OF PUBLIC SAFETY OF PUBLIC SAFETY SAFETY-SERVICE-PROTECTION TRAFFIC	CRASH	REPOR	T *DENOTES	MANDATORY FIE	LD FOR SUPPLEM	ENT REPORT	LC	CAL REPORT NU	MBER*	
PHOTOS TAKEN OH-2	2 0 2 3 -	$-10^{\circ}0^{\circ}0^{\circ}$	$0_{\perp}7$	2,1,7						
SECONDARY CRASH	NCIC*	7 0011/50	NUMBER OF UNITS	1	JNIT IN ERROR 98 - ANIMAL					
PRIVA	TE PROPERTY		of Kent Poli	ice	<u>_0</u>	6,7,0,3	2 - UNSOLVED	0 2	101	2 99 - UNKNOWN
COUNTY* LOCALITY*	LOCATION: CIT	Y, VILLAGE, T	ownship*				CRASH DATE / T		1.1	H SEVERITY Fatal
6 7 1 2-VILLAGE 3-TOWNSHIP	Kent					T	0.5.1.0.2.0.2.3.		2-5	SERIOUS INJURY
ROUTE TYPE ROUTE NUMBER PREI	S - SOUTH E - EAST		ROAD NAME			ROAD TYPE	LATITUDE DEC			SUSPECTED MINOR INJURY
	INAF		ST	4,1,1,6,2,			SUSPECTED			
ROUTE TYPE ROUTE NUMBER PRE	S - SOUTH E - EAST		CE ROAD NAME (RO	JAD, WILEPUST, H	DUSE #)	ROAD TYPE	LONGITUDE DE			INJURY POSSIBLE PROPERTY DAMAGE
	W - WEST	607					$\frac{-81}{81}$		(	ONLY
REFERENCE POINT DIRECT  1-INTERSECTION FROM REFERENCE IN	PENCE		TE TYPE TE ROUTE(TP)	AL - ALLEY	ROAD TYPE HW-HIGHWAY	RD - ROAD	l —	NTERSECTION RE		·u
3 2-MILE POST . 2 . S	DOUTELL 1	- FEDERAL	US ROUTE	AV - AVENUE BL - BOULEVARD		SQ - SQUARE ST - STREET				
	-WEST SR	- STATE ROI	1	CR - CIRCLE		TE - TERRACE	WITHIN INTER	RCHANGE AREA		BER OF APPROACHES
FROM REFERENCE UNIT OF M	EASURE		D COUNTY ROUTE	CT - COURT DR - DRIVE	PK - PARKWAY PI - PIKE	TL - TRAIL WA - WAY	·	ROADWAY	<u> </u>	
	- FEET - YARDS	ROUTE		HE - HEIGHTS	PL - PLACE	WA-WAI	ROADWAY DIV	IDED		
LOCATION of FIRST	HARMFUL EVE	NT	"	MANNER OF CRAS	H COLLISION/IMP	ACT	DIRECTION OF TRAVE	<u>.</u>	MEDIAN	TYPE
1 - ON ROADWAY 2 - ON SHOULDER	9 - CROSSOVE 10 - DRIVEWAY		CESS	NOT COLLISION 4 BETWEEN	4 - REAR-TO-REAR 5 - BACKING		N - NORTH		IDED FL	LUSH MEDIAN
U Z 3-IN MEDIAN	11-RAILWAY	GRADE CRO	SSING L	TWO MOTOR VEHICLES IN	5 - ANGLE		S - SOUTH E - EAST	2 - DIV		LUSH MEDIAN
4 - ON ROADSIDE 5 - ON GORE	12-SHARED U TRAILS	ISE PATHS (			7 - SIDESWIPE, SAI 8 - SIDESWIPE, OPI		W-WEST	3 - DI\	'IDED, D	EPRESSED MEDIAN
6 - OUTSIDE TRAFFIC WAY 7 - ON RAMP	13-BIKE LAN 14-TOLL BOO		3-	HEAD-ON	9 - OTHER / UNKN	OWN			IDED, R NY TYPE	AISED MEDIAN
8 - OFF RAMP	99-OTHER/U	NKNOWN						9 - OTI	IER/UNI	KNOWN
Work zone related			ONE TYPE	1	IN OF CRASH IN W		CONTOUR	CONDITION	IS	SURFACE
WORKERS PRESENT		- LANE CLO - LANE SHII	SURE FT/CROSSOVER		- BEFORE THE 15 WARNING SIGN					
LAW ENFORCEMENT PRESEN	т   3	- WORK ON			<ul> <li>ADVANCE WARN</li> <li>TRANSITION ARI</li> </ul>		1 - STRAIGHT LEVEL	1 - DRY 2 - WET		1 - CONCRETE
ACTIVE SCHOOL ZONE	1	- INTERMIT	TENT OR MOVING W	VORK 4	- ACTIVITY AREA		2 - STRAIGHT GRADE 3 - CURVE LEVEL	3 - SNOW		2 - BLACKTOP, BITUMINOUS, ASPHALT
ACTIVE SCHOOL ZONE	5	- OTHER		)	-TERMINATION A	REA	4 - CURVE GRADE	4 - ICE		3 - BRICK/BLOCK
LIGHT CONDITION  1 - DAYLIGHT			WE 1-CLEAR	ATHER 6 - SNOW			9 - OTHER/UNKNOWN	5 - SAND, MUD, D QIL, GRAVEL	IRT,	4 - SLAG, GRAVEL, STONE
1 2 - DAWN/DUSK		$ _{0}$	2 - CLOUDY	7 - SEVERE	CROSSWINDS			6 - WATER (STAN MOVING)	DING,	5 - DIRT
3 - DARK – LIGHTED ROAD 4 - DARK – ROADWAY NOT			3 - FOG, SMOG, SM 4 - RAIN			G RAIN OR FREEZING DRIZZLE 7 - SLUSH 9			9 - OTHER/UNKNOW	
5 - DARK — UNKNOWN ROA 9 - OTHER / UNKNOWN	DWAY LIGHTIN	G	5 - SLEET, HAIL	99 - OTHER	R / UNKNOWN		ľ	9 - OTHER/UNKN	OWN	
NARRATIVE	ez os. s.								$\wedge$	Indicate the north
UNIT 2 WAS A DOO!	R DASH 1	DRIVE	R. UNIT 1		-					direction with an "N" on the compass diagram.
WAS UNOCCUPIED				N	-			L	· · · · · · · · · · · · · · · · · · ·	
STINAFF ST FACIN					-					
607 STINAFF ST. U				<u> </u>	-					
607 STINAFF AND				<u>,</u>			607 STINAFF		_	Not To Scale
SIDE. UNIT 2 LEFT				'D						7701 70 20410
					_		PRIVE DRIVE	ATE WAY		
IN BURGUNDY, TOYOTA CAMRY.										
Unit 1 STINAFF ST										
					-					
					-					
CRASH REPORTED DATE /TIN	IE	DISPATCI	H DATE / TIME	A	RRIVAL DATE / TI	ME	SCENE CLEAREI	D DATE / TIME		REPORT TAKEN BY
$ _{0,5,1,0,2,0,2,3,1,2,0}$	3,0,0,5,	1,0,2,0	0,2,3,/,2,0,3	3,3,0,5,1,0	0,2,0,2,3,/	2 <sub>1</sub> 0 <sub>1</sub> 4 <sub>1</sub> 3	0,5,1,0,2,0,2	3,/,2,0,5,	$_3$	
TOTAL TIME OTHER	то	TAL 0	FFICER'S NAME*		خات اساسات	Снескео ву ОГ	FICER'S NAME*			MOTORIST
ROADWAY CLOSED INVESTIGATION TIME MINUTES Strebel, Tyler Austin Bowen, Jared  OFFICER'S BADGE NUMBER*  CHECKED BY OFFICER'S BADGE NUMBER*							NUMBER*	$\dashv$ $\Box$	SUPPLEMENT (CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO OD	
0 0 0 0 1										

