OHIO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER*							
	$\begin{bmatrix} 2 & 0 & 2 & 3 & - & 0 & 0 & 0 & 0 & 8 & 4 & 2 & 6 \end{bmatrix}$							
X PHOTOS TAKEN X OH-1P OTHER	REPORTING AGENCY NAME*		Manager and the second			NUMBER OF UNITS UNIT IN ERROR 98 - ANIMAL		
SECONDARY CRASH PRIVATE PROPERTY	City of Kent Police	լ <b>Օ</b> լ	6,7,0,3	3 1- SOLVED 0, 2 98				
1 - CITY	, VILLAGE, TOWNSHIP*			CRASH DATE /	. 1	ASH SEVERITY - FATAL		
6 7 1 2-VILLAGE Kent			0.5.3.1.2.0.2.3./.1.4.2.6.					
S-SOUTH	LOCATION ROAD NAME		ROAD TYPE	3 MINOR IN				
W-WEST	FAIRCHILD		A V	41,15,98,0,7 SUSPECTED				
S-SOUTH	REFERENCE ROAD NAME (ROAD, N	MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE D	5.55.7 On M. 17.	- INJURY POSSIBLE - PROPERTY DAMAGE		
	WOODARD		A V	-8 <sub>1</sub> 1 <sub>0</sub> 3 <sub>6</sub> 3	9,6,1	ONLY		
REFERENCE POINT DIRECTION FROM REFERENCE N - NORTH IR -	ROUTE TYPE INTERSTATE ROUTE(TP) AL -	ROAD TYPE - ALLEY HW- HIGHWAY F	RD - ROAD		INTERSECTION RELATE			
2 - MILE POST A C COUTU	I EDERAL OS ROOTE		SQ - SQUARE	WITHININE	RSECTION OR ON APPROA	ACH		
W-WEST SR-	CR -		ST - STREET	WITHIN INTE	RCHANGE AREA NUN	MBER OF APPROACHES		
FROM REFERENCE UNIT OF MEASURE	NUMBERER TOWNSHIP		TL - TRAIL		ROADWAY			
	ROUTE DK -	DRIVE PI - PIKE \ - HEIGHTS PL - PLACE	WA - WAY	ROADWAY DIV	IDED			
LOCATION OF FIRST HARMFUL EVENT	T MANN	IER of CRASH COLLISION/IMPA	СТ	DIRECTION OF TRAVE	L MEDIA	NTYPE		
1 - ON ROADWAY 9 - CROSSOVER 2 - ON SHOULDER 10 - DRIVEWAY/	ALLEY ACCESS BETW	COLLISION 4-REAR-TO-REAR VEEN 5-BACKING		N - NORTH	1 - DIVIDED I	FLUSH MEDIAN		
U 1 3-IN MEDIAN 11-RAILWAY GI	RADE CROSSING L	MOTOR CLES IN 6-ANGLE		S - SOUTH E - EAST	2 - DIVIDED I	VIDED FLUSH MEDIAN		
4 - ON ROADSIDE 12-SHARED US 5 - ON GORE TRAILS	E PATHS OR TRAN 2 - REAR	ISPORT 7 - SIDESWIPE, SAM E-END 8 - SIDESWIPE, OPPO		W-WEST	( ≥4 FEET 3 - DIVIDED,	DEPRESSED MEDIAN		
6 - OUTSIDE TRAFFIC WAY 13 - BIKE LANE	3 - HEAD	9 - OTHER / UNKNOV	WN			VIDED, RAISED MEDIAN NY TYPE)		
7 - ON RAMP 14-TOLL BOOTE 8 - OFF RAMP 99-OTHER/UN					9 - OTHER/UN	NKNOWN		
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CRASH IN WO	RK ZONE	CONTOUR	CONDITIONS	SURFACE		
T	LANE CLOSURE LANE SHIFT/CROSSOVER	1 - BEFORE THE 1ST WARNING SIGN	WORK ZONE	_1_	_1_			
3-1	WORK ON SHOULDER OR MEDIAN	2 - ADVANCE WARNIN		1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE		
4-1	INTERMITTENT OR MOVING WORK	4 - ACTIVITY AREA		2 - STRAIGHT GRADE  3 - CURVE LEVEL	2-WET 3-SNOW	2 - BLACKTOP, BITUMINOUS, ASPHALT		
ACTIVE SCHOOL ZONE 5 - (	OTHER	5 - TERMINATION AR	-TERMINATION AREA 4 - CURVE GRADE 4 - ICE					
LIGHT CONDITION	WEATHE		9 - OTHER/UNKNOWN 5 - SAND, MUD, DIRT, OIL, GRAVEL					
1 - DAYLIGHT 2 - DAWN/DUSK	1-CLEAR 2-CLOUDY	6 - SNOW 7 - SEVERE CROSSWINDS			STONE 5 - DIRT			
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	3 - FOG, SMOG, SMOKE 4 - RAIN	8 - BLOWING SAND, SOIL, DIRT 9 - FREEZING RAIN OR FREEZI		MOVING) 7 - SLUSH	9 - OTHER/UNKNOWN			
5 - DARK - UNKNOWN ROADWAY LIGHTING	5 - SLEET, HAIL	99 - OTHER / UNKNOWN			9 - OTHER/UNKNOWN			
9 - OTHER / UNKNOWN		7				20 20 20 20 20 20		
NARRATIVE					4	Indicate the north direction with an "N" on the		
UNIT 1 AND 2 WERE TRAVEL	ING WESTBOUND					compass diagram.		
