OHIO DEPARTMENT TRAFFIC CRASH	LOCAL REPORT NUMBER*										
PHOTOS TAKEN OH-2 OH-3		2.0.2.20.0.0.2.0.7.4.5									
GECONDARY CRASH GH-1P OTHER			NCIC*	HIT/SKIP 1 - SOLVED	NUMBER OF UNITS	UNIT IN ERROR 98 - ANIMAL					
COUNTY* LOCALITY* LOCATION: C	<u> </u>	ice	լՍլ	6,7,0,3	2 - UNSOLVED		9 8 98 - ANIMAL 99 - UNKNOWN RASH SEVERITY				
6 7 1 2-VILLAGE Kent	ITY, VILLAGE, TOWNSHIP*				CRASH DATE /TI 1 2 1 4 2 0 2 2 /	1 - FATAL					
3-10WNSnIP	LOCATION ROAD NAME			ROAD TYPE	LATITUDE DEGI	2 - SERIOUS INJURY SUSPECTED					
S - SOUTH	MAIN			$\mathbf{S} \cdot \mathbf{T}$	[4,1,1,5,1]	3 - MINOR INJURY SUSPECTED					
- W-WEST	REFERENCE ROAD NAME (RI	DAD, MILEPOST, HOUS	SE #)	ROAD TYPE	LONGITUDE DEC	4 - INJURY POSSIBLE					
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST	LONGMERE			\mathbf{D}, \mathbf{R}	-8 ₁ 1 ₁₀ 3,7 ₁ 8,	1,5,6	5 - PROPERTY DAMAGE ONLY				
REFERENCE POINT DIRECTION	ROUTE TYPE		OAD TYPE			NTERSECTION RELAT	TED				
1 - INTERSECTION N - NORTH IF	R - INTERSTATE ROUTE(TP) S-FEDERAL US ROUTE	1		RD - ROAD SQ - SQUARE	X WITHIN INTER	SECTION OR ON APPR	4				
3-HUUSE # E-EAST	R - STATE ROUTE	BL - BOULEVARD MF		ST - STREET	WITHIN INTER	CHANGE AREA N	UMBER OF APPROACHES				
FROM REFERENCE UNIT OF MEASURE	R - NUMBERED COUNTY ROUTE			TE - TERRACE TL - TRAIL		ROADWAY					
1 O O TANKES T	R - NUMBERED TOWNSHIP ROUTE		- PIKE \	WA - WAY	ROADWAY DIV	(DED					
LOCATION OF FIRST HARMFUL EVI	ENT	MANNER OF CRASH C		CT	DIRECTION OF TRAVEL	MED	IAN TYPE				
1-ON ROADWAY 9-CROSSOV 2-ON SHOULDER 10-DRIVEW.	ER 1- AY/ALLEY ACCESS 4	NOT COLLISION 4-F BETWEEN 5-F	REAR-TO-REAR BACKING		N - NORTH	1 - DIVIDE	1 - DIVIDED FLUSH MEDIAN (<4 FEET) 2 - DIVIDED FLUSH MEDIAN				
3-IN MEDIAN 11-RAILWAY	GRADE CROSSING	TWO MOTOR VEHICLES IN 6-A	ANGLE		S - SOUTH E - EAST	2 - DIVIDE					
5-ON GORE TRAILS			SIDESWIPE, SAN SIDESWIPE, OPP		W-WEST	(≥4 FE 3 - DIVIDE	D, DEPRESSED MEDIAN				
6-OUTSIDETRAFFICWAY 13-BIKE LA 7-ON RAMP 14-TOLL BO		HEAD-ON 9-0	OTHER / UNKNO	WN		4 - DIVIDE (ANY T	D, RAISED MEDIAN YPE)				
8-OFF RAMP 99-OTHER/	UNKNOWN					9 - OTHER	/UNKNOWN				
WORK ZONE RELATED	WORK ZONE TYPE 1 - LANE CLOSURE		OF CRASH IN W		CONTOUR	CONDITIONS	SURFACE				
WORKERS PRESENT	2 - LANE SHIFT/CROSSOVER	W	ARNING SIGN		1	1 1	2				
LAW ENFORCEMENT PRESENT	3 - WORK ON SHOULDER OR MEDIAN	1, ,	OVANCE WARNI RANSITION ARE		1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,				
 1	4 - INTERMITTENT OR MOVING \ 5 - OTHER	I	CTIVITY AREA ERMINATION AF	REA	3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT				
LIGHT CONDITION	WE	ATHER			4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK				
1 - DAYLIGHT	1-CLEAR	6 - SNOW			9-01HER/UNKNOWN	OIL, GRAVEL	4 - SLAG, GRAVEL, STONE				
3 - DAWN/DUSK 3 - DARK - LIGHTED ROADWAY	0 1 2 - CLOUDY 3 - FOG, SMOG, S	7-SEVERE CF MOKE 8-BLOWING S		T, SNOW		6-WATER (STANDING MOVING)	י טיועו - כ				
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTI	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING 99 - OTHER / U	RAIN OR FREEZ	ZING DRIZZLE		7 - SLUSH	9 - OTHER/UNKNOWN				
9-OTHER/UNKNOWN		,, 4111=11, 4				9 - OTHER/UNKNOWN					
NARRATIVE							Indicate the north direction with				
UNIT 1 WAS TRAVELING E.	ASTBOUND ON W	7.				7	an "N" on the compass diagram.				
