OHIO DEPARTMENT TRAFF	CRASH I	LOCAL REPORT NUMBER*												
PHOTOS TAKEN OH		2,0,2,1,-,0,0,0,2,1,1,5,0,												
SECONDARY CRASH		NCIC*	HIT/SKIP 1 - SOLVED	NUMBER OF UNITS UNIT IN ERROR										
PR	IVATE PROPERTY	Police	(0)	6,7,0,3	2 - UNSOLVED		U I 99 - UNKNOWN							
COUNTY* LOCALITY* 1 - CITY 2 - VILLAGE	LOCATION: CITY				CRASH DATE /1		CRASH SEVERITY 1 - FATAL							
1 3-TOWNSH	ip IXCIIC	E			ROAD TYPE	LATITUDE DE		2 - SERIOUS INJURY SUSPECTED						
S R 5 9	-	ST				3 - MINOR INJURY								
	3 E-EAST W-WEST REFIX N-NORTH	MAIN REFERENCE ROAD NA	ME (ROAD, MI	LEPOST, HO	USE #)	ROAD TYPE		LONGITUDE DECIMAL DEGREES 4- INJURY PO						
ROUTE TYPE ROUTE NUMBER P	•	•			5 - PROPERTY DAMAGI									
REFERENCE POINT DIRE	CTION W-WEST	ROUTE TYPE			ROAD TYPE		[8:1] _e [3 3 6	ONLY						
1-INTERSECTION	C COUTY	INTERSTATE ROUTE(T	PAGE 1			D - ROAD	WITHIN INTERSECTION OR ON APPROACH WITHIN INTERCHANGE AREA NUMBER OF APPROACHES							
1 3	E-EAST	FEDERAL US ROUTE STATE ROUTE	The second second			Q - SQUARE T - STREET								
	TANCE CR-	E CR - NUMBERED COUNTY ROUTE CR - CIRCLE				E - TERRACE	ROADWAY							
J. Home and a second	1 MILES TO NUMBERED TOWNSHIP					VA - WAY	ROADWAY DIVIDED							
	3-YARDS				PL - PLACE			1						
LOCATION OF FIRS	F HARMFUL EVEN 9 - CROSSOVER				COLLISION/IMPA(- REAR-TO-REAR	CT	DIRECTION OF TRAVE N - NORTH		MEDIANTYPE VIDED FLUSH MEDIAN					
0 1 2-ON SHOULDER	10-DRIVEWAY	ALLEY ACCESS RADE CROSSING	BETWE	OTOR ,	- BACKING - ANGLE		S - SOUTH		<pre>vided Flush Median <4 FEET) VIDED Flush Median</pre>					
4 - ON ROADSIDE	12-SHARED US TRAILS		VEHICL TRANSI	PORT 7	- SIDESWIPE, SAME		(:	≥4 FEET)						
5 - ON GORE 6 - OUTSIDE TRAFFIC W			2 - REAR-E 3 - HEAD-0	_	- SIDESWIPE, OPPO - OTHER / UNKNOV			4 - DI	VIDED, DEPRESSED MEDIAN VIDED, RAISED MEDIAN					
7 - ON RAMP 8 - OFF RAMP	14-TOLL BOOTS 99-OTHER/UN	- 1							NY TYPE) HER/UNKNOWN					
WORK ZONE RELATED		WORK ZONE TYPE		LOCATION	OF CRASH IN WO	OF CRASH IN WORK ZONE CONTOUR CONDITIONS								
WORKERS PRESENT		LANE CLOSURE		1-	BEFORE THE 1ST V		. 1	. 2	NS SURFACE					
LAW ENFORCEMENT PRESI	SNT 3-1	LANE SHIFT/CROSSOVI WORK ON SHOULDER	ER .	2-	ADVANCE WARNIN		1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE					
LAW ENFORCEMENT PRESI		OR MEDIAN INTERMITTENT OR MO'	VING WORK		TRANSITION AREA ACTIVITY AREA		2 - STRAIGHT GRADE	2-WET	2 - BLACKTOP, BITUMINOUS,					
ACTIVE SCHOOL ZONE	5-	DTHER		5 -	TERMINATION ARE	EA	3 - CURVE LEVEL 4 - CURVE GRADE	3 - SNOW 4 - ICE	ASPHALT					
LIGHT CONDITIO	DN		WEATHER					5 - SAND, MUD, D	3 - BRICK/BLOCK DIRT, 4 - SLAG, GRAVEL,					
1 - DAYLIGHT 2 - DAWN/DUSK	1-DAYLIGHT 1-CLEAR 6-SNOW 2-DAWN/DUSK 1-CLEAR 6-SNOW 1-CLEAR 6-SNOW 1-CLEAR 6-SNOW 7-SEVERE							OIL, GRAVEL 6 - WATER (STAM	STONE IDING, 5-DIRT					
3 - DARK - LIGHTED ROA 4 - DARK - ROADWAY NO		SAND, SOIL, DIRT,			MOVING)	9 - OTHER/UNKNOWN								
