OHIO DEPARTMENT TRAFFIC CRASS	SH REPO	ORT *DENOTES	MANDATORY FIEL	D FOR SUPPLEM	ENT REPORT	LC	CAL REPORT NUM	BER*
K PHOTOS TAKEN OH-2 OH-	LOCAL	INFORMATION				2,0,2,2,-	$10_{1}0_{1}0_{1}0_{1}1$	8035
SECONDARY CRASH OH-1P OTI		TING AGENCY NAME*			NCIC*	HIT/SKIP 1 - SOLVED	NUMBER OF UNITS	UNIT IN ERROR 98 - ANIMAL
PRIVATE PROPE	*	of Kent Poli	ce	լՕյ	$6_17_10_13_1$	J 2 - UNSOLVED	0 1	U 99 - UNKNOWN
I I - CITY I	IN: CITY, VILLAG	E,TOWNSHIP*				CRASH DATE / TI 110:2:4:2:0:2:2:/		CRASH SEVERITY 1 - FATAL
ROUTE TYPE ROUTE NUMBER PREETY N - NO	ORTH LOCATI	ION ROAD NAME	***************************************		ROAD TYPE	LATITUDE DEC		2 - SERIOUS INJURY SUSPECTED
S - S0 E - EA	UTH NST CTIX	YAHOGA			$\mathbf{S} \cdot \mathbf{T}$	41,15,9	9.0.0.	3 - MINOR INJURY SUSPECTED
ROUTE TYPE ROUTE NUMBER PREFIX N - NO	ORTH REFERI	ENCE ROAD NAME (RO	AD, MILEPOST, HO	USE #)	ROAD TYPE	LONGITUDE DEC		4 - INJURY POSSIBLE
S-SO E-EA	AST N M	IANTUA			$ \mathbf{S} \cdot \mathbf{T} $	$ _{\overline{0},8,1_{\mathrm{le}},3,6,0_{\mathrm{le}}}$	0.2.0	5 - PROPERTY DAMAGE ONLY
REFERENCE POINT DIRECTION FROM REFERENCE		OUTE TYPE		ROAD TYPE			NTERSECTION REI	
1 - INTERSECTION N - NORTH 2 - MILE POST 3 S - SOUTH	1	STATE ROUTE(TP) AL US ROUTE			RD - ROAD SQ - SQUARE	WITHIN INTER	SECTION OR ON AP	PROACH
3-HOUSE # E-EAST W-WEST	SR - STATE		BL - BOULEVARD N	MP - MILEPOST	ST - STREET	WITHIN INTER	CHANGE AREA	NUMBER OF APPROACHES
DISTANCE DISTANCE FROM REFERENCE UNIT OF MEASURE	CR - NUMBE	RED COUNTY ROUTE			TE - TERRACE TL - TRAIL		ROADWAY	
2 0 1 - MILES 2 - FEET 3 - YARDS	TR - NUMBE ROUTE	ERED TOWNSHIP			WA - WAY	ROADWAY DIV	IDED	
J JARDO	EVENT			PL - PLACE	ACT	DIRECTION of TRAVES	1	
LOCATION OF FIRST HARMFUL 1 - ON ROADWAY 9 - CROS		1-1	MANNER OF CRASH NOT COLLISION 4			DIRECTION OF TRAVES N - NORTH	1	EDIAN TYPE DED FLUSH MEDIAN
1.4	/EWAY/ALLEY .WAY GRADE C	POSCING 1 1	TIMO MOTOR	- BACKING - ANGLE		S - SOUTH	(<4	FEET) DED FLUSH MEDIAN
4 - ON ROADSIDE 12-SHA	RED USE PATH	IS OR	TRANSPORT 7	- SIDESWIPE, SA		E - EAST W - WEST	(≥4	FEET) DED, DEPRESSED MEDIAN