MAIN ST. IN THE CURB LA	ANE. A DEER						-				
ENTERED THE ROADWAY	, CROSSING W. M	IAIN	ļ <i>,</i>	Not To Scale	1	W					
ST. FROM NORTH TO SOU	TH. UNIT 1 STRU	JCK	\ <u>.</u>	Ŷ		W. MAIN ST. HAY	MAKER PKWY.				
THE DEER CAUSING DISA	ABLING DAMAGE	TO		IAIN ST. (SR	59)		(SR 59)				
THE VEHICLE.											
				<u> </u>		_					
<u> </u>					LONGM						
				ı	LONGMERE DR.						
CRASH REPORTED DATE/TIME	DISPATCH DATE / TIME	· ·	IVAL DATE/TIM		SCENE CLEARED		REPORT TAKEN BY POLICE AGENCY				
1,2,1,4,2,0,2,2,/,1,8,2,6,1,2 TOTAL TIME OTHER T	$\frac{1}{1}$ $\frac{1}{4}$ $\frac{1}{2}$ $\frac{1}{0}$ $\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{1}$ $\frac{1}{8}$ $\frac{1}{2}$	<u>4,7,11,4,2</u>			1,2,1,4,2,0,2, ficer's name*	<u>4 1 9 1 5 </u>	MOTORIST				
ROADWAY CLOSED INVESTIGATION TIME MI	ed	Bowen, Jared				SUPPLEMENT (CORRECTION OR ADDITION					
	R'S BADGE NUMBER*	,	CHECKE	D BY OFFICER'S BADGE	NUMBER'*	TO AN EXISTING REPORT SENT TO ODPS					
	7 8 2 1										

LOCAL REPORT NUMBER

 $\begin{bmatrix} 2 & 0 & 2 & 2 & 2 & -1 & 0 & 0 & 0 & 2 & 0 & 7 & 4 & 5 & \end{bmatrix}$

UNIT # OWNER NAME: LAST, FIRST, MIDDLE (X) SAME AS DRIVE	R)	OWNER PHONE: INCLUD	E AREA CODE (x sane as driver)	DAMAGE DAMAGE COALE				
ONNER ADDRESS: STREET, CITY, STATE, ZIP (MISAME AS DRIVER)	IALL	<u> </u>	•	DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE				
3711 ELM RD ,Stow ,OH 44224 COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP	CAMMEDOTAL CARRIED B	HONE: INCLUDE AREA CODE	2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN					
COMMERCIAL CARRIER, NAME, ADDRESS, OF 1, STATE, 21		GOMMERCIAL GARRIER F	TONE. INCOORE AREA CODE	DAMAGED AREA(S)				
LP STATE LICENSE PLATE # VEHIC KNMA T 2	Nissan	INDICATE ALL THAT APPLY						
INSURANCE STATE FARM	INSURANCE POLICY # 6991635E2835J	COLOR BLK	VEHICLE MODEL ROGUE	10 11 2 1	10 11 12 1			
TYPE OF USE COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE	US DOT #	TOWED BY: COMPANY Bakers Towing HAZARDOU	NAME IS MATERIAL	$9 \begin{array}{ c c c c c c c c c c c c c c c c c c c$	9 10 3 3 3 3			
DEVICE HIT/SKIP UNIT 0 2	1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	PLACARD L	LASS# PLACARD ID#	7 6 5 4	8 7 6 5			
1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELEI 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELEI 9 - AUTOCYCLE 10 - MOPEO OR MOTORIZED 8 ICYCLE 10 - MOPEO OR MOTORIZED 8 ICYCLE 11 - ALL TERRAIN VEHICLE (ATV / UTV) 4 OPT TRAILING UNITS	D 13-SNOWMOBILE 1 14-SINGLE UNITTRUCK 2 15-SEMI-TRACTOR 2	9 - BUS (16+ PASSENGERS) :0 - OTHER VEHICLE :1 - HEAVY EQUIPMENT :2 - 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 9 8 7	12 1 2 2 3 3 4 6 5			
