OF PUBLIC SAFETY	RAFFIC CRAS	SH RE	PORT *DENOTE	S MANDATORY F	IELD FOR SUPPLEM	AENT REPORT	179-378-	LOCAL REPORT NU	IMBER*				
PHOTOS TAKEN	OTOS TAKEN OH-2 OH-3 LOCAL INFORMATION							2,0,2,1,-,0,0,0,6,2,9,6,					
SECONDARY CRASH		PORTING AGENCY NAME			NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR					
COUNTY* LOCALITY*	PRIVATE PROPE		ty of Kent Pol	ice	_0	6 7 0 3	1 - SOLVED		0 2 98 ANIMAL				
1-0	CITY VILLAGE Kont	MICITY, VIL	CAGE, TOWNSHIP >				CRASH DATE /		CRASH SEVERITY				
3-1	IMBER PREFIX 1-NO		ATION ROAD NAME			ROAD TYPE	1014121212101211 LATITUDE DE		2 - SERIOUS INJURY SUSPECTED				
ROUTE TYPE ROUTE NU S R 2,6,1	2- SOL 3- EA	ST				NOAD THE			3 - MINOR INJURY				
		RTH REF	ERENCE ROAD NAME (R	OAD, MILEPOST, F	OUSE #)	ROAD TYPE	LONGITUDE D		SUSPECTED 4 - INJURY POSSIBLE				
ROUTE TYPE ROUTE NU	2- SOU 3- EA! 4-WE	ST W	ATER			ST	8,1, 3,5,4		5 - PROPERTY DAMAGE				
REFERENCE POINT	DIRECTION FROM REFERENCE		ROUTE TYPE	ROME TO	ROAD TYPE			INTERSECTION RE	ONLY				
1 - INTERSECTION 2 - MILE POST	1- NORTH 4 2-SOUTH	47734796	ERSTATE ROUTE(TP) ERAL US ROUTE	AL - ALLEY AV - AVENUE		RD - ROAD SQ - SQUARE	[52]	RSECTION OR ON AI					
3- HOUSE #	3-EAST 4-WEST	SR - STAT		BL - BOULEVARD	MP - MILEPOST	ST - STREET	WITHIN INTE	RCHANGE AREA	NUMBER OF APPROACHES				
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURE	350 350	BERED COUNTY ROUTE	CR - CIRCLE CT - COURT		TE - TERRACE TL - TRAIL	ROAD WAY						
3 0	2 - FEET	TR - NUM ROU	BERED TOWNSHIP TE	DR - DRIVE	PI - PIKE	WA - WAY	X ROADWAY DIV	/IDED					
	3-YARDS	EVENT		HE - HEIGHTS	PL - PLACE								
1 - ON ROADWA	Y 9-CROSS	OVER	1-	NOT COLLISION	H COLLISION/IMPA 4 - REAR-TO-REAR	CT	DIRECTION OF TRAVE 1 - NORTH		REDIAN TYPE IDED FLUSH MEDIAN				
0 1 2-ON SHOULDE		WAY/ALLE	CDOCCINC	IWUMOTOR	5 - BACKING 6 - ANGLE		3 2-SOUTH	3 (<4	FEET)				
4 - ON ROADSID 5 - ON GORE	E 12-SHAR TRAIL	ED USE PA .S	THS OR	TRANSPORT	7 - SIDESWIPE, SAM B - SIDESWIPE, OPP		3- EAST 4- WEST	(≥4	2 - DIVIDED FLUSH MEDIAN (≥4 FEET) 3 - DIVIDED, DEPRESSED MEDIAN				
6 - OUTSIDE TRA	AFFIC WAY 13-BIKE 14-TOLL				9 - OTHER / UNKNO			4 - DIVI	DED, RAISED MEDIAN				
B-OFF RAMP		R / UNKNO	WN					1	Y TYPE) ER/UNKNOWN				
WORK ZONE RELAT	ED	wo	RK ZONE TYPE	LOCATIO	ON OF CRASH IN WO	ORK ZONE	CONTOUR	CONDITIONS	SURFACE				
WORKERS PRESENT	т		CLOSURE SHIFT/CROSSOVER	1	- BEFORE THE 1ST WARNING SIGN	WORK ZONE	1	1	, 2 ,				
LAW ENFORCEMEN	IT PRESENT	3 -WORK	CON SHOULDER		- ADVANCE WARNII -TRANSITION AREA		1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE				
ACTIVE SCHOOL ZO	IN E	4 - INTE	RMITTENT OR MOVING W	ORK 4	- ACTIVITY AREA		2 - STRAIGHT GRADE		2 - BLACKTOP, BITUMINOUS,				
		5-OTHE	R	5	-TERMINATION AR	EA	3 - CURVE LEVEL 4 - CURVE GRADE	3 - SNOW 4 - ICE	ASPHALT				
LIGHT C	ONDITION		WE	ATHER 6 - SNOW			9 - OTHER/UNKNOWN	5 - SAND, MUD, DIR OIL, GRAVEL	4 - SLAG, GRAVEL,				
1 2 - DAWN/DUSK 3 - DARK - LIGHT	TED DOADWAY	0,1	2 2-CLOUDY	7 - SEVERE	CROSSWINDS		6-WATER (S		STONE ING, 5 - DIRT				
	WAY NOT LIGHTED		3 - FOG, SMOG, SM 4 - RAIN		G SAND, SOIL, DIRT			MOVING) 7 - SLUSH	9 - OTHER/UNKNOWN				
5 - DARK – UNKN 9 - OTHER / UNKN	IOWN ROADWAY LIGH NOWN	TING	5 - SLEET, HAIL	99 - OTHER	/ UNKNOWN			9 - OTHER/UNKNOW	VN				
NARRATIVE						200	100		^				
UNIT 1 & 2 W	ERE TRAVE	ELING	IN THE CUE	RR	111			<	Indicate the north direction with an "N" on the				
LANE E/B ON									compass diagram.				
