15 - WALKIN	NG, RUNNING,		OTHER NON-MOTORIST		RAM	UNIT 15-VEHICLE NOT AT SCENE
	5 - BOTH STRIKING ACTIONS	5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED INTRAFFIC	JOGGIN 16 - WORKIN	G, PLAYING NG		STANDING OUTSIDE DISABLED VEHICLE	13-TOP	IVA.III	99 - UNKNOWN
	9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	12 - DRIVERLESS	17-PUSHIN	IG VEHICLE	99-0	OTHER / UNKNOWN		TF	RAFFIC
		7 - LEFT OF CENTER	DADVED DOCITION		OBSTRUCTION		YING IN ROADWAY	TRAFFICWAY FLOW		TRAFFIC CONTROL
,0,7,		8 - FOLLOWING TOO CLOSE / ACI 9 - IMPROPER LANE CHANGE	14 - STOPPED OR PARKED	18-OPERAT EQUIPN	TING DEFECTIVE MENT		NOT DISCERNIBLE Opening door into	1 - ONE-WAY 2 - TWO-WAY	87	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN
	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY  15 - SWERVING TO AVOID	19-LOAD S SPILLIN	HIFTING/FALL:NG/ NG	1	ROADWAY OTHER IMPROPER ACTION	2 2 - TWO-WAY	ட	3 - FLASHER 6 - NO CONTROL
CIRCUMSTANCES		11 - DROVE OFF ROAD 12 - IMPROPER BACKING	16 - WRONG WAY		PER CROSSING	33-4	STREET IMPROPER ACTION	# of THROUGH LANES		RAIL GRADE CROSSING
SEQUENCE	OF EVENTS							ON ROAD	8	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING
1 2 0	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	NON-COLLISION 11-CROSS CENTERLINE —	16 - RAILWA	YVEHICLE	22 -	WORK ZONE MAINTENANCE	2	_	2 - INVOLVED-PASSIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
1 2 0		7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF TRAVEL	17 - ANIMAI			EQUIPMENT STRUCK BY FALLING,	UNIT / N	ON-M	OTORIST DIRECTION
2		8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION	18-ANIMAI 19-ANIMAI	L - OTHER		SHIFTING CARGOOR ANYTHING SET IN MOTION			1 - NORTH 5 - NORTHEAST
	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10-CROSS MEDIAN	14 - PEDESTRIAN	20 - MOTOR TRANSF	VEHICLE IN PORT	-	BY A MOTOR VEHICLE OTHER MOVABLE OBJECT	FROM 2 TO	5	2 - SOUTH 6 - NORTHWEST  3 - EAST 7 - SOUTHEAST
3		COLLISIO	15-PEDALCYCLE  ON WITH FIXED OBJECT		MOTORVEHICLE	-73				4 - WEST 8 - SOUTHWEST
4	LADIAH AHAHIAH	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB			WORK ZONE MAINTENANCE	2 gatos pina Adamona		9 - OTHER / UNKNOWN
	26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES	44 - DITCH 45 - EMBAN	KMENT		EQUIPMENT WALL	UNIT SPEED		DETECTED SPEED  1 - STATED / ESTIMATED SPEED
5	STRUCTURE 27 - BRIDGE PIER ORABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	SUPPORT 40 - UTILITY POLE	46 - FENCE 47 - MAILBO	ny		BUILDING FUNNEL	$\begin{bmatrix} 0 & 1 & 2 \end{bmatrix}$		2 - CALCULATED / EDR
	28-BRIDGE PARAPET 29-BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT	48-TREE		54-0	OTHER FIXED OBJECT	POSTED SPEED		3 - UNDETERMINED
6		36 - MEDIAN OTHER BARRIER	42 - CULVERT	49-FIRE HY	YDRANT	99-(	OTHER / UNKNOWN			
$1 1_{-1}$	FIRST HARMFUL EVEN	T 1 1 MOST	HARMFIII EVENT					2 5		