WAS VEHICLE OPERATING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS MODE WHEN CRASH OCCURRED? 1 - YES 2 - NO 9 - OTHER/UNKNOWN AUTONOMO MODE LEVE 1 - NONE 6 - BUS - CHARTERTOUR	1 - DRIVER ASSISTANCE 4 US 2 - PARTIAL AUTOMATION 5 EL	B - CONDITIONAL AUTOMATION I - HIGH AUTOMATION 5 - FULL AUTOMATION 16 -FARM	9 - UNKNOWN 21 - MAIL CARRIER	11 12 1 10 10 12 2 9 0 1 3 3 4	9 9 9 3 3			
0 1 2 - TAXI	12 - MILITARY I	17 - MOWING 18 - Snow Removal 19 - Towing	99-OTHER/UNKNOWN	8 7 6 5 4	8 7 6 5 4 12 12 12			
O 1 1 / NOT APPLICABLE MOTOR VEHICLE CHASSIS CARGO 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX TYPE 7 - GRAIN/CHIPS/GRAVEL		8 - POLE 9 - CARGOTANK 10-Flat Bed 11-DUMP	12-CONCRETE MIXER 13-AUTOTRANSPORTER 14-GARBAGE/REFUSE 99-OTHER/UNKNOWN	9 3 9	P 3 9 3 9 3 3			
		9 - MOTORTROUBLE 10-disabled from Prior Accident	99-OTHER/UNKNOWN	6				
1 - INTERSECTION - MARKED CROSSWALK NON-MOTORIST 2 - INTERSECTION - UNMARKED LOCATION CROSSWALK AT IMPACT AT IMPACT 1 - INTERSECTION - MARKED CROSSWALK 5 - TRAVEL LANE - OTHER LOC	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	— □-TOP [13]	- ALL AREAS [15] TAT SCENE [16]			
1 - NON-CONTACT 2 - NON-COLLISION 3 - STRIKING ACTION 4 - STRUCK 5 - BOTH STRIKING & STRUCK 9 - OTHER / UNKNOWN 1 - STRAIGHT AHEAD 2 - BACKING 2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING 6 - MAKING LEFT TURN 9 - OTHER / UNKNOWN	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE 10 - PARKED 11 - SLOWING OR STOPPED IN TRAFFIC	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 DAMAGE 1-12 - REFER TO DIAGRAM 13 - TOP	DINT OF CUNTACT 14 - UNDERCARRIAGE UNIT 15 - VEHICLE NOT AT SCENE 99 - UNKNOWN RAFFIC			
1-NONE 2-FAILURETOYIELD 3-RAN RED LIGHT 4-RAN STOP SIGN 10-IMPROPER LANE CHANG CONTRIBUTING 5-UNSAFE SPEED 11-DROVE OFF ROAD	ACDA PARKED POSITION 14-STOPPED OR PARKED	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	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL RAIL GRADE CROSSING			
CIRCUMSTANCES 5-UNSAFE SPEED 11-DRAVE OF FROAD 6-IMPROPER TURN 12-IMPROPER BACKING SEQUENCE OF EVENTS				ON ROAD	1 - NOT INVOLVED			
1 1 8 1 - OVERTURN/ROLLOVER 6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	NON-COLLISION 11 - CROSS CENTERLINE — OPPOSITE DIRECTION OF	16-RAILWAY VEHICLE 17-ANIMAL — FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT		2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING			
3 - IMMERSION 8 - RAN OFF ROAD RIGHT 2	3 - IMMERSION 8 - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWAY 1 - JACKKNIFE 9 - RAN OFF ROAD LEFT 13 - OTHER NON-COLLISION 5 - CARGO / EQUIPMENT 10 - CROSS MEDIAN 14 - PEDESTRIAN 15 - PEDALCYCLE		23 - STRUCK BY FALLING, SHIFTING CARGO OR ANYTHING SET IN MOTION BY A MOTORVEHICLE 24 - OTHER MOVABLE OBJECT	FROM 4 1 TO 3	4 - WEST 8 - SOUTHWEST			