UNIT 1 STOP	PPED FOR T	RAFF	IC. UNIT 2	talah dalah seperbagai dan dalah seperbagai dan dalah seperbagai dan dalah sebesah seperbagai dan dalah sebesah					7.0				
FAILED TO S				UCK									
THE REAR C	OF UNIT 1. U	NIT 2	CAUSED A					15 A	ente)				
POSSIBLE IN	NJURY ONL	Y CRA	ASH. THE			S,R. 26		v en - Unit (ED \$				
PASSENGER	OF UNIT 1	LATE	R REPORTE	D AT	20 Miles from 100 properties about		7	4					
2100 HRS. TH	HAT SHE WA	AS HA	VING BACK	AND			10 (10 (10 (10 (10 (10 (10 (10 (10 (10 (T 74 S.R. 26					
NECK PAIN.							16						
			riperatural de la										
CRASH REPORTED D	ATE/TIME	DISPA	ATCH DATE / TIME	AR	RIVAL DATE / TIME		SCENE CLEARED	ATE / TIME	REPORT TAKEN BY				
0,4,2,2,2,0,2,1,		4 2 2 2	10 2 1 / 1 5 5	4 0 4 2 2	2 0 2 1 / 1	6,0,4,0	4,2,2,2,0,2,1	1,1,6,3,4,	X POLICE AGENCY				
TOTAL TIME ROADWAY CLOSED INVE	OTHER	TOTAL Inutes	officer's name* Fuller, James		C		CER'S NAME*		MOTORIST				
			and the second second	BADGE NUMBER			Y OFFICER'S BADGE N	UMBER*	SUPPLEMENT (CORRECTION OF ADDITION TO AN EXISTING MEMORY SENT TO 2015)				
0,0,0	6 0 1	0 0	2 2 1				4						



	DF P	UBLIC SAFETY UNIT							AL REPORT NUMBER			
	UNIT#	AWNED NAME			2,0,2,1,-,0,0,0,6,2,9,6,							
~	0 1 1	POOLE, TERRI, L	RST, MIDDLE (SAVE AS DRIVER EIGH	n	OWN	ER PHONE: NE	LUCE AREA CODE (SAME AS DRIVER)					
OWNER	OWNER A	DDRESS: STREET, CITY, STAT	E, ZIP (SAME AS DRIVER)	10			á	1-NONE	3 - FUNCTIONAL DAMAGE			
3		STWOOD AVE ,Ak		<i>A</i>				2 - MINOR DAMAGE 4 - DISABLING DAMAGE				
	COMMER	CIAL CARRIER: NAME, AD	PRESS, CITY, STATE, ZIP		Co	MMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	9 - UNKNOWN				
H	LP STATE	LICENSE PLATE #	VENICI	E IDENTIFICATION #		Lugura, a.u.			AMAGED AREA(S) CATE ALL THAT APPLY			
	OH	FSQ6806		3 D 9 9 H 2 7 6	6.5.4	VEHICLE YE		[DATE ALL THAT APPLY			
	X INSURA	INSURANCE COM		INSURANCE POLICY #		COLOR VEHICLE MODEL		11 12	11 12 1			
	VERIF	1110 0112001	E	947148871		SIL	SANTA FE	10 11 1	2 10 11 1 2			
	COMME	TYPE OF USE ERCIAL GOVERNMENT	IN EMERGENCY	US DOT #	TOWE	ED BY: COMPANY	YNAME	10 2	1945			
ŀ			RESPONSE	EHICLE WEIGHT GVWR/GCWR	_		US MATERIAL	9 9 3	3 9 9 3			
	DEVIC	£ HIT/SKIP UN	#UCCUPANIS	1 - ≤10K LBS. 2 - 10,001 - 26K L3		MATERIAL (RELEASED	CLASS # PLACARD ID #	8 7 5	4 8 7 5 74			
	EQUIP		0 2	3 - >26K LBS.	, [PLACARD L		7 6 5	12 7 6			
		1 - PASSENGER CAR 2 - DASSENGER VAN (MINIMAN)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED	12 - GOLF CART		VERY VEHICLE)	23 - PEDESTRIAN / SKATER	6	11 12			
	0,3	3 . SPORT I TIL ITY VEHIC: F	9 - AUTOCYCLE	13-SNOWMOBILE 14-SINGLE UNIT TRUCK	19-BUS (164 20-OTHERV	- PASSENGERS) EHICLE	24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST	10/	11 11 2			
	UNIT TYPE	4 - PICK UP	10 - MOPED OR MOTORIZED	15-SEMI-TRACTOR	21 - HEAVY E		26-BICYCLE	9	0 3 3			
		5 - CARGO VAN 6 - VAN (9-15 SEATS)	BICYCLE 11 - ALL TERRAIN VEHICLE	16-FARM EQUIPMENT		WITH RIDER OR	27 - TRAIN	-	• 11 -			
L E	. 00.		(ATV / UTV)	17-MOTORHOME	soundt-	DRAWN VEHICLE	99 - UNXNOWN OR HIT/SKIP	8				
VEHICLE		# OF TRAILING UNITS						11 12	7 6 11 12			
ΛE		WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRE		0 - NO AUTOMATION		HAL AUTOMATION	9 - UNKNOWN	10 2	10 12			
	2	1-YES 2-NO 9-OTHER/UNK		1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	4 - HIGH AUT 5 - FULL AUT			10 2	10 11 1 2			
		1 HOUR	MODE LEVEL					9 9 3	3 9 9 3			
	10 11	1 - NONE 2 - TAXI	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY	11 - FIRE 12 - MILITARY	16-FARM 17-MOWING		21 - MAIL CARRIER					
	SPECIAL			13-POLICE	18-SNOW RE	MOVAL	95 - OT HER / UNKNOWN	, XIII.	8 6 7 4			