ON FAIRCHILD AVE. APPRO	XIMATELY 20							
YARDS WEST OF THE INTE	RSECTION OF	UNITI	FAIRCHILDAVE		(	₹Z		
FAIRCHILD AVE AT WOODA	RD. UNIT 1 WAS				Not	To Scale		
STOPPED IN TRAFFIC. UNIT	**************************************		ONIT2					
				<b>\</b>	_			
VEHICLE TAKING HER EYE								
UNIT 2 STRUCK UNIT 1 IN T			WOODARD	AVE	//			
CAUSING DISABLING DAMA				i				
The state of the s								
				. ! !				
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED	DATE/TIME I	REPORT TAKEN BY		
						POLICE AGENCY		
0,5,3,1,2,0,2,3,/,1,4,2,6, 0,5,3,   TOTAL TIME				CER'S NAME*		MOTORIST		
ROADWAY CLOSED INVESTIGATION TIME MINUT			aydosh,	Ryan		SUPPLEMENT (CORRECTION OR ADDITION		
	OFFICER'S BAD	GE NUMBER*	2 1 1	BY OFFICER'S BADGE N	IUMBER*	TO AN EXISTING REPORT SENT TO ODPS)		

LOCAL REPORT NUMBER

2000000	200 S. S. S. S. PARS V. PARS V. S. PARS V. PARS V. S. PARS V. S. PARS V. S. PARS V. PAR					[2,0,2,3,-]	$0_{1}0_{1}0_{1}0_{1}8_{1}4_{1}2_{1}6_{1}$	
0 1	OWNER NAME: LAST, FIR BURGER, LA	UREN, RAE		Redacted per	ORC 149.43(A)(1)	0	DAMAGE AMAGE SCALE	
	DRESS: STREET, CITY, STATE	,ZIP (□ SAME AS DRIVER) ,Ravenna ,Ol		4 1 - NONE 2 - MINOR DA	3 - FUNCTIONAL DAMAGE MAGE 4 - DISABLING DAMAGE			
	IAL CARRIER: NAME, ADD		PHONE: INCLUDE AREA CODE					
	LICENSE PLATE #	VEHICLE	DAMAGED AREA(S) INDICATE ALL THAT APPLY					
	JUR4680  NOF INSURANCE COMP		SURANCE POLICY #	5,6,6, 2,0,1,9	Chevrolet VEHICLE MODEL	11 12	11 12 1	
X INSURAN VERIFI	ERIE		045118875	BLK	TRAVERSE		10 11 1 2	
COMME	TYPE OF USE  RCIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT#	Bakers Towing	V NAME	9 9 3	3 9 9 3	
INTERL DEVICE	OCK HIT/SKIP UNI	#UCCUPANTS	1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	MATERIAL (	CLASS # PLACARD ID #	7 6 5	12 7 6 5	
0 1 UNIT TYPE	3 - SPORT UTILITY VEHICLE 4 - PICK UP 5 - CARGO VAN 6 - VAN (9-15 SEATS)	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	18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ 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	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
2	# of TRAILING UNITS  WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED  1-YES 2-NO 9-OTHER/UNK	9 1	0 - NO AUTOMATION 1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION	9 - UNKNOWN	11 12 1 10 11 12 1 9 9 3 3	6 5 11 12 1 10 11 12 2 3 3 9 9 9 3	
0 1 SPECIAL FUNCTION	1 - NONE 6 - BUS - CHARTER/TOUR  1 - NONE 7 - BUS - INTERCITY 2 - TAXI 7 - BUS - INTERCITY 2 - FLECTRONIC DIDE SHADING 8 - BUS - SHITTLE		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 5	8 7 6 5 4 7 6 5 5	
O 1 CARGO BODY TYPE	1 - NO CARGO BODYTYPE /NOTAPPLICABLE 2 - BUS	MOTORVEHICLE 4 - LOGGING	LOGGING 6 - CARGO VAN/ENCLOSED BOX 10 7 - GRAIN/CHIPS/GRAVEL 11		12-CONCRETE MIXER 13-AUTOTRANSPORTER 14-GARBAGE/REFUSE 99-OTHER/UNKNOWN	9 12 3 9	3 9 3 3 9 8 3 G	
VEHICLE 2 - HEAD LAMPS 5 - STEERIN		4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	7 - WORN OR SLICKTIRES 9 - MOTOR TROUBLE  8 - TRAILER EQUIPMENT 10 - DISABLED FROM PRIOR ACCIDENT		99-OTHER/UNKNOWN	6	6 6 6	