6-OUTSIDE TRAFFIC WAY 13-BIKE	ELANE			- SIDESWIPE, OP. - OTHER / UNKNO			4 - DIVI	DED, RAISED MEDIAN
7 - ON RAMP 14-TOLI 8 - OFF RAMP 99-OTH	L BOOTH ER / UNKNOWN	N					1	Y TYPE) ER/UNKNOWN
WORK ZONE RELATED	WOR	K ZONE TYPE	LOCATION	OF CRASH IN V	ORK ZONE	CONTOUR	CONDITIONS	SURFACE
WORKERS PRESENT	1 - LANE C	CLOSURE SHIFT/CROSSOVER		BEFORE THE 15' WARNING SIGN	r work zone	_1_	_1_	
LAW ENFORCEMENT PRESENT L	, 3 - WORK (ON SHOULDER	, v	ADVANCE WARN		1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE
	─ OR MED 4 - INTERN	MITTENT OR MÖVING W	l l	ACTIVITY AREA	-A	2 - STRAIGHT GRADE 3 - CURVE LEVEL	2-WET 3-SNOW	2 - BLACKTOP, BITUMINOUS,
ACTIVE SCHOOL ZONE	5-OTHER	<u> </u>	5 -	TERMINATION A	REA	4 - CURVE GRADE	4 - ICE	ASPHALT 3 - BRICK/BLOCK
LIGHT CONDITION			ATHER			9 - OTHER/UNKNOWN	5 - SAND, MUD, DIF OIL, GRAVEL	RT, 4 - SLAG, GRAVEL,
1 - DAYLIGHT 1 2 - DAWN/DUSK	,0,	1-CLEAR 1. 2-CLOUDY	6 - SNOW 7 - SEVERE (CROSSWINDS		l I	6 - WATER (STAND	STONE ING, 5 - DIRT
3 - DARK - LIGHTED ROADWAY 4 - DARK - ROADWAY NOT LIGHTED		3 - FOG, SMOG, SM 4 - RAIN	MOKE 8-BLOWING	S SAND, SOIL, DII G RAIN OR FREE	•		MOVING) 7 - SLUSH	9 - OTHER/UNKNOWN
5 - DARK – UNKNOWN ROADWAY LIG 9 - OTHER / UNKNOWN	HTING	5 - SLEET, HAIL	99-OTHER/				9 - OTHER/UNKNO	wn
ARRATIVE				-37577				Indicate the north
NIT 1 WAS TRAVELING	FACTD	OTIND ON					<	direction with an "N" on the
CUYAHOGA ST. UNIT W			TC'					compass diagram,
INTERSECTION OF CU								
ST WHEN UNIT 1'S BRA								
1 COULD NOT STOP TH				,	lupson		1 1 1	1 1
STRUCK A UTILITY PO	LE INST	EAD OF GO	ING			e indi	<u>, </u>	1 70
INTO N MANTUA ST.					-			l sympania
					1	CUYAN	OGA ST	1
					ļļ		[!]	!
]				
				1				
CRASH REPORTED DATE / TIME	DISPA	TCH DATE / TIME	AR	RIV.				
			1 1 1 1 1 1					MOTORIST
TOTAL TIME OTHER ROADWAY CLOSED INVESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*		l	Снескев ву ОБ	FICER'S NAME*		MOTORIST
		OFFICER	'S BADGE NUMBER	۲*	CHECKE	ED BY OFFICER'S BADGE	NUMBER*	(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ADES)
0.17004 0114 4/40 [760 0920]								

LOCAL REPORT NUMBER

[2,0,2,2,-,0,0,0,1,8,0,3,5,...]