	FUNCTION	4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14-PUBLIC UTILITY	19-TOWING			6	5			
-		5 - BUS - TRANSIT/COMMUTER		15 - CONSTRUCTION EQUIPMENT	20-SAFETY	SERVICE PATROL	41 84 1		12 12 12			
ı	0 1 1	1 - NO CARGO BODY TYPE / NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	5 - INTERMODAL CONTAINER CHASSIS	B - POLE		12 - CONCRETE MIXER	12	1 1 🙈			
	BODY	2 - BUS	4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX	9 - CARGOTA 10-FLAT BED		13-AUTOTRANSPORTER 14-GARBAGE/REFUSE	~ BA ~	A 1			
	TYPE			7 - GRAIN/CHIPS/GRAVEL	11-DUMP		59-OTHER/UNKNOWN	, ()	3 9 T 3 9 🐞 3			
	1 1 1	1 - TUR' SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MOTOR TR	OUBLE	99-OTHER/UNKNOWN	Ç				
		2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT DEFECTIVE	10 - DISABLE	FROM PRIOR		0				
5	DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDEN			- NO DAMAGE	[0] -UNDERCARRIAGE [14]			
		1 - INTERSECTION - MARKED CRCSS WALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED	6 - BICYCLE LANE 7 - SHOULDER / ROADSIDE			12-FIRST RESPONDER AT INCIDENT SCENE					
ı	NON-MOTORIST LOCATION	2 - INTERSECTION - UNMARKED CROSSWALK		8 - SIDEWALK	10-DRIVEWA 11-SHARED I		99-OTHER/UNKNOWN	☐-TOP [13]	-ALL AREAS [15]			
ŀ	AT IMPACT	UNUSSWALK	5 -TRAVEL LANE - OTHER LOCATION		TRAILS			□ - UNI	T NOT AT SCENE [16]			
ı		1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAXING U-TURN	13 - NEGOTIAT		18-APPROACHING	INITIA	L POINT OF CONTACT			
	4	2 - NON-COLLISION 2 - BACKING 3 - STRIKING 1 1 1 3 - CHANGING LANES				G OR CROSSING D LOCATION	OR LEAVING VEHICLE 19-Standing	0 - NO DAMA				
	ACTION	4 - STRUCK PRE-CRASH	4 - OVERTAKING/PASSING	10-PARKED 15-WA		RUNNING,	20-OTHER NON-MOTORIST	0 6 1-12 - REFER	TO UNIT 15 - VEHICLE NOT AT SCENE			
		5 - BOTH STRIKING ACTIONS & STRUCK		11 - SLOWING OR STOPPED IN TRAFFIC	JOGGING, 16-WORKING	PLAYING	21 - STANDING OUTSIDE DISABLED VEHICLE	DIAGR.	99 - UNKNOWN			
		9-OTHER/UNKNOWN	6 - MAKING LEFTTURN	12 - DR: VERLESS	17 - PUSHING	VEHICLE	99 - OTHER / UNKNOWA					
		1-NONE	7-LEFT OF CENTER		17 - VISION OF	STRUCTION	21 - LYING IN ROADWAY	TRAFFICIUM	TRAFFIC			
		2 - FAILURE TO YIELD	8-FOLLOWING TOO CLOSE / ACD/	DADWED DESITION	13-OPERATIN	IG DEFECTIVE	22 - NOT DISCERNIBLE	TRAFFICWAY FLOW	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN			
	0 1	3 - RAN RED LIGHT 4 - RAN STOP SIGN	9-IMPROPER LANE CHANGE 10-IMPROPER PASSING	ILLEGALLY	EQUIPME 19-LOAD SHII	NT FTING/FALLING/	23 - OPENING DOOR INTO ROADWAY	1 2 - TWO-WAY	2 2-SIGNAL 5-YIELD SIGN			
S)	CONTRIBUTING CIRCUMSTANCES	5 - UNSAFE SPEED	11 - DROVE OFF ROAD	15 - SWERVING TO AVOID	SPILLING		99 - OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL			
Ž		6-IMPROPERTURN	12 - IMPROPER BACKING	16 - WRONG WAY	20 - IN PROPE	RCROSSING		# OF THROUGH LANES	RAIL GRADE CROSSING			
VE.	SEQUENCE	OF EVENTS						ON ROAD	1 - NOT INVOLVED			
al .	1 2 1 0 1	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	EVENTS 11-CROSS CENTERLINE —	16 - RAILWAY	VEHICLE	22 - WCRK ZONE MAINTENANCE	_2	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING			
		2 - FIRE/EXP_OSION	7 - SEPARATION OF UNITS	ADDRESTS DIRECTION OF	17 - ANIMAL -	- FARM	EQU'PMENT					
Į,	2	3 - IMMERSION 4 - JACKKNIFE	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	12.00WNHILL BUNAWAY	18-AHIMAL - 19-AHIMAL -		23 - STRUCK BY FALLING, SHIFTING CARGO OR	UNIT / NO	N-MOTORIST DIRECTION 1 - NORTH 5 - NORTHEAST			
ľ		5 - CARGO / EQUIPMENT	10-CROSS MEDIAN	13_OTHER MON_COLLISION	20 - MOTGR VE	HICLE IN	ANYTHING SET IN MOTION By a motor vehicle	4	2 - SOUTH 6 - VORTHWEST			