25 - IMPACT ATTENUATOR / CRASH CUSHION 32 - PORTABLE BARRIER 32 - PORTABLE BARRIER STRUCTURE 31 - MEDIAN CABLE BARRIE STRUCTURE 34 - MEDIAN CABLE BARRIER 27 - BRIDGE PIER OR ABUTMENT 35 - MEDIAN CONCRETE 28 - BRIDGE PARA	SION WITH FIXED OBJECT 37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST ER 39 - LIGHT / LUMINARIES SUPPORT 40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT	43-CURB 44-DITCH 45-EMBANKMENT 46-FENCE 47-MAILBOX 48-TREE	50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXEO OBJECT 99 - OTHER J VIKKNOWN	UNIT SPEED 0 2 5	9 - OTHER / UNKNOWN DETECTED SPEED 1 - STATED / ESTIMATED SPEED 2 - CALCULATED / EDR 3 - UNDETERMINED			
30 - GUARDRAIL FACE 36 - MEDIAN OTHER BARRI		49-FIRE HYDRANT	77-VIDAN ORIMOWN	2 5				

ONIO DEPARTMENT OF PUBLIC RAFETY MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER							
							[2,0,2,2,2,-0,0,0,2,0,7,4,5,]							
UNIT#	NAME: LAST, FIRST, MIDDLE BROOKER, PAUL, MICHAEL						DATE OF BIRTH AGE GENDER 0 0 2 5 1 0 5 5 6 7 M							
	STREET, CITY, STATE, ZIP							0 + 9 + 2 + 5 + 1 + 9 + 5 + 5 + 6 + 7 + M CONTACT PHONE - INCLUDE AREA CODE						
1	ELM RD ,Stow ,OH 44224								SOUTH THORE - INVESTIGATION AND AND AND AND AND AND AND AND AND AN					
INJURIES	INJURED E	MS AGENCY (NAME)		INJUREDT	AKEN TO: 1	MEDICAL FACILITY	(NAME, CITY)		DOT-Co	SEATING POS	ITION AIR BAG I	USAGE EJECTION	TRAPPED	
5	BY							USED 0 4	∟ MC HE		1 1	_1_	11	
OL STATE	OPERATOR LI	CENSE NUMBER		OFFENS	E CHARG	ED	LOCAL CODE	OFFENSE DESC	RIPTION		CITATI	ON NUMBER		
	ENDORSEMENT	DECEDIOTION OF LECTION	zon Inni	VER	41.001	IOL (DDIIO CHED		CONDITION	ALC	OHOL TEST		DRUG TEST(S	5)	
OL CLASS	SELECT UP TO 2	RESTRICTION SELECT UP		TRACTED	_	IOL/DRUG SUSPI Cohol Mai		COMPLITON		YPE VALUE			T SELECT UPTO 4	
4				1	OT!	HER DRUG		1		1	1	1	! إنطالي	
UNIT#	NAME: LAST, FI	IRST, MIDDLE		•						DATE OF BIRTI	1	AGE	GENDER	
	,								<u> </u>					
ADDRESS:	: STREET, CITY, STA	ATE, ZIP						•	CONTACT	PHONE - INCLUDE AF	REA CODE			
INJURIES	INJURED E	EMS AGENCY (NAME)		INJUREDT	TAKEN TO:	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	<u> </u>	SEATING POS	SITION AIR RAG	USAGE EJECTIO	N TRAPPED	
	TAKEN BY			INJURED TAKEN TO: MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMEN					DOT-COMPLIANT MR BAG					
OL STATE	OPERATOR LI	ICENSE NUMBER		OFFENS	SE CHAR	GED	LOCAL	OFFENSE DESC	1	<u>!</u>	CITAT	ION NUMBER	-11	
L	1						CODE				ļ			
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT U	DIS	IVER STRACTED	-	HOL / DRUG SUSP	ECTED RIJUANA	CONDITION	AL STATUS T	YPE VALUE	STATUS	TYPE RESU	S) LT select upto 4	
			BY		=	HER DRUG	KIJUANA							
ŲNIT#	NAME: LAST, F	TRST, MIDDLE						- L	DATE OF BIRTH AGE GENDER					
	,								1					