5 - DARK – UNKNOWN RO	4 - DARK – ROADWAY NOT LIGHTED 4 - RAIN 9 - FREEZII 5 - DARK – UNKNOWN ROADWAY LIGHTING 5 - SLEET, HAIL 99 - OTHER					NG DRIZZEE		7 - SLUSH 9 - OTHER/UNKN	own					
9 - OTHER / UNKNOWN														
NARRATIVE		***********							Indicate the north direction with					
UNIT ONE ATTEM	IPTED TO	EFT HA				1	an "N" on the compass diagram.							
TURN ONTO E. N	MAIN ST. V	VHILE DOIN	NG SO,					_						
UNIT ONE TURN	ED IN FR	ONT OF UNI	T TWO					*						
UNIT TWO WAS	DRIVING	FROM WES	T TO E	AST		E. MAIN :	эт.	N 100 1	70 50415					
ON E. MAIN ST A														
THE DRIVER SII			CIE	2008	- R									
THE DRIVER SH			0 %	a (
			14™4 EAST MAIN ST											
CRASH REPORTED DATE / TI	ME	DISPATCH DATE / TIME		I RIVAL DATE / TIME SCENE CLEARED DATE / TIME REPORT TAKEN BY										
1 2 2 2 9 2 0 2 1 / 2 1	0,0,0,1,2,2	9 2 0 2 1 / 2	0 0 2 1	2 0 2 1 / 2 0 0 5 1 2 2 9 2 0 2 1 / 2 0 3 9 X POLICE AGENCY										
TOTAL TIME OTHE ROADWAY CLOSED INVESTIGATI	R TOTA	ME* 1g, Sama	CHECKED BY OFFICER'S NAME*											
	Bowen, Jared CHECKED BY OFFICER'S BADGE NUMBER* SUPPLEMENT (CORRECTION OR ALL TO ARREST MEMBERS AND ALL TO ARREST MEMBER													
0 0 0 0 3	0 , 0 , 0 , 0 , 3 , 0 , 0 , 6 , 7 , 2 , 5 , 4 , , 2 , 1								4					



2,0,2,1,-,0,0,2,1,1,5,0, OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) DAMAGE OWNER PHONE: INCLUDE AREA CODE (SAME AS DRIVER) 0 | 1 | UNGER, CHRISTIAN, P DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 142 SHAWNEE TRL, Aurora, OH 44202 J 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP 9 - UNKNOWN COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE 3 V WD B 7 A J 9 H M 3 3 4 3 4 9 JMM2183 2 | 0 | 1 | 7 | OH Volkswagen **INSURANCE COMPANY** INSURANCE POLICY # COLOR VEHICLE MODEL INSURANCE VERIFIED PROGRESSIVE 921328327 **GRY JETTA** TYPE OF USE US DOT # **TOWED BY: COMPANY NAME** COMMERCIAL GOVERNMENT RESPONSE City Service HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS MATERIAL RELEASED CLASS # PLACARD ID # - ≤10K LBS HIT/SKIP UNIT DEVICE 2 - 10.001 - 26K LBS PLACARD 10 11 1 J 3 - >26K LBS 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12-GOLF CART 18 - LIMO (LIVERY VEHICLE) 23-PEDESTRIAN / SKATER 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 0 1 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14-SINGLE UNIT TRUCK 20-OTHER VEHICLE 25 - OTHER NON-MOTORIST UNIT TYPE 4 - PICK UP 10 - MOPED OR MOTORIZED 15-SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26-BICYCLE BICYCLE 5 - CARGO VAN 16 FARM FOURMENT 22 - ANIMAL WITH RIDER OR 27 - TRAIN 11 - ALL TERRAIN VEHICLE ANIMAL-DRAWN VEHICLE 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP (ATV / UTV) 00 # OFTRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 1 - DRIVER ASSISTANCE 9 4 - HIGH AUTOMATION 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS MODE LEVEL 1 - NONE 6 - PUS - CHARTER/TOUR 11-FIRE 16-FARM 21 - MAIL CARRIER 0 1 2 · TAXI 7 - BUS - INTERCITY 12-MILITARY 17 - MOWING 99 - OTHER / UNKNOWN SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13-POLICE 18-SNOW REMOVAL FUNCTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14-PUBLIC UTILITY 19-TOWING 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15-CONSTRUCTION EQUIPMENT 20-SAFETY SERVICE PATROL 12 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER R - POLF 12-CONCRETE MIXER O 1 CARGO / NOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGOTANK 13 - AUTO TRANSPORTER 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE BODY 4 7 - GRAIN/CHIPS/GRAVEL 11 - DUMP 99 - OTHER / UNKNOWN 00 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICKTIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEERING B - TRAH ER FOILIPMENT 10 - DISABLED FROM PRIOR DEFECTS 3 - TAIL LAMPS 6 - TIRE BLOWOUT DEFECTIVE ACCIDENT - UNDERCARRIAGE [14] - NO DAMAGE [0] 1 - INTERSECTION - MARKED 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12-FIRST RESPONDER CROSSWALK AT INCIDENT SCENE ☐-TOP [13] 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE □-ALL AREAS [15] 10 - DRIVEWAY ACCESS NON-MOTORIST 2-INTERSECTION - UNMARKED CROSSWALK 99-OTHER/UNKNOWN 8 - SIDEWALK 11 - SHARED USE PATHS OR LOCATION CROSSWALK - UNIT NOT AT SCENE [16] 5 - TRAVEL LANE - OTHER LOCATION TRAILS AT IMPACT 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING INITIAL POINT OF CONTACT OR LEAVING VEHICLE 2 - NON-COLLISION 2 - BACKING B - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 4 0 - NO DAMAGE 14 - UNDERCARRIAGE 0 8 3 - CHANGING LANES SPECIFIED LOCATION 19-STANDING 3-STRIKING 9 - LEAVING TRAFFIC LANE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 0 | 8 | ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 10-PARKED DIAGRAM JOGGING, PLAYING 99 - UNKNOWN 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN 21 - STANDING OUTSIDE 11 - SLOWING OR STOPPED 13 - TOP 16-WORKING DISABLED VEHICLE & STRUCK INTRAFFIC 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 99-OTHER/UNKNOWN 9-OTHER/UNKNOWN 12-DRIVERLESS 1-NONE 7 - LEFT OF CENTER 13-IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY TRAFFICWAY FLOW TRAFFIC CONTROL PARKED POSITION 2 - FAILURE TO YIELD B-FOLLOWING TOO CLOSE / ACDA 18-OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14-STOPPED OR PARKED EQUIPMENT 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE 23 - OPENING DOOR INTO 2 - TWO-WAY 0 2 ILLEGALLY 2 - SIGNAL 5 - YIELD SIGN 6 3- FLASHER 19-LOAD SHIFTING/FALLING/ ROADWAY 4 - RAN STOP SIGN 10-IMPROPER PASSING 15 - SWERVING TO AVOID 6 - NO CONTROL CONTRIBUTING 5 - UNSAFE SPEED SPILLING 99 - OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING # OF THROUGH LANES RATE GRADE CROSSING 6 - IMPROPERTURN 12 - IMPROPER BACKING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS 2 - INVOLVED-ACTIVE CROSSING 4 NON-COLLISION 3 - INVOLVED-PASSIVE CROSSING 1 - OVERTURN/ROLLOVER 6 - FOULPMENT FAILURE 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE 1 2 0 OPPOSITE DIRECTION OF EQUIPMENT 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 17 - AHIMAL - FARM TRAVEL 23-STRUCK BY FALLING. UNIT / NON-MOTORIST DIRECTION 18-ANIMAL - DEER 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 1 - NORTH 5 - NORTHEAST 19-ANIMAL - OTHER J 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT ANYTHING SET IN MOTION 13-OTHER NON-COLLISION 2 - SOUTH 6 - NORTHWEST 20 - MOTOR VEHICLE IN 5 - CARGO / EQUIPMENT 10 - CROSS MEDIAN BY A MOTOR VEHICLE 14-PEDESTRIAN FROM 1 TO 4 TRANSPORT 7 - SOUTHEAST 3 - EAST LOSS OR SHIFT 24-OTHER MOVABLE CBJECT 15 - PEDAL CYCLE 21 - PARKED MOTOR VEHICLE 8 - SOUTHWEST 4 - WEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER / UNKNOWN 25 - IMPACT ATTENUATOR 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43-CURB 50 - WORK ZONE MAINTENANCE / CRASH CUSHION EQUIPMENT 32 - PORTABLE BARRIER 38-OVERHEAD SIGN POST 44 - DITCH UNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 51 - WALL 33 - MEDIAN CARLE RARRIER 39-LIGHT/LUMINARIES 45 - EMBANKMENT 1 - STATED / ESTIMATED SPEED STRUCTURE SUPPORT 52 - BUILDING 34 - MEDIAN GUARDRAIL 46-FENCE $[0 \ | \ 1 \ | \ 0 \]$ 27 - BRIDGE PIER OR ABUTMENT 40-LITH ITY POLE 2 - CALCULATED / EDR BARRIER 53-TUNNEL 47 - MAILBOX 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54-OTHER FIXED OBJECT 48-TREE 3 - UNDETERMINED POSTED SPEED 29 - BRIDGE RAIL OR SUPPORT BARRIER 99-OTHER/UNKNOWN 49-FIRE HYDRANT 36 - MEDIAN OTHER BARRIER 30 - GUARDRAIL FACE 42-CULVERT , 3 , 5 , 1 MOST HARMFUL EVENT ☐ FIRST HARMFUL EVENT

LOCAL REPORT NUMBER



 $2 \cdot 0 \cdot 2 \cdot 1 \cdot - \cdot 0 \cdot 0 \cdot 0 \cdot 2 \cdot 1 \cdot 1 \cdot 5 \cdot 0$ OWNER NAME: LAST, FIRST, MIDDLE (XI SAME AS DRIVER) OWNER PHONE: INCLUDE AREA CODE (TXI SAME AS DRIVER) DAMAGE 0 | 2 | WRIGHT, KYLE, TIMOTHY DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 3 4201 DUDLEY RD , Shalersville , OH 44255 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE 9 - UNKNOWN DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE | LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE O H HRU3573 $2_{+}G_{|}1_{+}W_{|}B_{|}5_{+}8_{+}N_{|}2_{+}8_{+}9_{+}1_{+}5_{+}9_{+}9_{+}0_{+}6_{+}$ 2 1 0 1 0 1 8 Chevrolet INSURANCE COMPANY **INSURANCE POLICY #** INSURANCE VERIFIED COLOR VEHICLE MODEL ALL STATE 992963161 GLD **IMPALA** TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT IN EMERGENCY HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS MATERIAL INTERLOCK CLASS # PLACARD ID # 1 - ≤10K LBS 2 - 10,001 - 26K LBS HIT/SKIP UNIT RELEASED EQUIPPED PLACARD 3 - >26K LBS 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12-GOLF CART 18-LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 0 1 1 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14-SINGLE UNIT TRUCK 20-OTHER VEHICLE 25 - OTHER NON-MOTORIST UNIT TYPE 4 - PICK UP 10 - MOPED OR MOTORIZED 15-SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE BICYCLE 5 - CARGO VAN 16-FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 TRAIN 11 - ALL TERRAIN VEHICLE ANIMAL-DRAWN VEHICLE 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP (ATV / UTV) 00 # OFTRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 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LOCAL REPORT NUMBER