3	3[]	LOSS OR SHIFT		IF DEDALGROUP	TRANSPOR 21 - PARKED M		24 - OTHER MOVABLE CBJECT	FROM 4 TO L				
		DE IMPACTATION ATON		WITH FIXED OBJECT					4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN			
4	لللا	/ CRASH CUSHION	1 - GUARDRAIL END 2 - PORTABLE BARRIER		43 - CURB 44 - DITCH		50 - WORK ZONE MAINTENANCE - EQUIPMENT					
		26-BRIDGE OVERHEAD	33 - MEDIAN CABLE BARRIER	39-LIGHT/LUMINARIES	45 - EMBANKN		51 - WALL	UNIT SPEED	DETECTED SPEED			
:	لـــــا	27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	AD LITH ITY DOLD	46 - FENCE		52 - BUILDING 53 - TUNNEL	0,0,0	1 - STATED / ESTIMATED SPEED			
		28-BRIDGE PARAPET 29-BRIDGE RAIL	35 - MEDIAN CONCRETE	41 - OTHER POST, POLE			54 - OTHER FIXED OBJECT		2 - CALCULATED / EDR			
1			BARRIER 36-MEDIAN OTHER BARRIER	OR SUPPORT	49-FIRE HYDR	RANT	99-OTHER/UNKNOWN	POSTED SPEED	3 - UNDETERMINED			
	1	FIRST HARMFUL EVEN	1	ARMFUL EVENT				5 0				
			musi ni									



LOCAL REPORT NUMBER 2,0,2,1,-,0,0,0,6,2,9,6 OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER) OWNER PHONE: INCLUDE AREA CODE (IXI SAME AS DRIVERS DAMAGE 0 | 2 | ROSE, CHRISTOPHER, EUGENE DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X) SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 4518 FARMETTE DR ,Rootstown ,OH 44266 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE 9 - UNKNOWN DAMAGED AREA(S) LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** INDICATE ALL THAT APPLY VEHICLE YEAR VEHICLE MAKE OH HRD5453 2 D 4 G P 4 4 L 9 5 R 3 2 8 2 9 5 2 0 0 5 Dodge INSURANCE COMPANY INSURANCE VERIFIED INSURANCE POLICY # COLOR VEHICLE MODEL LBL CARAVAN TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #DCCUPANTS INTERLOCK BEVICE EQUIPPED MATERIAL CLASS # PLACARD ID # - ≤10K LBS HIT/SKIP UNIT 2 - 10,001 - 26K LBS 3 - >26K LBS. 0 1 1 PLACARD 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEFT FO 12-GOLF CART 18 - LIMO (LIVERY VEHIC! F) 23-PEDESTRIAN/SKATER 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24-WHEELCHAIR (ANY TYPE) 0 2 3 - SPORT LTILITY VEHICLE 9 - AUTOCYCLE 14-SINGLE UNIT TRUCK 23-OTHER VEHICLE 25 - OTHER YON-WOTORIST UNIT TYPE 4 - PICKUP 10 - MOPED OR MOTORIZED 15-SEVI-TRACTOR 21 - HEAVY FOURPMENT 26 - RICYCLE 5 - CARGO VAN BICYCLE 16-FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 - TRAIN 11 - ALL TERRAIN VEHICLE 6 - VAN (9-15 SEATS) ANIMAL-DRAWN VEHICLE 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP (ATV / SITV) 0 # OFTRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - VO AHTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED 0 1 - ORIVER ASSISTANCE 4 - HIGH AUTOMATION 1 1-YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS MODE LEVEL 1 - NONE 6 - BUS - CHARTER/TOUR 31.FIRE 16-FARM 21 - MAIL CARRIER 0 1 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MCW YG 99-OT-ERILNKNOWN SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 POLICE 18-SNCW REMOVAL FUNCTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 19-TOWING 14 -PUBLIC LTILITY 5 - BUS - TRANSITICOMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL 12 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 1 - NO CARGO BODY TYPE 8 - POLE 12 - CONCRETE MIXER CARGO INCT APPLICABLE **VOTOR VEHICLE** CHASSIS 9 - CARGOTANK 13 - AUTO TRANSPORTER 2 - 805 4 - LOGGING 6 - CARGO VAN/ENCLOSED BCX 13-FLAT BED 14-GARBAGE/REFUSE * 7 - GRAIN/CHIPS/GRAVEL TYPE 3 11-DUMP 99-01-FR / NKAOWA 0 1 - TURY SIGNALS 4 - BRAKES 7 - WORN OR SLICKTIRES 9 - MOTOS