7	S: STREET, CITY, ST	ATE, ZIP		•					CONTACT	PHONE - INCLUDE A	REA CODE			
INJURIES														
INJURIES	INJURED E TAKEN BY	EMS AGENCY (NAME)		INJURED	TAKEN TO:	MEDICAL FACILITY	(NAME, CITY	SAFETY EQUIPMENT USED	DOT-C	OMPLIANT	SITION AIR BAG	GUSAGE EJECTIO	N TRAPPED	
OL STATE	<u> </u>	ICENSE NUMBER		OFFEN	NSE CHARGED LOCAL OFFEN			OFFENSE DES	1				ION NUMBER	
						CODE								
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT U		RIVER STRACTED	ALCO	HOL / DRUG SUST		CONDITION	AL STATUS I	COHOLTEST	STATUS	DRUG TEST		
			ВУ			.COHOL M <i>i</i> THER DRUG	RIJUANA	·]						
INJ	URIES	SEATING POSITION		AIR BAG		OL CLAS	SS	OL RESTRI	CTION(S)	DRIVER DIST	RACTION	TESTS	TATUS	
1-FATAL	n erntolle ikiliny	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DE	17 74 1		1 - CLASS A		1 - ALCOHOL INTE	经基金的 人名	1 - NOT DISTRACTE		1 - NONE GIVEN	n	
200 Per 1980	D SERIOUS INJURY D MINOR INJURY	2 - FRONT - MIDDLE	3 - DEPLO	YED FRONT Yed side		2 - CLASS B 3 - CLASS C		2 - CDL INTRASTA 3 - CORRECTIVE L	Parameter State of	2 - MANUALLY OPE ELECTRONIC CO DEVICE (TEXTI	MMUNICATION :	2 - TEST REFUSE 3 - TEST GIVEN,	CONTAMINATED	
4 - POSSIBLE I 5 - NO APPARE		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE		YED BOTH FR Pplicable	ONT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER 5 - EXCEPT CLAS		DIALING)		SAMPLE / UN 4 - TEST GIVEN,	강하다 항상하다는 사람이	
		(MOTORCYCLE PASSENGER) 5 - SECOND – MIDDLE	1000	YMENT UNKN	IOWN	5 - M/C MOPED ONLY		6 - EXCEPT CLAS	SA	3 - TALKING ON HA COMMUNICATIO	N DEVICE	5 - TEST GIVEN, UNKNOWN	RESULTS	
1 - NOT TRANS		6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BU 7 - EXCEPT TRAC		4 - TALKING ON HA COMMUNICATIO		ALCOHOL	EST TYPE	
/TREATED 2 - EMS	AT SCENE	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	1 - NOTE	ELIECTION IECTED		OL ENDORS	EMENT	8 - INTERMEDIAT RESTRICTION		5 - OTHER ACTIVIT ELECTRONIC DE		1 - NONE		
3 - POLICE		8-THIRD - MIDDLE		ALLY EJECTEI	Ď	M - MOTORCYCLE		9 - LEARNER'S PI	ERMIT	6 - PASSENGER		2 - BLOOD 3 - URINE		
9 - OTHER / UI	NKNOWN	9-THIRD-RIGHT SIDE 10-Sleeper Section	1.4	LY EJECTED Pplicable		P - PASSENGER N - TANKER		RESTRICTION 10 - LIMITED TO D	きょうしきがく	7 - OTHER DISTRAI Inside the vei		4 - BREATH		
40 10 10 10	EQUIPMENT	OF TRUCK CAB 11 - PASSENGER IN OTHER				Q - MOTOR SCOOTE	111111	11 - LIMITED TO E	A1 KELL LIST	8 - OTHER DISTRA THE VEHICLE	CTION OUTSIDE	5-OTHER		
1 - NONE USE 2 - Shoulder	.U R Belt only used	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1 - NOTTI	TRAPPED RAPPED		R - THREE-WHEEL I S - School bus	MOTORCYCLE	13 - MECHANICAL	DEVICES	9-OTHER/UNKNO)WN	DRUG TE 1-NONE	STTYPE	
3 - LAP BELT	, 被伤害的 使看到这个一位的	PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED		ICATED BY Anical Mean	VS.	T - DOUBLE & TRIP			OTHER	CONDI	5 1 1 2 W 1 M	2 - BL00D		