NON-MOTORIST LOCATION AT IMPACT	1 - INTERSECTION - MARKED CROSSWALK 2 - INTERSECTION - UNMARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - NIDBLOCK - MARKED CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION		9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR TRAILS	12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN	- NO DAMAGE [	O] - UNDERCARRIAGE [14] - ALL AREAS [15]  T NOT AT SCENE [16]	
4 ACTION	1-NON-CONTACT 1-STRAIGHT AHEAD 7-M 2-NON-COLLISION 1 2-BACKING B-E 3-STRIKING 1 3-CHANGING LANES 9-L 4-STRUCK PRE-CRASH 4-CVERTAKING/PASSING 10-F 5-BOTH STRIKING ACTIONS 5-MAKING RIGHT TURN 11-S & STRUCK 6-MAKING LEFT TURN		7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 15 - WALKING, RUNNING, JOGGING, PLAYING 11 - SLOWING OR STOPPED INTRAFFIC 12 - DRIVERLESS 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	
O 1 CONTRIBUTING CIRCUMSTANCES	1 - NONE 2 - FAILURE TO YIELD 3 - RAN RED LIGHT 4 - RAN STOP SIGN 5 - UNSAFE SPEED 6 - IMPROPERTURN	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ACDA 9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD 12 - IMPROPER BACKING	PARKED POSITION  14-STOPPED OR PARKED ILLEGALLY  15-SWERVING TO AVOID	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT 19 - LOAD SHIFTING/FALLING/ SPILLING 20 - IMPROPER CROSSING	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION	TRAFFICWAY FLOW  1 - ONE-WAY  2 - TWO-WAY  # of THROUGH LANES ON ROAD	TRAFFIC CONTROL  1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL  RAIL GRADE CROSSING	
SEQUENCE	OF EVENTS		NON-COLLISION			2	1 - NOT INVOLVED 2 - INVOLVED-ACTIVE CROSSING	
1 2 0 2 3	1 - OVERTURNIROLLOVER 6 - EQUIPMENT FAILURE 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 5 - CARGO / EQUIPMENT LOSS OR SHIFT 10 - CROSS MEDIAN 15 - PEDALCYCLE  NO N - C O LLISION 11 - CROSS CENTERLINE — OPPOSITE DIRECTION OF TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE			16 - RAILWAY VEHICLE 17 - ANIMAL — FARM 18 - ANIMAL — DEER 19 - ANIMAL — OTHER 20 - MOTOR VEHICLE IN TRANSPORT 21 - PARKED MOTOR VEHICLE 21 - PARKED MOTOR VEHICLE 22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT			3 - INVOLVED-PASSIVE CROSSING  N-MOTORIST DIRECTION  1 - NORTH 5 - NORTHEAST 2 - SCUTH 6 - NORTHWEST 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN	
<ul><li>4</li><li>5</li><li>6</li><li>1</li></ul>	25-IMPACT ATTENUATOR  26-BRIDGE OVERHEAD 27-BRIDGE PIER ORABUTMENT 28-BRIDGE PARAPET 29-BRIDGE RAIL 29-BRIDGE RAIL 31-GUARDRAIL END 37-TRAFFIC SIGN POST 38-OVERHEAD SIGN POST 38-OVERHEAD SIGN POST 39-LIGHT / LUMINARIES 31-MEDIAN CABLE BARRIER 39-LIGHT / LUMINARIES 31-MEDIAN GUARDRAIL 39-LIGHT / LUMINARIES 31-MEDIAN CONCRETE 40-UTILITY POLE 08-SUPPORT 40-UTILITY POLE 08-SUPPORT 40-UTILITY POLE 08-SUPPORT 40-UTILITY POLE 41-OTHER POST, POLE 08-SUPPORT 42-CULVERT		43 - CURB 44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT	50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	UNIT SPEED  O O O  POSTED SPEED  3 5	DETECTED SPEED  1 - STATED / ESTIMATED SPEED  2 - CALCULATED / EDR  3 - UNDETERMINED		

LOCAL REPORT NUMBER

2.0.2.3.-0.0.0.0.8.4.2.6.