TROUBLE 99-OTHER UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER EQUIPMENT 10 - DISABLED FROM PRIOR DEFECTS 3 - TAIL LAMPS DEFECTIVE ACCIDENT 6 - TIRE BLOWOLT - NO DAMAGE [0] - UNDERCARRIAGE [14] 1 - INTERSECTION - MAPKED 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIA //CROSS NG ISLAND 2-FIRST RESPONDER CRESS NALK 4 - MIDELOCK - MARKED 7 - SHOULDER / ROAPSIDE 10-DRIVEWAY ACCESS AT INCIDENT SCENE -TOP [13] - ALL AREAS (15) NON-MOTORIST 2-INTERSECTION - UNMARKED CROSSWALK 99-OTHER LUNKNOWN 8 - SIDEWALK 11 - SHARED USE PATHS OR LOCATION AT IMPACT CROSS NA. < 5 -TRAVEL LANE - OTHER LOCATION -UNIT NOT AT SCENE [16] 1 - NON-CONTACT 1 - STRAIG-T AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING INITIAL POINT OF CONTACT 2 - NON-COLLISION 2 - BACKING OR LEAVING VEHICLE 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 3 3-STRIKING 1 1 3 - CHANGING LANES 0 - NO DAMAGE 14 - UNDERCARRIAGE 19-STANCING 9 - LEAVING TRAFFIC LANE SPECIFIED LOCATION ACTION 4- STRUCK PRE-CRASH 4 - CVERTAKING/PASSING 15 - WALKING, RUNNING. 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE 10-PARKED 20 - CTHER YON-VOTORIST 1 2 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHT TURY DIAGRAM JOGGING, PLAYING 21 - STANCING OUTSIDE 11 - SLOWING OR STOPPED 99 - UNKNOWN 16-WORKING 13 - TOP & STRUCK DISABLED VEHICLE IN TRAFFIC 6 - MAKING LEFT TURN 9-OTHER / INKHOWN 17 - PUSHING VEHIC F 12 - DR VERLESS 99-OTHER / UNKNOWN TRAFFIC 1-NONE 7-LEFT OF CENTER 13-IMPROPER START FROM A 17 - VISION CESTRUCTION 21 - LYING IN ROADWAY TRAFFICWAY FLOW TRAFFIC CONTROL 2 - FAILURE TO YIELD 8-FOLLOWING TOO CLOSE / ACCA PARKED POSITION 15-OPERATING DEFECTIVE 22 - NOT DISCERVIBLE 1 - CNE-WAY 14-STOPPED OR PARKED 1 - ROUNDABOUT 4 - STOP SIGN 3 - RAN RED LIGHT EQLIPMENT 9-IMPROPER LANE CHANGE 23 - OPENING DOOR INTO 0 8 2 - TWO-WAY ILLEGA.LY 2-SIGNAL 5 - YIELD SIGN 2 19-LOAD SHIFTING/FALLING/ 4 - RAN STOP SIGN 10-IMPROPER PASSING ROADWAY CONTRIBUTING 5 - UNSAFE SPEED 15 - SWERVING TO AVOID 3 - FLASHER SPILLING 6 - NO CONTROL 11 - DROVE OFF ROAD 99-OTHER IMPROPER ACTION 16 - WRONG WAY 20 - IV PROPER CROSSING 6-IMPROPERTURN 12-IMPROPER BACKING # OF THROUGH LANES RAIL GRADE CROSSING ON ROAD SEQUENCE OF EVENTS 1 - NOT INVOLVED 2 2 - INVOLVED-ACTIVE CROSSING **EVENTS** 1 2 , 0 1 - OVERTURN/ROLLCVER 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE 3 - INVOLVED-PASSIVE CROSSING 22 - WCRK ZONE MAINTENANCE 2 - FIRE/EXP_OSION OPPOSITE DIRECTION OF 7 - SEPARATION OF UNITS 17 - AHIMAL - FARY EQUIPMENT TRAVEL 3 - IMMERSION 23-STRUCK BY FALLING, UNIT / NON-MOTORIST DIRECTION R - RAN OFF ROAD RIGHT 18-ANIMAL - DEER 12 - DOWNHILL RUNAWAY SHIFTING CARGO CR 4 - JACKKNIFE 19-ANIMAL - OTHER 1 - NORTH 5 - VORTHEAST 9 - RAN OFF ROAD LEFT 13 - OTHER NON-COLLISION ANYTHING SET IN MOTION 20-MOTOR VEHICLE IN 5 - CARGO / EQUIPMENT 10 - CROSS MEDIAN 2 - SOUTH 6 - VORTHWEST BY A MOTOR VEHICLE 14-PETESTRIAN LOSS OR SHIFT TRANSPORT FROM 4 TO 3 24 - OTHER MOVABLE CBJECT 3 - EAST 7 - SOUTHEAST 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 8 - SOUTHWEST 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 32 - PORTABLE BARRIER 38-OVERHEAD SIGN POST 44-DITCH **EQUIPMENT** UNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 33 - MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 51 - WALL 45-FMBANKMENT STRUCTURE SUPPORT 1 - STATED / ESTIMATED SPEED 34 - MEDIAN GUARDRAIL 52-BUILDING 45-FENCE 27 - BRIDGE PIER OR ABUTMENT 0 0 4 BARRIER 40 - UTILITY POLE 53-THVVFI 47 - MAILBOX 2 - CALCULATED / EDR 28-8RIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 48-TREE 54 - OTHER FIXED CRUECT 29 - BRIDGE RATE BARRIER 3 - INDETERMINED OR SUPPORT POSTED SPEED 99 OTHER / UNKNOWN 49-FIRE HYDRANT 30-GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER

42 - CULVERT

1 MOST HARMFUL EVENT

5 0

Otto De	EPARTMENT M	OTOBICT / N	ON M	lozo	DIC					LOCAL REP	ORT NUMBER				
iner at	MOTORIST / NON-MOTORIST								2 0 2 1 - 0 0 0 0 0 6 2 9 6						
UNIT#	NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER						
0,1	CARPENTER, LEAH, NICOLE								0 1 / 3, 0, / 2 0 0 4, 1 7 F						
	6 MUNROE RD ,TALLMADGE ,OH 44278									CONTACT PHONE - INFERIOR AREA CONC					
0	TES INJURED SMC ACENOV									-					
INJURIES	TAKEN	EMS AGENCY (NAME)	TAKENT	0: MEDICAL FACILITY	(NAME, CITY	USED	DOT-COMPLIAN		AIR BAG USAGE	E EJECTION TRAPPE					
OL STATE		LICENSE NUMBER	ACCEN	CE CUA	DCED	1	0,4	MC HELMET	0 1	1	1 1				
O. H.	0. 2	ETOLINOL HOMBER	OFFENSE CHARGED LOCAL CODE			OFFENSE DESC	RIPTION		CITATION N	IUMBER					
OL CLASS		T RESTRICTION SELEC	/ER ALCOHOL / DRUG SUSPECTED CON				CONDITION	ALCOHOL	TEST	DOU	C Treve				
3	SELECT UP TO 2					LCOHOL MAR		CONDITION	STATUS TYPE		TATUS TYPE	G TEST(S) E RESULT			
4			<u> </u>	1 OTHER DRUG 1				1							
UNIT #	· ·	FIRST, MIDDLE							DA	TE OF BIRTH		AGE GENDE			
0,2		CHRISTOPHE	R, EUG	ENE					0 2 / 2 8 / 1 9 6 5 5 6 M						
	STREET, CITY, ST								CONTACT PHON	E - INCLUDE AREA CO	DE				
45181		TTE DR ,Rootsto	own ,O						L						
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJUREDT	FAKENTO	: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIAN	SEATING POSITION	AIR BAG USAGE	EJECTION TRAPPEL			
		ICENSE NUMBER						0.4	— INC HELMET	0 1	1	1 1 1			
OL STATE	OPERATOR L	TCEUSE HOMBEN		OFFENS		RGED	LOCAL CODE	OFFENSE DESC			CITATION NUMBER				
OL CLASS	ENDORSEMENT	DESTRICTION OF TO	THE TOT DON	333.03				n Speed Li		66603					
				TRACTED ALCOHOL / DRUG SUSPECTED ALCOHOL MARIJUANA			CONDITION	ALCOHOL STATUS TYPE		DRUG TEST(S) STATUS TYPE R					
4				1 OTHER DRUG			1	1 1	, , , ,	1 1					
UNIT#	NAME: LAST,	FIRST, MIDDLE						DATE OF BIRTH AGE GE							
										1/1	1 11	1 1 16			
ADDRESS:	STREET, CITY, ST	ATE, ZIP				3000			CONTACT PHON	- INCLUDE AREA COL	DE				
0															
ADDRESS:	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED T	AKEN TO	: MEDICAL FACILITY	NAME, CLTY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION TRAPPED			
OL STATE		ICENSE NUMBER						MC HELMET							
ORIS	OPERATOR E	ICENSE NUMBER		OFFENSE CHARGED LOCAL OFFENSI			OFFENSE DESC	RIPTION		CITATION N	UMBER				
OL CLASS	ENDORSEMENT	RESTRICTION	DRIV	ro T	AL CC	NOT / POUR CHEEK	0750		A'I COLLOL	TECT					
	46 *			RACTED		DHOL / DRUG SUSPE LCOHOL MAR		CONDITION	STATUS TYPE		A U TYPE	RESULT MEET OF TO			
Street, Square, or other Designation of the last of th	Name and Address of the Owner, where the Owner, which is the Owner, where the Owner, which is the Owner, where the Owner, where the Owner, which is the Owner, whic				0	THER DRUG			.			11 11 11 11			
INJU 1-FATAL	RIES	SEATING POSITION 1-FRONT-LEFT SIDE	A CHARLEST AND ADDRESS OF THE PARTY OF THE P	RBAG	0.55	OL CLASS		OL RESTRICT	10N(S) DRIV	ER DISTRACTI	ON T	EST STATUS			
2 - SUSPECTED	SERIOUS INJURY	(MOTORCYCLE DRIVER)	1 - NOT DEPL 2 - DEPLOYE			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTERL 2 - CDL INTRASTATE		T DISTRACTED Nually operating a	1 NONI				
3 - SUSPECTEO I		2 - FRONT - MIDDLE 3 - FRONT - RIGHT SIDE	3 - DEPLOYED	SIDE		3 - CLASS C		3 - CORRECTIVE LEN	SES ELI	CTRONIC COMMUNIC	ATION 2 TEST	FREFUSED Fgiven, contaminated			