UNIT # OWNER NAME: LAST, FIRST,	OWNER PHONE: NO UN	F ARFA CONE (FED	DAMAGE						
OWNER ADDRESS: STREET, CITY, STATE, Z		WIAKY		J	DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE				
753 CUYAHOGA ST	,Kent ,OH 44	1240			2 - MINOR DAMAGE 4 - DISABLING DAMAGE				
COMMERCIAL CARRIER: NAME, ADDRE	SS, CITY, STATE, ZIP		COMMERCIAL CARRIER P	HONE: INCLUDE AREA CODE	9 - UNKNOWN DAMAGED AREA(S)				
LP STATE LICENSE PLATE # DC74AV		IDENTIFICATION # $\mathbf{E}_1 \mathbf{S}_1 6_1 \mathbf{Z}_1 6_1 \mathbf{S}_1 7_1 8_1 7_1 7_1 8_1 7_1 7_1 8_1 7$	VEHICLE YEA			E ALL THAT APPLY			
INSURANCE COMPA VERIFIED ALLSTATE	NY IN:	SURANCE POLICY # 2015187		U Toyota VEHICLE MODEL COROLLA	11 12 1	11 12 1			
TYPE OF USE COMMERCIAL GOVERNMENT	IN EMERGENCY RESPONSE	US DOT #	TOWED BY: COMPANY Bakers Towing	NAME	9 9 3 3	9 10 2 3 3			
INTERLOCK DEVICE HIT/SKIP UNIT	#OCCUPANTS VEH	ICLE WEIGHT GVWR/GCWR 1 - ≤10K LBS. 2 - 10,001 - 26K LBS. J 3 - >26K LBS.	MATERIAL C RELEASED PLACARD	IS MATERIAL LASS # PLACARD ID #	8 7 6 5	12 1 6 5 5			
0 1 2 - PASSENGER VAN (MINIVAN) 8 3 - SPORT UTILITY VEHICLE 9 4 - PICK UP 5 - CARGO VAN	8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE 10 - Moped or Motorized Bicycle	13 - SNOWMOBILE 14 - SINGLE UNIT TRUCK 15 - SEMI-TRACTOR	19-BUS (16+ PASSENGERS) 20-OTHER VEHICLE 21-HEAVY EQUIPMENT 22-ANIMAL WITH RIDER OR	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST 26 - BICYCLE 27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	10 9 8 7	11 12 1 10 2 2 9 3 3 8 7 6 5 5 12			
WAS VEHICLE OPERATING IN AUT MODE WHEN CRASH OCCURRED? 1-YES 2-NO 9-OTHER/UNKN	OWN AUTONOMOUS MODE LEVEL	1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION 5 - FULL AUTOMATION		11 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	6 11 12 1 2 9 3 3 6 4 4 3 3			
0,1 2 - TAXI SPECIAL 3 - ELECTRONIC RIDE SHARING	7 - BUS – INTERCITY 8 - BUS – SHUTTLE 9 - BUS – OTHER	12 - MILITARY 13 - POLICE	16-FARM 17-MOWING 18-SNOW REMOVAL 19-TOWING 20-SAFETY SERVICE PATROL	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	7 6 5	8 7 6 5 4 7 6 5 5			
/NOT APPLICABLE		5 - INTERMODAL CONTAINER CHASSIS 6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	8 - POLE 9 - CARGOTANK 10-FLAT BED 11-DUMP	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER 14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	9 3 9	3 9 3 3			
VEHICLE 2 - HEAD LAMPS	4 - BRAKES 5 - STEERING 6 - TIRE BLOWOUT	7 - WORN OR SLICKTIRES 8 - TRAILER EQUIPMENT DEFECTIVE	9 - MOTORTROUBLE 10-disabled from Prior Accident	99-OTHER/UNKNOWN	6				
CROSSWALK NON-MOTORIST 2 - INTERSECTION – UNMARKED	3 - INTERSECTION – OTHER 4 - MIDBLOCK – MARKED CROSSWALK 5 - TRAVEL LANE – OTHER LOCATION	6 - BICYCLE LANE 7 - SHOULDER / ROADSIDE 8 - SIDEWALK	9 - MEDIAN/CROSSING ISLAND 10-DRIVEWAY ACCESS 11-SHARED USE PATHS OR TRAILS	12 - FIRST RESPONDER AT INCIDENT SCENE 99 - OTHER / UNKNOWN	- NO DAMAGE [- TOP [13]	0] - UNDERCARRIAGE [14] - ALL AREAS [15] NOT AT SCENE [16]			