							0 0 0 0 7 0 4 2 0				
-	OWNER NAME: LAST, FIRE BELLAMY, B	KENNĒTH, G		Redacted per	ORC 149.43(A)(1)	DAMAGE  DAMAGE SCALE  1 - NONE  3 - FUNCTIONAL DAMAGE					
	DEASANT V		Streetsboro ,Ol	H 44241		2 2 - MINOR DAMAGE 4 - DISABLING DAMAGE					
	CIAL CARRIER: NAME, ADD		, ,		PHONE: INCLUDE AREA CODE	9 - UNKNOWN					
LP STATE	LICENSE PLATE #	VEHICLE	EIDENTIFICATION #	VEHICLE YE	AR VEHICLE MAKE		MAGED AREA(S) Te all that apply				
	GQM9264	$\lfloor 1 \rfloor C 4 \rfloor B \rfloor J \rfloor WE$	$\mathbf{E}_{1}\mathbf{G}4_{1}\mathbf{E}_{1}\mathbf{L}_{1}2_{1}3_{1}0_{1}$	$5 \cdot 4 \cdot 7 \cdot 2 \cdot 0 \cdot 1$	4 Jeep	12 1	11 12 1				
INSURAI VERIFI			nsurance policy # 566480-SFP-35	TPE	WRANGLE	R 11 1 2	10 12 1				
COMME	TYPE OF USE  RCIAL GOVERNMENT [	IN EMERGENCY RESPONSE	US DOT#	TOWED BY: COMPAN		9 10 2 3 3	9 10 2 3				
		#OCCUPANTS VE	HICLE WEIGHT GVWR/GCWR	MATERIAL	US MATERIAL CLASS # PLACARD ID #	8 4 7	8 4 7				
DEVICE EQUIP	PED HIT/SKIP UNI	T 0 2 _	2 - 10,001 - 26K LBS 3 - >26K LBS	☐ RELEASED		8 7 6 5 11	12 7 6 5				
	1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED		18 - LIMO (LIVERY VEHICLE) 19 - BUS (16+ PASSENGERS)	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE)	10	12				
0 1	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE	14 - SINGLE UNIT TRUCK	20 - OTHER VEHICLE	25 - OTHER NON-MOTORIST	<u> </u>	10 2				
UNITTYPE	4 - PICK UP 5 - CARGO VAN	10 - MOPED 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				
28.000	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 5 4				
_00	# of TRAILING UNITS	W111 V 1 1/				11 12 7	6 5 11 12				
	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED			3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	10 11 1 2	10 11 1 2				
_2_	1-YES 2-NO 9-CTHER/UNK	NOWN AUTONOMOUS		4 - HIGH AUTOMATION 5 - FULL AUTOMATION		10 2	10 2				
	1 - NONE	MODE LEVEL  6 - BUS - CHARTER/TOUR	11 - FIRE	16-FARM	21 -MAIL CARRIER	9 8 3 4	9 3 4				
0.1	2 - TAXI	7 - BUS - INTERCITY		17 - MOWING	99 - OTHER / UNKNOWN	8 7 5 4	8 7 5				
SPECIAL	3 - ELECTRONIC RIDE SHARING			18 - SNOW REMOVAL		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 SERVICE PATROL			13				
0.1	1 - NO CARGO BODYTYPE	3 - VEHICLE TOWING ANOTHER		8 - POLE	12 - CONCRETE MIXER	12	12 12 12				
O 1 CARGO	/ NOT APPLICABLE 2 - BUS	MOTORVEHICLE 4 - LOGGING	/ 010001411151101 0050 00V	9 - CARGO TANK	13 - AUTOTRANSPORTER	~ RA . /					
BODY TYPE	D 1007		T CRAINICHTECHERANE	10-FLAT BED 11-DUMP	14-GARBAGE/REFUSE 99-OTHER / UNKNOWN	9 3 9	3 9 <b>1</b> 3 9 <b>3</b> 3				
7 7 7	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICKTIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	6					
	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE	10-DISABLED FROM PRIOR ACCIDENT		2	6 6 6				
PELEGIS					10 FIRST SPARAUSES	- NO DAMAGE [	O]				
	CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED		9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS	12 - FIRST RESPONDER AT INCIDENT SCENE	□-TOP [13]	-ALL AREAS [ 15 ]				
LOCATION	2-INTERSECTION - UNMARKED CROSSWALK	0000000000		11-SHARED USE PATHS OR TRAILS	99-OTHER / UNKNOWN	<b>□</b> -UNIT	NOT AT SCENE [16]				
AT IMPACT	1 - NON-CONTACT	1 - STRAIGHT AHEAD		13 - NEGOTIATING A CURVE	18-APPROACHING						
3	2-NON-COLLISION 0 1	2 - BACKING	8 - ENTERING TRAFFIC LANE	14-ENTERING OR CROSSING SPECIFIED LOCATION	OR LEAVING VEHICLE 19-STANDING	0 - NO DAMAGI	POINT OF CONTACT  14 - UNDERCARRIAGE				