4 - POSSIBLE IN. 5 - NO APPAREN		4 - SECOND - LEFT SIDE	4 - DEPLOYED		IT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER	DIA	/ICE (TEXTING TYPIN Ling)	SAMI	PLE / UNUSABLE			
and the same of		(MOTORCYCLE PASSENGER)	5 - NOT APPL 9 - DEPLOYM		ΨN	5 - M/C MOPED ONLY		5 - EXCEPT CLASS A 6 - EXCEPT CLASS A	3-174	KING ON HANDS-FREI		I GIVEN, RESULTS KNOWN I GIVEN, RESULTS			
1-NOTTRANSPO	TAKEN BY	5 - SECOND - MIDDLE 6 SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS	4-TAL	KING ON HAND HELD	UNK	NOWN			
/TREATED AT		7-THIRD - LEFT SIDE	EJE	CTION		OL ENDORSEM	ENT	7 - EXCEPT TRACTOR 8 - INTERMEDIATE L		AMUNICATION DE VICE IER ACTIVITY WITH A	A1 0.0	HOL TEST TYPE			
2 - EMS		(MOTORCYCLE SIDE CAR) 8-THIRD - MIDDLE		1 - NOT EJECTED H - HAZMAT				RESTRICTIONS		CTRONIC DEVICE	1 NONE	1 NONE			
3-POLICE 9-OTHER/UNK	NOWN	9-THIRD - RIGHT SIDE	2 - PARTIALLY 3 - TOTALLY E	M. Covered		M - MOTORCYCLE		9 - LEARNER'S PERN RESTRICTIONS		SENGER	2 BL00 3 URIN				
	Miles by	10 - SLEEPER SECTION	4 - NOT APPLI			P - PASSENGER N - TANKER		10-LIMITED TO DAYL		ER DISTRACTION IDE THE VEHICLE	4 BREA				
1- NONE USED	QUIPMENT	OF TRUCK CAB 11 - PASSENGER IN OTHER	40	10050		Q - MOTOR SCOOTER		11 - LIMITED TO EMPL	THE	ER DISTRACTION OUT	SIDE 5 OTHE	.R			
2 - SHOULDER BE	ELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1 - NOTTRAPE	APPED		R THREE WHEEL MOTO	DRCYCLE	12 - LIMITED - OTHER 13 - MECHANICAL DEN	O OTH	ER / UNKNOWN	DRI	UG TEST TYPE			
3 - LAP BELT ON		PICK-UP WITH CAP)	2 - EXTRICATI	DBY		S - SCHOOL BUS T DOUBLE & TRIPLE TR	PAII FRS	(SPECIAL BRAKES	, HAND	COMPLETON	1 - NONE				
4 - SHOULDER & 5 - CHILD RESTR		12 - PASSENGER IN UNENCLOSED CARGO AREA	3 - FREED BY	AL MEANS		X - TANKER / HAZMAT	THE COURT OF THE C	CONTROLS, OR OTI ADAPTIVE DEVICE	- CI	ARENTLY N RMAL	2 BL00				
FORWARD FAC		13-TRAILING UNIT	NON-MECHANICAL MEANS			GENDER		14 - MILITARY VEHICL	ES ONLY 2 PHYSICAL IMPAIRMENT		3- URINE 4 OTHER				
6 - CHILD RESTR. REAR FACING		14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)		GENDER F-FEMALE				15 - MOTOR VEHICLES AIR BRAKES	WITHOUT 3 - EMC	TIONAL		DRUG TEST RESULT(S)			
7 - BOOSTER SEA		15 - NON-MOTORIST				M - MALE		16-OUTSIDE MIRROR	4-ILLN	ESS		HETAMINES			
8 - HELMET USE		99 - OTHER / UNKNOWN				U - OTHER / UNKNOWN		17 - PROSTHETIC AID 18 - OTHER		ASLEEP FAINTED		ITURATES			
9 - PROTECTIVE ((ELBOW, KNEE								20-VIIIER	6 - UND	ER THE INFLUENCE	A CANIN	ODIAZEPINES			
10 - REFLECTIVE										EDICATIONS / DRUGS OHOL	5 COCAI	IABINOIDS Ine			
11 - LIGHTING - PI / BICYCLE ONI									9- OTHE	R UNKNOWN	6-OPIAT	6-OPIATES/OPIOIDS			
99 - OTHER / UNKN												7 OTHER			
ICVOSOS OLIAS	1440 5700 450		1974						D. F. Lee		B NEGA	TIVE RESULTS			

Onio Di OF Pus	BLIC SAPETY	CCUPANT	/ WITHE	SS ADDENDI	IM			LOCAL RE	PORT NUMBE	R			
OCCUPANT / WITNESS ADDENDUM UNIT * NAME: LAST, FIRST, MIDDLE								2,0,2,1,-,0,0,0,6,2,9,6					
01 POOLE, TERRI, LEIGH								ATE OF BIRTH		AGE	GENDE		
	ADDRESS: STREET, CITY, STATE, ZIP							4 / 1		5 2	F		
		WOOD AVE,	Akron .OH	44305			CONTACT PHON	E - INCLUDE AREA	CODE				
	INJURED	EMS AGENCY (NAME)	, ,	INJURED TAKEN TO: MEDICAL F	ACILITY (NAME CITY)	SAFETY EQUIPMEN		T	-				
4	BY 9			Other	manufact thomat, att (USED 0 4	DOT-COMPLIAN		N AIR BAG USAG	E EJECTIO	N TRAPP		
UNIT#	NAME: LA	ST, FIRST, MIDDLE				[VI-7]	- W-	0 13	J L T		11		
							/ /	TE OF BIRTH		AGE	GENDE		
ADDRESS	STREET, CITY	STATE ZIP					CONTACT PHON	E - INCLUDE AREA C	ADE	11			
								- meede hitta	ODE .				