OHIO DEF	PARTMENT A	OTORIST / NO	N-M	Іото	DIC	т				LOCAL RE	PORT NUM	BER		
SAFETY - MERVI	CE - PROTECTION	010K121 / 140	)     -	1010	K12	1			2_0_	2 4 - 0 0	0.0.0	5.3	, 9	2
UNIT#	NAME: LAST	, FIRST, MIDDLE								DATE OF BIRTH		AG	E	GENDER
0,1	NOVA	K, ROBERT, JOS	<b>EPH</b>						0 4	$1 \cdot 1 \cdot 8 \cdot 1 \cdot 9$	$16 \cdot 0$	63	<b>,</b> ,	M
	STREET, CITY, S		44240						(7) 730 DR 4700.	PHONE - INCLUDE AREA	2000	40.4	2/1	\/4\
-		OW ST ,Kent ,OH	44240						Reda	acted per C			<u> </u>	
INJURIES	TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	USED	Прот-с∘ МС не	SEATING POSITIO	N AIR BAG L	ISAGE EJE	CTION	TRAPPED
	BY				=			0,4	2.434.554.657.A	LMET 0 1		_	1_	டட
OLSTATE		LICENSE NUMBER TED PER ORC 450	11-1-12	OFFENS	E CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CITATI	ON NUMB	BER	
O H OL CLASS	ENDORSEMEN			ļ.,,	41.00	OHOL / DRUG SUSPI		CONDITION	AL O	OHOL TEST		DRUG TE	ST(S)	
UL CLASS	SELECT UP TO 2			TRACTED	_	LCOHOL MAR		CONDITION	STATUS T					SELECTUPTO4
4		0.3		1		THER DRUG		1	_1	1	_1_	1		لــالــالــ
UNIT #	NAME: LAST	FIRST, MIDDLE								DATE OF BIRTH		AG	E	GENDER
0,2	JACK	SON, DERRICK,	ANTO	ONIO					L0 T	$10 \downarrow 5 \downarrow 2 \downarrow 0$	111	1 2		M
	STREET, CITY, S								CONTACT	PHONE - INCLUDE AREA	CODE			
1649 A	THEN	A DR ,Kent ,OH 4	4240						∟Reda	acted per C	RC 1	49.4	3(A	.)(1) <sub>_</sub>
INJURIES	TAKEN	EMS AGENCY (NAME)				: MEDICAL FACILITY		IISEN	□ DOT-C∘	SEATING POSITIO	N AIR BAG U	SAGE EJE	CTION	TRAPPED
	BY 2	Kent Fire		Akro	on C	hildrens Ho	spita	0,1	<b>Ш</b> мс не	LMET 0 1	5		3	_1_
OL STATE	OPERATOR	LICENSE NUMBER		OFFENS		RGED	LOCAL	OFFENSE DESC	RIPTION			ON NUME	BER	
				4511				Left Of Cente			2815			
OL CLASS	SELECT UP TO 2		DIS	VER Tracted	_	CHOL / DRUG SUSPI	E <b>CTED</b> RIJUANA	CONDITION	STATUS T	YPE VALUE		DRUG TE		SELECTUPTO4
		1	BY	1 .	=	THER DRUG	KIJUANA	1 1	1	1	. 1	1		
UNIT#	NAME: LAST	FIRST, MIDDLE								DATE OF BIRTH	السا	AG	E	GENDER
100000000														
ADDRESS:	STREET, CITY, S	STATE, ZIP							CONTACT	PHONE - INCLUDE AREA	CODE			
20										1 1 1	1 1	- 1	1	1 1
INJURIES		EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)		DOT-C:	SEATING POSITIO	N AIR BAG L	SAGE EJE	CTION	TRAPPED
NON	TAKEN BY							USED	MC HE					نـــــا
OL STATE	OPERATOR	LICENSE NUMBER		OFFENS	E CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION		CITATI	ON NUME	BER	
			200	100										
OL CLASS	ENDORSEMEN SELECT UP TO 2		DIS	VER Tracted		DHOL / DRUG SUSPI		CONDITION	STATUS T	YPE VALUE		TYPE R		SELECTOP TO 4
			BY		=	LCOHOL MAF	KIJUANA		ļ ļ.	_ •				11 11 1
INJU	RIES	SEATING POSITION	A	IR BAG		OL CLASS	S	OL RESTRIC	TION(S)	DRIVER DISTRAC	TION	TES1	T STA	==
1 - FATAL		1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP			1 - CLASS A		1 - ALCOHOL INTER		1 - NOT DISTRACTED		- NONE GIV		