ACTION	4 - STRUCK PRE-CRASH	3 - CHANGING LANES 4 - OVERTAKING/PASSING	OVERTAKING/PASSING 10 - PARKED 15		20 - OTHER NON-MOTORIST	1 2 1-12 - REFER T	O UNIT 15 - VEHICLE NOT AT SCENE				
	5 - BOTH STRIKING ACTIONS & STRUCK	5 - MAKING RIGHT TURN	KING RIGHTTURN 11 - SLOWING OR STOPPED		21 - STANDING OUTSIDE DISABLED VEHICLE	13-TOP 99 - UNKNOWN					
	9-OTHER/UNKNOWN	6 - MAKING LEFT TURN	III I I I I I I I I I I I I I I I I I	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		TRAFFIC				
	1 - NONE	7 - LEFT OF CENTER	DADVED DOCITION	17 - VISION OBSTRUCTION	21 -LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL				
0.8	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8 - FOLLOWING TOO CLOSE / ACD/ 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  2 - SIGNAL 5 - YIELD SIGN				
CONTRIBUTING	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID	19-LOAD SHIFTING/FALLING/ SPILLING	ROADWAY	2 2 - TWO-WAY	3 - FLASHER 6 - NO CONTROL				
CIRCUMSTANCES		11 - DROVE OFF ROAD		20 - IMPROPER CROSSING		# of THROUGH LANES	RAIL GRADE CROSSING				
SEQUENCE	OF EVENTS	en ( ) to 1800 en 173 (1820 p. 2004)				ON ROAD	1 - NOT INVOLVED  2 - INVOLVED-ACTIVE CROSSING				
1 <b>2 0</b>	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE		16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING				
1 2 0	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	TRAVEL	17 - ANIMAL — FARM 18 - ANIMAL — DEER	EQUIPMENT 23 - STRUCK BY FALLING,	UNIT / NON	-MOTORIST DIRECTION				
2	3 - IMMERSION 4 - JACKKNIFE	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY	19-ANIMAL - OTHER	SHIFTING CARGO OR ANYTHING SET IN MOTION		1 - NORTH 5 - NORTHEAST				
	5 - CARGO / EQUIPMENT 10 - CROSS MEDIAN		14-PEDESTRIAN	20 - MOTOR VEHICLE IN TRANSPORT	BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM 3 TO L	4 3 - EAST 7 - SOUTHEAST				
3	LOSS OR SHIFT 15 - PEDALCYCLE 2			21 - PARKED MOTOR VEHICLE	E 7-VIII EN MOVABLE UDJEV!		4 - WEST 8 - SOUTHWEST				
4	25 - IMPACT ATTENUATOR			43 - CURB	50 - WORK ZONE MAINTENANCE	2 MAR CELEVANO VINTERS	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	RE 34-MEDIAN GUARDRAIL SUPP		46-FENCE	52 - BUILDING 53 - TUNNEL	$\begin{bmatrix} 0_{\perp} 2_{\perp} 5_{\perp} \end{bmatrix}$	1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR				
	28-BRIDGE PARAPET 29-BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT	47 - MAILBOX 48 - TREE	54-OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED				
6	30-GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT	49-FIRE HYDRANT	99 - OTHER / UNKNOWN						
1	FIRST HARMFUL EVEN	т 1 мост н	ARMFUL EVENT			3 5					

OFF PUBLIC BAFETY MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER						
A THE STATE OF THE PARTY OF THE								2 0 2 3 - 0 0 0 0 8 4 2 6						
UNIT # NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER						
		ALSKI, TIMOTH	Y, SC	OTT					0 1 1 5 1 9 9 7 2 6 M					
	S: STREET, CITY, STATE, ZIP  EVERGREEN DR, Streetsboro, OH 44241								Redacted per ORC 149.43(A)(1)					
INJURIES	ES INJURED   EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)   SAFETY EQUIPMEN								— DOT C	SEATING POSITIO	N AIR BAG	USAGE	EJECTION	TRAPPED
0 4 J	BY 1	<b>Kent Fire</b>						USED 0 4	MC HE	LMET 0 1	1		1	_1_
OL STATE	operator Redac	LICENSE NUMBER ted per ORC 450	1:1-12	OFFENS	E CHAI	RGED	LOCAL CODE	OFFENSE DESC	RIPTION	CITATI	ON NÚI	MBER		
0	ENDORSEMEN SELECT UP TO 2			VER TRACTED	ALC	OHOL / DRUG SUSPI	ECTED	CONDITION	AL(	OHOL TEST YPE VALUE	STATUS	DRUG TYPE	RESILLT	SELECTUPTO4
. 4 .	30000101100		BY	1	=	LCOHOL MAR	ANAULIS	1	1	1	1	1	, nesse.	