OHIO DEPARTMENT MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER						
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UNIT#								DATE OF BIRTH AGE GENDER						
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	ADDRESS: STREET, CITY, STATE, ZIP 142 SHAWNEE TRL, Aurora, OH 44202								CONTACT PHONE - INCLUDE AREA CODE					
		EMS AGENCY (NAME)	OH 44			MEDIAN CLANICA		T						
NON 5	TAKEN				URED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED				SEATING POSITION OF THE PROPERTY OF THE PROPER		AGE EJECTION	TRAPPED		
OL STATE								0 4	_	ELMET 0, 1		CITATION NUMBER		
O, H,					CODE				offense description Right of Way on Publ			23354		
OL CLASS	ENDORSEMENT				/ER ALCOHOL / DRUG SUSPECTED			CONDITION	CONDITION ALCOHOL TEST			DRUG TEST(S)		
	SELECT UP TO 2		BY	TRACTED		LCOHOL MAI	RIJUANA		STATUS	TYPE VALUE	STATUS T	YPE RESUL	T SELECT UP TO 4	
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UNIT #	NAME: LAST, F	223-00-0	OTIE							DATE OF BIRTH		AGE	GENDER	
<u>0,2</u>	STREET, CITY, ST.	HT, KYLE, TIM	OTHY					1 0 / 2 1 / 1 9 9				2 8	M_	
2	Variations:	Y RD ,Shalersvill	. ОП	11255					CONTACT	PHONE - INCLUDE AREA	CODE			
INJURIES		EMS AGENCY (NAME)	,011	т——	AKENTO	MEDICAL FACILITY	ALAME CITY	SAFETY EQUIPMENT	l	CEATING ROCITIO	DN LAID BAD HO	10. 10.000		
5	TAKEN BY			INCORED !	INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY)			USED 0 4	DOT-C	DMPLIANT	IN AIK BAG US	N AIR BAG USAGE EJECTION TRAPPED		
OL STATE	OPERATOR L	ICENSE NUMBER		OFFENS	OFFENSE CHARGED		LOCAL	OFFENSE DESC			CITATIO	CITATION NUMBER		
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4			BY	1		LCOHOL MA	RWUANA	1		1 VALUE		-70	T SELECT UPTO 4	
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OMI #	UNIT # NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH AGE GEN			GENDER	
ADDRESS:	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE						
TORI	ADDRESS. STREET, STREET, EIF								CUNTACT PHUNE - INCLUDE AREA CODE					
INJURIES		EMS AGENCY (NAME)		INJURED T	AKEN 10	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	ON AIR BAG US	AGE EJECTION	TRAPPED	
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OL CLASS	OL CLASS ENDORSEMENT RESTRICTION SELECT UP TO 2		DISTRACTED		OHOL / DRUG SUSPECTED		CONDITION	ALCOHOL TEST STATUS TYPE VALUE S			DRUG TEST(S) STATUS TYPE RESULT SELECT UP 104			
			BY		=	LCOHOL MAF THER DRUG	RUUANA							
INJU	RIES	SEATING POSITION	Α	IR BAG		OL CLASS	5	OL RESTRIC	TION(S)	DRIVER DISTRAC		TEST STA	ATUS	
1-FATAL	SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP 2 - DEPLOY					1 - ALCOHOL INTER	AREAL TO COL	1 - NOT DISTRACTED	1 - NONE GIVEN			