5 - CHILD RES	R & LAP BELT USED Straint System –	CARGO AREA	3 - FREEI			X - TANKER / HAZM	AT.	ADAPTIVE DE 14 - MILITARY VE		1 - APPARENTLY N 2 - Physical Impa		3 - URINE 4 - OTHER		
FORWARD 6 - CHILD RES	FACING STRAINT SYSTEM –	13-TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR	DOM-N	viiMittuAt		GENDE F-FEMALE	R	15 - MOTOR VEHIC AIR BRAKES	LES WITHOUT	3 - EMOTIONAL (E.	G., DEPRESSED,	DRUG TEST	BEGIII VO	
REAR FACT 7 - BOOSTER	ING	(NON-TRAILING UNIT) 15 - NON-MOTORIST				M - MALE		16-OUTSIDE MIR	自己等的可能的。	4 - ILLNESS		1 - AMPHETAMI	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
8 - HELMET I	Salara a Maria	99 - OTHER / UNKNOWN				U - OTHER / UNKNO	VN	17 - PROSTHETIC 18 - OTHER	AID	5 - FELL ASLEEP, F Fatigued, etc.		2 - BARBITURAT 3 - BENZODIAZE		
	IVE PADS USED (NEES, ETC.)							25 VIIIER		6 - UNDER THE INF OF MEDICATION	LUENCE	4 - CANNABINO		
10 - REFLECTI	IVE CLOTHING									/ALCOHOL		5 - COCAINE 6 - OPIATES / O	POINT	
11 - LIGHTING / Bicycle	S – PEDESTRIAN Only									9 - OTHER / UNKNO) NYC	6-OPTATES/OF	เก๋เก๋๋	
99 - OTHER <i>i</i> U	JNKNOWN											8 - NEGATIVE R	ESULTS	

Ū	STATES ADDENDUM						LOCAL REPORT NUMBER 2 - 0 - 2 - 2 0 - 0 - 0 - 2 - 0 - 7 - 4 - 5							
	IINIT#	UNIT # NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH AGE GENDER						
	01	VITULLO, MARIANNE						1 1 0 1 1 1 1 9 6 8 5 4 F						
Ę		STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE						
3	3711]	711 ELM RD ,Stow ,OH 44224										į		
30	INJURIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILITY	Y (NAME, CITY)	SAFETY EQUIPMENT	POT 0	EATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	. 5	TAKEN BY					USED 0 4 1	DOT-COMPLIANT 0 3 1 1 1 1 1						
	UNIT#	NAME: LAS	T, FIRST, MIDDLE	,		***************************************		DATE	OF BIRTH		AGE	GENDER		
	1 1							1 1 ()	1 1 1	1 1				
ANT	ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
90.5								1 1 1	1	1 1	1	, d		
5	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)	1	INJURED TAKEN TO: MEDICAL FACILITY	Y (NAME, CITY) SAFETY EQUIPMENT USED DOT-COMPLIANT			SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
		BY					L	MC HELMET		LI	L			
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DATI	OF BIRTH		AGE	GENDER		
PANI	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
1000														
0	INJURIES	TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: Medical Facilit	Y (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
	Ш	BY LI						MC HELMET		L	ட			
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DATE OF BIRTH			AGE	GENDER		
E														
DEGUDAN	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE	• INCLUDE AREA CO	DE				