UNIT #	NAME: LAST	T, FIRST, MIDDLE			υ۰	THER DRUG			الث	DATE OF BIRTH			AGE	GENDER
0.2		AMY, MAKENNA	.JUD	ITH					. 0 . 2	$1 \cdot 9 \cdot 2 \cdot 0$	. 0 . 5			F.
	STREET, CITY, S		-,											
1841 P	LEAS	ANT VALLEY RD	,Stree	etsbor	о,О	H 44241			Reda	phone - include area cacted per C	RC	149	.43(	A)(1)
INJURIES 5	INJURED TAKEN BY	EMS AGENCY (NAME)	7/-	INJUREDT	AKEN TO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED 0 4	DOT-C	MPLIANT	N AIR BAG	AIR BAG USAGE EJECTION TRAPPED		
OLSTATE	OPERATOR	LICENSE NUMBER		OFFENS	E CHAI	RGED	LOCAL	OFFENSE DESC		_ U _ I	CITAT	ON NUI	MBER	
О. Н.	Redac	ted per ORC 450	1:1-12	333.0	)3		CODE	Maximum Sp			2561			
<u> </u>	ENDORSEMEN SELECT UP TO 2	T RESTRICTION SELECT	UPTO3 DRIN	/ER		OHOL / DRUG SUSPI		CONDITION		OHOL TEST		DRUG TEST(S)		
	SELECT DE 102		BY	RACTED	=	_	RIJUANA		2	1	5	TYPE 1	KESULI	SELECTOP 104
4				7	0	THER DRUG		1			_1_	1,		اسال
UNIT #	NAME: LAST	r, FIRST, MIDDLE								DATE OF BIRTH		'	AGE	GENDER
ADDRESS:	STREET, CITY, S	STATE 71P							CONTACT	PHONE - INCLUDE AREA (	CODE			
ORI	o , , , , , , , , , , , , , , , , , , ,								CONTACT	THORE - INCLUDE AREA				
INJURIES		EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)		DOT-C	SEATING POSITIO	N AIR BAG	USAGE	EJECTION	TRAPPED
	TAKEN BY							USED	MC HE					
OL STATE	OPERATOR	LICENSE NUMBER		OFFENS	E CHAI	RGED LOCAL OFFENSE DESC			RIPTION CIT			ITATION NUMBER		
OL CLASS	SELECT UP TO 2			RACTED		DHOL / DRUG SUSPI		CONDITION	STATUS T	YPE VALUE			RESULT	SELECTOP TO 4
	1 11				=	THER DRUG	NO CANTA							11 11 1
INJU	RIES	SEATING POSITION		IR BAG		OL CLASS	5	OL RESTRIC		DRIVER DISTRAC	100		ST STA	TUS
1 - FATAL 2 - SUSPECTED S	SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP 2 - DEPLOYE			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER 2 - CDL INTRASTAT		1 - NOT DISTRACTED 2 - MANUALLY OPERATIN		1 - NONE ( 2 - TEST R		
3 - SUSPECTED I		2 - FRONT - MIDDLE	3- DEPLOYE			3 - CLASS C		3 - CORRECTIVE LE		ELECTRONIC COMMUN	NICATION	3 - TEST G	IVEN, CON	TAMINATED
4 - POSSIBLE IN. 5 - NO APPAREN		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	4 - DEPLOYE 5 - NOTAPP	D BOTH FROM	NT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARMWAIVER	N DITE	DIALING)			E / UNUSA	ULTS KNOWN
		(M0TORCYCLE PASSENGER)  5 - SECOND - MIDDLE		YMENT UNKNOWN 5 - M/C MOPED ONLY 6 - EXCEPT CLASS				SS A COMMUNICATION DEVICE 5 - TEST GIVEN, RESUL				ULTS		
1 - NOT TRANSPO		6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTO	COLUMNIA TION OF THE			ALCOHOL TEST TYPE		
/TREATED AT	SCENE	7 - THIRD – LEFT SIDE (M0TORCYCLE SIDE CAR)		ECTION		OL ENDORSE	MENT	8 - INTERMEDIATE		5 - OTHER ACTIVITY WITH ELECTRONIC DEVICE	HAN	1 - NONE	IUL IES	ITTPE