2 - NON-COLLISION 3 - STRIKING ACTION 4 - STRUCK 5 - BOTH STRIKING ACTIONS	1 - STRAIGHT AHEAD 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 5 - MAKING RIGHTTURN 6 - MAKING LEFTTURN	7 - MAKING U-TURN 8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED INTRAFFIC 12 - DRIVERLESS	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING SPECIFIED LOCATION 15 - WALKING, RUNNING, JOGGING, PLAYING 16 - WORKING 17 - PUSHING VEHICLE	18 - APPROACHING OR LEAVING VEHICLE 19 - STANDING 20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE DISABLED VEHICLE 99 - OTHER / UNKNOWN	0 - NO DAMAG	TO UNIT 15 - VEHICLE NOT AT SCENE			
2 - FAILURE TO YIELD	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ACDA	13 - IMPROPER START FROM A A PARKED POSITION 14 - STOPPED OR PARKED	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE EQUIPMENT	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE	TRAFFICWAY FLOW 1 - ONE-WAY	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN			
CONTRIBUTING 4 - RAN STOP SIGN	9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING 11 - DROVE OFF ROAD	ILLEGALLY 15 - SWERVING TO AVOID	19-LOAD SHIFTING/FALLING/ SPILLING	23 - OPENING DOOR INTO ROADWAY 99 - OTHER IMPROPER ACTION	2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL			
6 - IMPROPER TURN	12 - IMPROPER BACKING	16 - WRONG WAY	20 - IMPROPER CROSSING		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED			
SEQUENCE OF EVENTS		NON-COLLISION			1 1	1 2 - INVOLVED-ACTIVE CROSSING			
1 O 9 1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	11 - CROSS CENTERLINE — OPPOSITE DIRECTION OF	16 - RAILWAY VEHICLE 17 - ANIMAL — FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT		3 - INVOLVED-PASSIVE CROSSING			
3 - IMMERSION 2 4 - JACKKNIFE 5 - CARGO / EQUIPMENT LOSS OR SHIFT	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT 10 - CROSS MEDIAN	TRAVEL 12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION 14 - PEDESTRIAN 15 - PEDALCYCLE	18-ANIMAL — DEER 19-ANIMAL — OTHER 20-MOTOR VEHICLE IN TRANSPORT 21-PARKED MOTOR VEHICLE	23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	UNIT/NO	N-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST 3 - SAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST			
25 - IMPACT ATTENUATOR	COLLISIO 31-GUARDRAIL END	N WITH FIXED OBJEC 37 - TRAFFIC SIGN POST	T - STRUCK 43-CURB	50 - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN			
4 / / / / / / / / / / / / / / / / / / /	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER 34 - MEDIAN GHARDRAIL	38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE	44 - DITCH 45 - EMBANKMENT 46 - FENCE 47 - MAILBOX	EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT	UNIT SPEED	DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR			
6 29 - BRIDGE RAIL 30 - GUARDRAIL FACE	BARRIER 36 - MEDIAN OTHER BARRIER	OR SUPPORT 42 - CULVERT	48-TREE 49-FIRE HYDRANT	99 - OTHER / UNKNOWN	POSTED SPEED	3 - UNDETERMINED			

OHIO DEPAYTMENT MOTORIST / NON-MOTORIST MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER								
A THE CONTROL OF THE							12+0+2+2+-+0+0+0+1+8+0+3+5+								
UNIT#									DATE OF BIRTH AGE GENDER						