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FA	ACILITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIAN	SEATING POSITION	AIR BAG USAG	E EJECTION	N TRAPPE		
							MC HELMET		, ,				
UNIT #	NAME: LA	ST, FIRST, MIDDLE					DA	TE OF BIRTH		AGE	GENDE		
ADDRESS.	: STREET, CITY	STATE WE						1/1		1 1			
	. 31 KL E., GIT	, STATE, ZIP					CONTACT PHON	E - INCLUDE AREA CO	300				
NJURIES	INJURED	EMS AGENCY (NAME)		Manual Property and Property an									
	TAKEN			INJURED TAKEN TO: MEDICAL FA	SILITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	EJECTION	TRAPPE		
UNIT#	NAME: LAS	T, FIRST, MIDDLE					MC HELMET]			
		, , , , , , , , , , , , , , , , , , ,					DAT	TE OF BIRTH		AGE	GENDER		
ADDRESS:	STREET, CITY,	STATE ZIP					111	/		L T			
							CONTACT PHONE	E - INCLUBE AREA CO	DE				
NJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREL TAKEN TO MEDICAL FA	CILITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	Larn man manage	1	1		
	BY					USED	DOT-COMPLIANT MC HELMET	SERTING PUSHTUM	AIR BAG USAGE	EJECTION	TRAPPE		
		IRIES	SAFETY	' EQUIPMENT USED		SEATING POS			AIR BAG U	SAGE			
1 - FATA		RIOUS INJURY	1 - NONE US VEHICLE	ED - OCCUPANT		T - LEFT SIDE		1 - NOT DE					
		NOR INJURY		R BELT ONLY USED		ORCYCLE DRIV T = MIDDLE	ER)	2 - DEPLOY	ED FRONT				
	IBLE INJU		3 - LAP BELT			T - RIGHT SIDE		3 - DEPLOY	Market Committee of the				
5 - NO AF	PPARENT I	NJURY		R & LAP BELT USED		ND – LEFT SIDE DRCYCLE PASS		4 - DEPLOY	ED BOTH				
	INJURED	TAKEN BY	5 - CHILD RE	STRAINT SYSTEM -		ND - MIDDLE		5 - NOT AP					
	RANSPOR			STRAINT SYSTEM -		ND – RIGHT SID) – LEFT SIDE	E	9 - DEPLOY	MENT UNK	Nown			
/TRE/ 2 - EMS	ATED AT S	CENE	REAR FAC	ING	(MOTO	RCYCLE SIDE	CAR)		EJECTI	N	THE REAL PROPERTY.		
3 - POLIC	CF		7 - BOOSTER 8 - HELMET		8 - THIRD 9 - THIRD		1 - NOT EJE	ECTED					
	R / UNKNO	WN		VE PADS USED	10 - SLEEF	ER SECTION O	F TRUCK CAB	2 - PARTIA	LLY EJECTE	.D			
CERTIFIC OF THE PARTY OF THE PA	GEN	DER	(ELBOW, F	(NEES, ETC.)	11 - PASSE CARGO	NGER IN OTHE AREA (NON-TR	R ENCLOSED	3 - TOTALL					
- FEMAL			10 - REFLECT		BUS, PI	ICK UP WITH CAP)	4 - NOT API	PLICABLE				
A - MALE			/ BICYCLE	- PEDESTRIAN ONLY	CARGO	NGER IN UNEN	ICLOSED	1 NOTEDA	TRAPPE	D			
- UIMER	R / UNKNOV	VN	99 - OTHER / U	NKNOWN	13 - TRAIL			1 - NOT TRAPPED 2 - EXTRICATED BY MECHANICAL			A.1		
						G ON VEHICLE RAILING UNIT)	EXTERIOR	MEANS			AL		
					15 - NON-M	ETOMORPHUS AND		3 - FREED E	BY NON-ME	CHANICA	iL.		
AME: LAST	FIRST, MIDDL	E			99 - UI NEN	2 / UNKNOWN	247						
							, / .	OF BIRTH		AGE	GENDER		
IDDRESS: S	STREET, CITY, S	TATE, ZIP					CONTACT PHONE	INCLUDE AREA CODE					
AME: LAST	FIRST, MIDDI												
							DATE	DATE OF BIRTH AGE GI					
DDRESS: S	TREET, CITY, S	TATE, ZIP					CONTACT	,/,					
							CONTACT PHONE -	INCLUDE AREA CORE			No.		
AME: LAST,	FIRST, MIDDL						DATE	OF BIRTH		ACE T	CENDER		
nnpree -	TREET, CITY, S	TATE TIP								AGE	GENDER		
-on egg: 5	TAREL, GIIY, S	IALL, ZIP		-			CONTACT PHONE - INCLUDE AREA CODE						
3355 OH1P	3/19 [760-15	001				L							
See OILE	~ . o [100+10	~~;											