3 - SUSPECTED	SERIOUS INJURY MINOR INJURY	2 - FRONT - MIDDLE	2 - DEPLOYE 3 - DEPLOYE			2 - CLASS B 3 - CLASS C		2 - CDL INTRASTAT 3 - CORRECTIVE LE		2 - MANUALLY OPERATIN ELECTRONIC COMMUI	VICATION :	-TEST REF -TEST GIVE		TAMINATED
4 - POSSIBLE IN		3 - FRONT – RIGHT SIDE 4 - SECOND – LEFT SIDE		ED BOTH FRO	NT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER		DEVICE (TEXTING, TY DIALING)		SAMPLE /		BLE JLTS KNOWN
5 - NO APPAREN	TINJURY	(M0TORCYCLE PASSENGER)	5-NOTAPP	LICABLE MENT UNKNO	WN	5 - M/C MOPED ONLY		6 - EXCEPT CLASS		3 - TALKING ON HANDS-F COMMUNICATION DEV	REE	-TEST GIVE		
	TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	, 02(20)			6 - NO VALID OL		& CLASS B BUS		4 - TALKING ON HAND-HE		UNKNOW	V	
1 - NOT TRANSP /TREATED AT	Programme and the second	7 - THIRD - LEFT SIDE	EJ	ECTION		OL ENDORSE	MENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE		5 - OTHER ACTIVITY WIT	HAN	ALCOHO	LTES	T TYPE
2 - EMS		(MOTORCYCLE SIDE CAR) 8-THIRD – MIDDLE	1 - NOTEJE			H - HAZMAT		RESTRICTIONS		ELECTRONIC DEVICE 6 - PASSENGER		- NONE - BLOOD		
3 - POLICE 9 - OTHER / UNK	NOWN	9 - THIRD - RIGHT SIDE	3-TOTALLY	LY EJECTED EJECTED		M - MOTORCYCLE P - PASSENGER		9 - LEARNER'S PER RESTRICTIONS	MII	7 - OTHER DISTRACTION		- URINE		
		10 - SLEEPER SECTION OF TRUCK CAB	4-NOTAPP			N - TANKER		10 - LIMITED TO DAY		INSIDE THE VEHICLE  8 - OTHER DISTRACTION		- BREATH		
1 - NONE USED	QUIPMENT	11 - PASSENGER IN OTHER	TI	RAPPED		Q - MOTOR SCOOTER  R - THREE-WHEEL MO	TOPOVOLE	11 - LIMITED TO EMI 12 - LIMITED - OTHE		THE VEHICLE	0013102			TVDE
2 - SHOULDER B	ELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1 - NOTTRA	PPED		S - SCHOOL BUS	TORGTOLE	13 - MECHANICAL DI		9 - OTHER / UNKNOWN		DRUG - NONE	TEST	TYPE
3 - LAP BELT ON		PICK-UP WITH CAP)  12 - PASSENGER IN UNENCLOSED	2 - EXTRICA MECHAN	TED BY IICAL MEANS		T - DOUBLE & TRIPLE	TRAILERS	CONTROLS, OR O	THER	CONDITION		- BLOOD		
4 - SHOULDER & 5 - CHILD REST	RAINT SYSTEM -	CARGO AREA	3- FREED B	Υ		X - TANKER / HAZMAT		ADAPTIVE DEVI		1 - APPARENTLY NORMAI 2 - PHYSICAL IMPAIRMEN		- URINE		
FORWARD FA	CING RAINT SYSTEM –	13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR	NUN-ME(	CHANICAL ME	AN5	GENDER		15 - MOTOR VEHICLE		3 - EMOTIONAL (E.G., DEPR	ESSED,	- OTHER		
REAR FACING	3	(NON-TRAILING UNIT)				F - FEMALE M - MALE		AIR BRAKES 16 - OUTSIDE MIRRO	R	ANGRY, DISTURBED) 4 - ILLNESS	100	- AMPHETA		SULT(S)
7 - BOOSTER SE 8 - HELMET US		15 - NON-MOTORIST 99 - OTHER / UNKNOWN				U - OTHER / UNKNOWN		17 - PROSTHETIC AII		5 - FELL ASLEEP, FAINTE		- BARBITUE		
9 - PROTECTIVE								18-OTHER		FATIGUED, ETC.  6 - UNDERTHE INFLUENCE	E	- BENZODIA		S
(ELBOW, KNE 10 - REFLECTIVE										OF MEDICATIONS / DRI	JGS 4	- CANNABII - COCAINE	NOIDS	
11 - LIGHTING - F	PEDESTRIAN									9- OTHER/UNKNOWN		- OPIATES /	OPIOID	5
/ BICYCLE ON 99 - OTHER / UNK												-OTHER	Deem	TC
77 - OTHER / ONK	mV IIII										8	- NEGATIVE	KESUL	12