0.1	ROBINSON, ELIZABETH, MARY								0,9,1,1,1,9,3,7						
1		TREET, CITY, STATE, ZIP TYAHOGA ST, Kent, OH 44240							CONTACT PHONE - INCLUDE ADEA CODE						
	,	<u>.</u>	4424(lonantino paores				
3 1	INJURED E TAKEN BY	MS AGENCY (NAME)		INJUREDTAK	EN 10: MEDIGAL	FACILII Y (NAM	ME, C(TY)	SAFETY EQUIPMENT		COMPLIANT IFI MET	1	I .	USAGE EJECTION	TRAPPED	
OLSTATE		CENSE NUMBER		OFFENSE	CHARGED	i	OCAL.	0 4		MICHELMET 0 1 2			L On number		
О. Н.	Of Elisticit Ex	onton Homban		OFFENSE CHARGED LOCAL OFFE			011 21102 2200	E DESCRIFTION OUR							
OL CLASS	ENDORSEMENT	RESTRICTION SELECT UP			ALCOHOL / DR	UG SUSPECT	<u>ロ</u> TED	CONDITION		LCOHOL			DRUG TEST(S		
	SELECT UPTO 2		DIST BY	TRACTED	ALCOHOL	MARIJ	UANA	_	STATUS	TYPE	VALUE	STATUS	TYPE RESUL	T SELECTUPTO 4	
_4				1	OTHER DRU	JG			1	<u>l</u> .			1	لـــالـــالـــ	
UNIT #	NAME: LAST, FI	RST, MIDDLE								DAT	CE OF BIRTH		AGE	GENDER	
									<u></u>	1	1. 1.			ـــــا	
ADDRESS:	: STREET, CITY, STA	TE, ZIP							CONTA	CT PHONI	- INGLUDE AREA	CODE			
INJURIES	INJURED E	MS AGENCY (NAME)		Turrence	THE MEDICAL	FAOTI ITY		LEACETY FAUIDMENT		<u>L</u>	Legazino nocizi	ON AVE DAG	Union Election	l TRANSES	
IMJURIES	TAKEN BY	INIS AGENCT (NAME)		INJURED TAKEN TO: MEDICAL FACILITY (NAME, SITY) SAFETY EQUIPMENT USED					T DOT-COMPLIANT SEATING POSITION AIR BAG			USAGE EJECTION TRAPPED			
INJURIES OL STATE	OPERATOR LI	CENSE NUMBER		OFFENSE	CHARGED	T i	LOCAL	OFFENSE DESC	 RIPTION		<u> </u>	CITAT	L L TION NUMBER		
							CODE	, ,=====							
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT U			ALCOHOL / DF	RUG SUSPEC		CONDITION	STATUS	LCOHOL	TEST VALUE	STATUS	DRUG TEST(S) LT select upto 4	
	SELECT UP TO 2		BY	TRACTED	ALCOHOL	MARIJ	JUANA		STATUS	ITPE	VALUE	SIAIUS	TIPE RESUL	LI SELECI DP:U4	
					OTHER DRI	JG		<u></u>		وإيسا		إليسا			
UNIT#	NAME: LAST, F	IRST, MIDDĻLE								DA	TE OF BIRTH		AGE	GENDER	
ADDDESS	: STREET, CITY, STA	NTF 7(0							CONT	OT BUOM	<u> </u>			<u> </u>	
ADDRESS	3: 81 KEE1, 0111, 81 <i>F</i>	NE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
ADDRESS INJURIES	INJURED E	EMS AGENCY (NAME)		INJURED TAI	KEN TO: MEDICA	L FACILITY (N/	AME, CITY	SAFETY EQUIPMENT	<u> </u>	L	SEATING POSIT	ION AIR BAG	USAGE EJECTIO	N TRAPPED	
	TAKEN BY			1,000.00		_ , , , , , , , , , , , , , , , , , , ,		USED	100	-COMPLIAN HELMET	ТΙ	ALI DAG	LOZONIO	1,200	
	L STATE OPERATOR LICENSE NUMBER 0						OFFENSE DES	FFENSE DESCRIPTION			CITAT	CITATION NUMBER			
OL STATE					CODE				·						
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT L		VER TRACTED								DRUG TEST(TYPE RESU	S) LT selegi up 104		
			BY	1100125	ALCOHOL		JUANA								
L	URIES	SEATING POSITION		AIR BAG	OTHER DR	OL CLASS		OL RESTRI	TION(S		IVER DISTRA	CTION	TEST SI	IATUS	
1-FATAL		1-FRONT-LEFT SIDE	1 - NOT DE	of the same of the second	1-CLAS	THE RESIDENCE	5.85 A	1-ALCOHOL INTE	10 Tel 100 Co.	ASS. \$145.50	OT DISTRACTED		1 - NONE GIVEN		
	D SERIOUS INJURY D Minor injury	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOY 3 - DEPLOY		2 - CLAS 3 - CLAS	260		2 - COL INTRASTA 3 - CORRECTIVE L	Strain Street		IANUALLY OPERAT Lectronic comm		2 - TEST REFUSEL 3 - TEST GIVEN, C		