2 - EMS 3 - POLICE		8 - THIRD - MIDDLE	1 - NOTEJE			H - HAZMAT M - MOTORCYCLE		9 - LEARNER'S PER	MIT	6 - PASSENGER		2 - BL00D		
9 - OTHER / UNK	NO WN	9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION	3-TOTALLY			P - PASSENGER		RESTRICTIONS  10 - LIMITED TO DAY	LIGHT ONLY	7 - OTHER DISTRACTION INSIDE THE VEHICLE		3 - URINE 4 - BREAT		
SAFETY E	UIPMENT	OF TRUCK CAB	4-NOTAPP	LICABLE		N - TANKER Q - MOTOR SCOOTER		11 - LIMITED TO EMI		8 - OTHER DISTRACTION O	DUTSIDE	5 - OTHER		
1 - NONE USED 2 - SHOULDER B	FIT ONLY USED	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	1- NOTTRAI	RAPPED		R - THREE-WHEEL MO	TORCYCLE	12 - LIMITED - OTHE 13 - MECHANICAL DI		9 - OTHER / UNKNOWN		DRU	G TEST	TYPE
3 - LAP BELT ON		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	2-EXTRICA	TED BY		S - SCHOOL BUS T - DOUBLE & TRIPLE	TRAILERS	(SPECIAL BRAK)	ES, HAND	CONDITION		1 - NONE 2 - BLOOD		
4 - SHOULDER & 5 - CHILD RESTR		12 - PASSENGER IN UNENCLOSED CARGO ARE A	3- FREED B	ICAL MEANS Y		X - TANKER / HAZMAT		ADAPTIVE DEVI	CES)	1 - APPARENTLY NORMAL		3 - URINE		
FORWARD FA	CING	13 - TRAILING UNIT		CHANICAL ME	ANS	GENDER		14 - MILITARY VEHICLE	E THI GIVE HIM PAINIEM			4 - OTHER		
6 - CHILD RESTR REAR FACING		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F-FEMALE		AIR BRAKES 16-OUTSIDE MIRRO	P	ANGRY, DISTURBED)				SULT(S)
7 - BOOSTER SEA		15 - NON-MOTORIST 99 - OTHER / UNKNOWN				M - MALE U - OTHER / UNKNOWN		17 - PROSTHETIC AII		4 - ILLNESS 5 - FELL ASLEEP, FAINTEI		1 - AMPHE 2 - BARBI	ETAMINES TURATES	
9 - PROTECTIVE		77- VIIICRY DIVINOTYIN						18-OTHER		FATIGUED, ETC. 6 - UNDERTHE INFLUENC	E	3 - BENZ0	DIAZEPIN	ES
(ELBOW, KNE 10 - REFLECTIVE										OF MEDICATIONS / DRU	JGS	4 - CANNA 5 - COCAIN		
11 - LIGHTING - P	EDESTRIAN									9- OTHER/UNKNOWN		6 - OPIATE	ES / OPIOID	\$
/ BICYCLE ON 99 - OTHER / UNKI												7 - OTHER 8 - NEGAT	IVE RESUL	TS

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U	OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER  2 0 2 3 - 0 0 0 0 8 4 2 6							
_		T	THE THE LETTER PROPERTY OF THE	WALLEST AND AND A						0,0,8				
	UNIT#		ST, FIRST, MIDDLE	LDAE				DATE OF BIRTH AGE GENDER OF 1 1 1 1 9 9 8 2 5 F						
Ę	01 BURGER, LAUREN, RAE  ADDRESS: STREET, CITY, STATE, ZIP								CONTACT PHONE - INCLUDE AREA GODE					
OCCUPANT			N AVE ,Raver	Redacted per ORC 149.43(A)(1)										
20	Contraction over	INJURED	EMS AGENCY (NAME)		SEATING POSITION	AIR RAG IISAGI	FLECTION	TRAPPED						
	4	TAKEN BY 1	Kent Fire		INJURED TAKEN TO: MEDICAL FACILI	iri (mame, or i)	SAFETY EQUIPMENT USED 0 4	MC HELMET	0 4	1	1	1		
H	UNIT#	NAME. LAS	T. FIRST, MIDDLE				0 4	DAT	E OF BIRTH		AGE	GENDER		
	02		AMY, KEEGA	AN				0 9 1		1.8	0.4	M		
L									- INCLUDE AREA CO	DE .				