3- SUSPECTED		2 - FRONT - MIDDLE	3 - DEPLOY				2 - CDL INTRASTAT 3 - CORRECTIVE LE		2 - MANUALLY OPERATING AN ELECTRONIC COMMUNICATION		2 - TEST REFUSED 3 - TEST GIVEN, CONTAMINATED			
4 - POSSIBLE IN	BLE INJURY 3-FRONT - RIGHT SIDE 4 - DEPLOYED			D BOTH FRONT/SIDE 4-REGULAR CLASS 4-F				4 - FARM WAIVER	POT OLAGO I DILO				SAMPLE / UNUSABLE 4 - TEST GIVEN, RESULTS KNOWN	
	(MOTORCYCLE PASSENGER) 3 - NOT APPL			E MAT MODER ONLY				6 - EXCEPT CLASS		3 -TALKING ON HANDS-F COMMUNICATION DEV	ICE 5-	5 - TEST GIVEN, RESULTS		
INJURED 1- NOT TRANSP	TAKEN BY 5-SECOND - MIDDLE				6 - NO VALID OL & CLASS B BUS 7 - Except tracto					4 - TALKING ON HAND-HE COMMUNICATION DEV	LD.	UNKNOWN		
/TREATED AT	TY SCENE 7 - THIRD - LEFT SIDE EJI			ECTION OL ENDORSEMENT 8-INTER				8 - INTERMEDIATE		5 - OTHER ACTIVITY WITH	H AN	ALCOHOL TEST TYPE		
2 - EMS 3 - POLICE	8 - THIRD - MIDDLE 2 - PARTIALL					RESTRICTIONS 9 - LEARNER'S PERMIT		ELECTRONIC DEVICE 6 - PASSENGER		2 - BL00D				
9-OTHER/UNK	R / UNKNOWN 9-THIRD - RIGHT SIDE 3-TOTALLY		EJECTED P - PASSENGER			RESTRICTIONS 10 - LIMITED TO DAYLIGHT ONLY		7 - OTHER DISTRACTION INSIDE THE VEHICLE		3 - URINE 4 - BREATH				
SAFETY E	QUIPMENT	OF TRUCK CAB	4 - NOT APP	LICABLE		N - TANKER Q - MOTOR SCOOTER		10 - LIMITED TO DAY		8 - OTHER DISTRACTION		OTHER		
1 - NONE USED	CITANIV HEEN	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	Contract to the Contract of th	RAPPED	erena es	R-THREE WHEEL MO	TORCYCLE	12 - LIMITED - OTHE		7-OTHER/UNKNOWN		DRUG TEST	TYPE	
3-30-31-13-13	HOULDER BELT ONLY USED (NON-TRAILING UNIT, BUS, 1 - NOTTRAI IP BELT ONLY USED PICK-UP WITH CAP) 2 - EXTRICA		TED BY T_MOURT F & TRIPLET PAIL FOR			13 - MECHANICAL DEVICES (SPECIAL BRAKES, HAND CONTROLS, OR OTHER		CONDITION		1 - NONE				
Name and Address of the Owner, when	LDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED MECHA DRESTRAINT SYSTEM - 3 - FREED		IICAL MEANS Y.TANKER/HA7MAT			ADAPTIVE DEVICES)		1 - APPARENTLY NORMAL		2 - BLOOD 3 - URINE				
FORWARD FA	ACING 13-TRAILING UNIT NON-ME		HANICAL MEANS GENDER			14 - MILITARY VEHICLES ONLY 15 - MOTOR VEHICLES WITHOUT		2 - PHYSICAL IMPAIRMENT		4-OTHER				
6 - CHILD RESTR REAR FACING			F-FEMALE			AIR BRAKES		3 - EMOTIONAL (E.G., DEPRESSED, ANGRY, DISTURBED)		DRUG TEST RESULT(S)				
7 - BOOSTER SE				M - MALE U - OTHER / UNKNOWN			16 - OUTSIDE MIRROR 17 - PROSTHETIC AID		4 - ILLNESS 5 - FELL ASLEEP, FAINTED,		1 - AMPHETAMINES 2 - BARBITURATES			
8 - HELMET USE 9 - PROTECTIVE	PADS USED	**- OTHER! UNKNOW!						18-OTHER		FATIGUED, ETC.	3.	BENZODIAZEPIN	IES	
(ELBOW, KNE 10 - REFLECTIVE										6- UNDER THE INFLUENCE OF MEDICATIONS / DRU / ALCOHOL	JGS 4-	CANNABINOIDS COCAINE	a Lui	
11 - LIGHTING - F	EDESTRIAN									9- OTHER / UNKNOWN	REAL NAME	OPIATES/OPIOID	DS	
/ BICYCLE ON 99 - OTHER / UNK												OTHER	II Te	
mane sa 27									The Table		8-	NEGATIVE RESU	rt/2	