4 - POSSIBLE I	2000年1月2日 (1900年) (1900年)	3 - FRONT - RIGHT SIDE		ED BOTH FRON	T/SIDE 4-REGI	ULAR CLASS		4 - FARM WAIVER			EVICE (TEXTING, IALING)	TYPING,	SAMPLE/UNU	SABLE	
5 - NO APPARE	ENT INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT AP	PLICABLE 'Ment unknow		O = D) Moped only		5 - EXCEPT CLASS 6 - EXCEPT CLASS	N. S. C. C		ALKING ON HANDS		4 - TEST GIVEN, R 5 - TEST GIVEN, R	tion the same to	
Vice of Corner on Section	TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	/-VLFLU	UNKNUW		ALID OL		& CLASS B BU	S	4-1	ALKING ON HAND-	HELD	UNKNOWN	30 % 5 ₁₀ 2 388 w	
1 - NOT TRANS /TREATED/		7-THIRD - LEFT SIDE	# 1/8/14-18 : [2	JECTION	OL.	ENDORSEM	ENT	7 - EXCEPT TRACT 8 - INTERMEDIAT		5 - 0	OMMUNICATION D OTHER ACTIVITY W	ITH AN	ALCOHOL T	EST TYPE	
2 - EMS 3 - POLICE		(MOTORCYCLE SIDE CAR) 8-Third – Middle	1 - NOT EJ	ECTED LLY EJECTED	H - HAZ	MAT Torcycle		RESTRICTIONS 9-LEARNER'S PE		1. 经营销的	LECTRONIC DEVIC Passenger	CE .	1 - NONE 2 - Blood		
9-OTHER/UN	NKNOWN	9-THIRD-RIGHT SIDE	1.0	Y EJECTED	기업 하는 이 경험 함께 되었다.	SENGER		RESTRICTION)	7-(THER DISTRACTION		3 - URINE		
SAFETVI	EQUIPMENT	10 - SLEEPER SECTION OF TRUCK CAB	4 - NOT AP	PLICABLE	N - TAN	增加。 化苯基酚 第		10 - LIMITED TO DA	فيخفل وترفع ووثانون		INSIDE THE VEHICI OTHER DISTRACTION		4 - BREATH 5 - OTHER		
1 - NONE USE	According to the Section of the Country	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	i barga Tiribi	TRAPPED		TOR SCOOTER Ree-Wheel Mot	ORCYCLE	10. 1447770 071			THE VEHICLE OTHER / UNKNOWN		DRUG TE	STTVPF	
2 - SHOULDER 3 - LAP BELT (R BELT ONLY USED	(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOTTR 2 - EXTRIC			IOOL BUS		13 - MECHANICAL (Special bra					1 - NONE		
Commence of the same	R&LAP BELT USED	12 - PASSENGER IN UNENCLOSED	MECHA	NICAL MEANS		JBLE & TRIPLE TI IKER/HAZMAT	KAILERS	CONTROLS, OR ADAPTIVE DE			CONDITION APPARENTLY NOR	that is you will be a	2 - BLOOD 3 - URINE		
5 - CHILD RESTRAINT SYSTEM - CARGO AREA 3 - FREED FORWARD FACING 13 - TRAILING UNIT NON-M			BY Echanical Means 14 - Military V				- MILITARY VEHICLES ONLY		2 - PHYSICAL IMPAIRMENT		4-OTHER	3 - URINE 4 - OTHER			
6 - CHILD RES	STRAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				15 - MOTOR VEHIC AIR BRAKES	15 - MOTOR VEHICLES WITHOUT AIR BRAKES		3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)		DRUG TEST	RESULT(S)			
REAR FACI 7 - BOOSTER S		15 - NON-MOTORIST			M - MAI			16 - OUTSIDE MIRROR			4 - ILLNESS		1 - AMPHETAMINES		
8 - HELMET U	JSED	99 - OTHER / UNKNOWN			U-OTH	ER/UNKNOWN		': 17 - PROSTHETIC AID : 18 - Other			5 - FELL ASLEEP, FAINTED, FATIGUED, ETC:		2 - BARBITURATES 3 - BENZODIAZEPINES		
	VE PADS USED (NEES, ETC.)									()	UNDER THE INFLU OF MEDICATIONS /		4 - CANNABINOII	a Adding the	
10 - REFLECTIV											'ALCOHOL Other/Unknown		5-COCAINE 6-OPIATES/OP	IOIDS	
/ BICYCLE										7.	COLOR (CHAND IN)		7-OTHER		
99 - OTHER / UI	NKNOWN							Judge Valle				V. 47	8 - NEGATIVE RE	SULTS	

	OCCUPANT / WITNESS ADDENDUM							LOGAL REPORT NUMBER							