OCCUPANT	1841 PLEASANT VALLEY RD ,Streetsboro ,OH 44241							Redacte	d per O	RC 14	9.43	(A)(1)		
00		INJURED	EMS AGENCY (NAME)	, , , , , , , , , , , , , , , , , , , ,	INJURED TAKEN TO: MEDICAL FACILI	DOT C	SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED				
	5	TAKEN BY				DOT-COMPLIANT MC HELMET	0 3	, 1	1 1	1				
7	UNIT # NAME: LAST, FIRST, MIDDLE							DAT	E OF BIRTH		AGE	GENDER		
									1 1 1		1 6	1		
ANT	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE				
OCCUPANT														
0	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	ITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPED		
	تـــــا	ВҮ						MC HELMET	لسلسا		ــــا لـــــا			
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
Ę.								шш			F.E.			
OCCUPANT	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
000	THURSTEE	THURES	FAC A				LOAFETY FAMILIES		CEATING DOCUTION	LAIR BAG HEAG	LEIENTINE	ITDADDED		
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	ITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIK BAG USAGI	EJECTION	TRAPPED		
			JRIES	SAFET	Y EQUIPMENT USED		SEATING POS			AIR BAG L	ISAGE			
	1 - FATA			1 - NONE US			IT - LEFT SIDE		1 - NOT DE					
	2-SUS	PECTEDSE	RIOUS INJURY		E OCCUPANT (MOTORCYCLE DRIV  DER BELT ONLY USED 2 - FRONT – MIDDLE  3 - FRONT – RIGHT SIDE			(ER) 2 - DEPLOYED FRO						
	3 - SUS	PECTED M	INOR INJURY						3 - DEPLO					
H	4 - POSS	SIBLE INJU	JRY		T ONLY USED ER & LAP BELT USED	ND - LEFT SID		4 - DEPLOYED BOTH FRONT/SIDE						
	5 - NO A	PPARENT	INJURY		RESTRAINT SYSTEM – 5 - SECOND – N			ENGER/	5 - NOT APPLICABL					
		INJURED	TAKEN BY	FORWAR	RD FACING 6 - SECOND - RIGHT SI			9 - DEPLOYMENT UNKNOWN						
		TRANSPOR		6 - CHILD R	RESTRAINT SYSTEM – 7 - THIRD – LEFT SIDE (MOTORCYCLE SIDE									
	2- EMS			7 - BOOSTER										
	3- POLI	ICE		8 - HELMET	T USED 9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION			2 - PARTIALLY FIECTI			ED			
	9- OTH	ER / UNKNO	OWN		CTIVE PADS USED 11 - PASSENGER IN OTH			HER ENCLOSED 3 - TOTALLY EJECTED						
		GEI	NDER		N, KNEES, ETC.)  CARGO AREA (NON-TI  CTIVE CLOTHING  BUS, PICK-UP WITH CA									
Ę	F-FEMA				G - PEDESTRIAN	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ENGER IN UNE	NCLOSED	LOSED TRAPPED					
	M - MAL	E R/UNKNO	WN		CARGO AREA  13 - TRAILING UNIT			1 - NOT TRAPPE						
				99- OTHER /	/ UNKNOWN 14 - RIDING ON VEHI			EXTERIOR	2 - EXTRIG	ICATED BY MECHANICAL				
							TRAILING UNIT)		3 - FREED	BY NON-M	ECHANIC	AL		
							R / UNKNOWN		MEANS					
	NAME: LAS	ST, FIRST, MIDE	DLE					DAT	E OF BIRTH	Ī	AGE	GENDER		
WITNESS														
WIT	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE				
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SS	NAMIE: LA	SI, FIRSI, MIDL	ile.						LOFBIKIN		AUL	GENDER		
WITNESS	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE.				
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۵	NAME: LAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER		
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