9		T	T				Ti-			T	T	T		
	INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILIT	LITY (NAME, CITY) SAFETY EQUIP		DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
Ē			URIES	CAFET	Y EQUIPMENT USED	1 · · · · · · ·	SEATING POS			AIR BAG U	SACE	<u> </u>		
	1 - FAT	e finale design		1 - NONE US	and the state of t	IT - LEFT SIDE	Constitution of the Constitution of Parish and Constitution and the Constitution of th							
			ERIOUS INJURY	VEHICLE	OCCUPANT	The contract of the second	ORCYCLE DRIV	ER)	2 - DEPLOYED FRONT					
) 	3 - SUS	3 - SUSPECTED MINOR INJURY 2 - SHOULDER BELT ONLY USED				로 교사들은 수	IT – MIDDLE IT – RIGHT SID	3 - DEPLOY		'ED SIDE				
	4 - POS	SIBLE INJU	JRY		T ONLY USED	4 - SECO	ND – LEFT SID	E	4 - DEPLOYED BOTH Front/Side					
	5 - NO	APPARENT	INJURY		ER & LAP BELT USED ESTRAINT SYSTEM –	4 - 48	ORCYCLE PASS OND – MIDDLE	SENGER) FRONT/SIDE 5 - NOT APPLICABLE						
ľ		INJURED	TAKEN BY	100 Per 1 Pe	D FACING	11 12 13 14 14 14	- SECOND - RIGHT SIDE 9 - DEPL			YMENT UNI	CNOWN			
		TRANSPOR			ESTRAINT SYSTEM -	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	D – LEFT SIDE FORCYCLE SIDE	CAR)	EJECTION					
	/TREATED AT SCENE REAR FACING 2 - EMS 7 - BOOSTER SEAT				왕생이 이 하는데 얼마나 얼마나 아니다.	的复数医疗病 经收益	D-MIDDLE		1 - NOT E.	S. 45 P. 3 P. C.	UN			
	9.45550	2 - EMS 7 - BOOSTER SEAT 3 - POLICE 8 - HELMET USED				and 1000 1000 1000 1000 1000 1000 1000 10	RD - RIGHT SID	그림 사람들이 많은 사람들은 함께 없었다.	2 DARTIALLY ELECTED					
		IER/UNKN	own	9 - PROTEC	TIVE PADS USED	医核心性阴道 磷脂烷酸	EPER SECTION SENGER IN OTH	IER ENCLOSED		LY EJECTED				
ı	祖を行る	GE	NDER:		KNEES, ETC.)	CAR	GO AREA (NON-T PICK-UP WITH CA	RAILING UNIT, 4 - NOT APPLICABL			. E			
	F-FEM	ALE			TIVE CLOTHING IG – PEDESTRIAN		SENGER IN UNI		1000.1001.00	TRAPP	ED	estatigade, tues		
	M - MAI	ひょくくんりょう 野り		/ BICYCL		医乳腺性纤维性 医皮肤	GO AREA	1 = NOT TRAPPED						
ı	U - OTHER / UNKNOWN 13 - TRAILING UNIT 99 - OTHER / UNKNOWN 14 - RIDING ON VEHIC					원인 시간 그들까지 그리지 않아야				Y MECHANICAL				
٠							-TRAILING UNIT)			D BY NON-M	FCHANIC	.AL		
						一直 英国人名 医乳色线	-MOTORIST Er / Unknown		MEAN	The Proof of the Co.				
i	NAME: L	AST, FIRST, MID	DLE	4177 149 4 75		ISTS TO A LOSS		DA	TE OF BIRTH	CAMPACA CARTES	AGE	GENDER		
2	22								1 1	<u> </u>				
	4	S: STREET, CIT	Y, STATE, ZIP					CONTACT PHON	E - INCLUDE AREA O	ODE				
	NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH AGE GENDER							
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	NAME (LAST CIDST MIDDLE						DATE OF DIDTH							
	NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH AGE GENDER							
	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE - INCLUDE AREA CODE							
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