~~			JOOI AIII 7	RA TII I SPOR	O PEDDENDON			2 0 2 2	- 10 10 1	$0_{1}1_{8}$	03	اللك			
	UNIT#	INIT # NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER						
NW	ADDRESS:	DRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
CCUPAN								<u> </u>	<u></u>		1				
٥,	INJURIES	INJURED EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT							SEATING POSITION AIR BAG USAGE EJECTION TRAPPER						
		BY						MC HELMET		<u></u>	<u></u>				
	UNIT#	NAME: LAS	r, FIRST, MIDDLE		DATE	OF BIRTH		AGE	GENDER						
								L							
NWA	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE -	INCLUDE AREA COD	E					
OCCUPAN											السب				
Θ-	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY	SAFETY EQUIPMENT USED	DOT-COMPLIANT	EATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED				
	لــــا	ВУ						MC HELMET			<u></u>				
	UNIT#	IT # NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GENDER						
N V	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	· INCLUDE AREA COL	Œ					
OCCUPANI															
9	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: Medical Facility	Y (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
	لـــــا	ВҮ						MC HELMET			<u> </u>				
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DATE	OF BIRTH		AGE	GENDER			
OCCUPAN	ADDRESS	S: STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA GODE							
30		,									,				
	INJURIES	INJURED TAKEN	D EMS AGENCY (NAME) INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY E					DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
		BY L		-				MC HELMET		L	J]			
	1 FAT	er and a second	JRIES	Charles Maris Inde	Y EQUIPMENT USED	1 - EPAN	SEATING POS	TITUN	1 - NOT DE	AIR BAG U	SAGE	V 457 441			
	化基础等于数	1 - FATAL 1 - NONE USED - 1 - FRONT = LEFT SID 2 - SUSPECTED SERÍOUS INJURY VEHICLE OCCUPANT (MOTORCÝCLE DR								YED FRONT					
			INOR INJURY	2 - SHOULD	ER BELT ONLY USED	ELT ONLY USED 2 - FRONT - MIDDLE 3 - FRONT - RIGHT SID				3 - DEPLOYED SIDE					
	4 - POSSIBLE INJURY					新·阿拉斯克斯 (1975)	ND – LEFT SID		4 - DEPLO	A Section of the Control of the Cont					
1	5 - NO APPARENT INJURY 4 - SHOULDE				ER & LAP BELT USED					/SIDE					
	1800 July 1800						IND – MIDDLE IND – RIGHT SI	호텔 (1985년 - 1985년 - 1							
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	/TREATED AT SCENE REAR (医多种性 化二甲基甲基甲基甲基	TORCYCLE SIDI RD – MIDDLE					28.05 & 58.0			
	2 - EMS 7 - B00STE					·秦二、张扬军人的8000。	RD – RIGHT SID	E ∵ " se	1 - NOT EJECTED 2 - PARTIALLY EJECTED						
	3 - POL		ouri	8 - HELMET	USED TIVE PADS USED	The Control of the Control	EPER SECTION		中的學家及認識	ALLY EJECT LY EJECTEI	\$ 1.0 P				
	A-011	IER / UNKN			KNEES, ETC.)		SENGER IN OTH Goarea (non-1	IER ENCLOSED RAILING UNIT,							
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	M - MAI	·老:"您要我把自己知道。		11 - LIGHTIN / BICYCL	IG – PEDESTRIAN		SENGER IN UN GOAREA	ENCLUSED	1 - NOT TI	5.条约100mm200					
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ĺ	NAME: LAST, FIRST, MIDDLE							DA	TE OF BIRTH		AGE	GENDER			
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