HSY8306 OH1M 1/19 [760-1500] PAGE 4 OF 5

Ú	OHIO DE	IC SAFETY	CCUPANT /	WITNES	SS ADDENDUM					ORT NUMBER		
		-		vocation of 1995—A				2,0,2,4		0.0.5		
	UNIT#		T, FIRST, MIDDLE	CHAEL					E OF BIRTH		AGE	GENDER
	01	STREET, CITY,	K, DAVID, M	CHAEL				1 2 0			50	M
UCCUPAN			NST,Kent,OH	44240				Redacte			9.43(	A)(1)
,	INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	ITY (NAME, CITY)	SAFETY EQUIPMENT USED 0 4	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION 1	TRAPPED
ľ	UNIT#	NAME: LAS	T, FIRST, MIDDLE		I.			DAT	E OF BIRTH	T	AGE	GENDER
									1 1 1			
10000	ADDRESS	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INGLUDE AREA COI	DE I		
3	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	ITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
	لــــا	BY					USED	MC HELMET	لسلسا			نـــــا
ľ	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER
	لــــا	_							1 1 1			
UCCUPAN	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE		
3	**********	I	I			, ,	Tot serv samens				Tricariou	
	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
١											ســـال	
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER
	ADDRESS:	STREET, CITY,	STATE ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE.		
UCCUPAN	ADDRESS.	. STREET, OFFT,	STATE, ZIF					CONTACT FROME	- INCLUDE AREA CO	DE.		
3.	INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	ITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED
	r a	TAKEN BY				2	USED	DOT-COMPLIANT MC HELMET			di i	. 1
		INJU	JRIES	SAFET	Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG U	SAGE	
	1 - FATA	AL.		1 - NONE US			IT - LEFT SIDE	ED)	1 - NOT DE	PLOYED		
	2 - SUSI	PECTEDSE	RIOUS INJURY		OCCUPANT ER BELT ONLY USED		ORCYCLE DRIV IT – MIDDLE	ER)	2 - DEPLO	YED FRONT		
			NOR INJURY		T ONLY USED		IT – RIGHT SIDE		3 - DEPLO			
į		SIBLE INJU		4 - SHOULDE	ER & LAP BELT USED		ND – LEFT SIDI ORCYCLE PASS		4 - DEPLOY			
ı	5- NU A		指提為科學民	100 March 200 Ma	ESTRAINT SYSTEM -	5 - SEC0	ND - MIDDLE		5 - NOT AP	PLICABLE		
ì	1 NOT	INJURED TRANSPOR	TAKEN BY	300000000000000000000000000000000000000	D FACING ESTRAINT SYSTEM –		ND – RIGHT SIC D – LEFT SIDE	DE	9 - DEPLO	YMENT UNI	NOWN	
١		EATED AT S		REAR FA		(MOT	ORCYCLE SIDE	CAR)		EJECTI	0 N	
8	2- EMS			7 - BOOSTER	RSEAT		D – MIDDLE D – RIGHT SIDE		1 - NOT EJ	ECTED		
	3- POLI			8 - HELMET			PER SECTION (			LLY EJECT	ED	
	9- OTHI	ER / UNKNO			TVE PADS USED KNEES, ETC.)		ENGER IN OTH			Y EJECTED		
		100 miles	NDER		TIVE CLOTHING	BUS, F	PICK-UP WITH CAR	P)	4 - NOT AP		HEE CAN	
	F - FEMA M - MALI				G - PEDESTRIAN		ENGER IN UNE O AREA	NCLOSED	1 NOTTO	TRAPP	E D	
		R / UNKNO	WN	/ BICYCL 99 - OTHER /		13 - TRAI	LING UNIT		1 - NOT TR	APPED CATED BY M	FCHANIC	:Δ1
				77- UIHEK/	OIA KINO WIN		NG ON VEHICLE TRAILING UNIT)	EXTERIOR	MEANS		- CHANG	
						15 - NON-	MOTORIST R / UNKNOWN		3 - FREED MEANS	BY NON-ME	CHANIC	AL
î	NAME: LAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH	T	AGE	GENDER
WINESS			OSEPH, WAL	TER				1,2,1,	2 <sub>1</sub> 2 <sub>1</sub> 0 <sub>1</sub>	0_0_	2_3	M
		STREET, CITY,						CONTACT PHONE			12/4	1/41
			ST ,Kent, ,OH	44240				Redacte		TO 149		
25	NAME: LAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER
WINESS	ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA COL	DE L		
\$								1 1 1		1 1	1 8	1 1
j	NAME: LAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH	T	AGE	GENDER
E 23									1 1 1		1 1 3	
WILNESS	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE		
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## **OHIO TRAFFIC CRASH WITNESS STATEMENT**

200

OH-3 REV 1/82

LOCAL REPORT	74-6202	REPORTING AGENCY	DATE OF CRASH
NUMBER	C7.539C	1. Ken 16/10	7 197 1 47

## FOR LOCAL USE ONLY - DO NOT SUBMIT TO THE STATE EXCEPT FOR FATAL CRASHES

I, JSON	Colman	JR	_	KE THIS VOLU	INTARY STAT	TEMENT TO
SI. J.Enn. (OFFICERS  I Was	emoser NAME) Stopped	a+	AT :	Scero. Street "	OCATION)	SISO
and	Saw		Speeding			Three Scooters
Black	males	de lupr	e	the	Ro.	acootuz.
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ADDRESS OF · // WITNESS SIGNATURE	jan	and the second s	OFFICERS	SIGNATURE		PHONE Redacted per ORC 149.43(A)
OF WITNESS HSY 7003 1/82				SIGNATURE Lamente	XIL)	- Company Company