LOCAL REPORT NUMBER

 $\begin{bmatrix} 2 & 0 & 2 & 3 & - & 0 & 0 & 0 & 0 & 7 & 2 & 1 & 7 \end{bmatrix}$ 

UNIT # 0	WNER NAME: LAST, FIRST, BOYD, ROND	MIDDLE (X) SAME AS DRIVER)			DE AREA CODE ( SAME AS DRIVER)  RC 149.43 (A)(1)(mm)	DAMAGE DAMAGE SCALE					
OWNER ADI	DRESS: STREET, CITY, STATE, Z	(IP (X) SAME AS DRIVER)		<u> </u>		3 - FUNCTIONAL DAMAGE 3 - FUNCTIONAL DAMAGE 4 - DISABLING DAMAGE					
	AL CARRIER: NAME, ADDRE		<u> </u>	COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	9 - UNKNOWN					
LP STATE (	LICENSE PLATE#	VEHICL	IDENTIFICATION #	VEHICLE YE	AR VEHICLE MAKE	DAMAGED AREA(S) INDICATE ALL THAT APPLY					
	IUR3362	JTHCK26	$\frac{1}{2}$ $\frac{2}{8}$ $\frac{6}{2}$ $\frac{2}{0}$ $\frac{0}{8}$ $\frac{5}{5}$			12	12				
INSURANG VERIFIE	INSURANCE COMPA		NSURANCE POLICY # 030495094	SIL	VEHICLE MODEL ES250 AND	18250 12 1 2	10 12 2				
	TYPE OF USE	IN EMERGENCY	US DOT #	TOWED BY: COMPANY							
COMMER	11 1	IN EMERGENCY RESPONSE VE	HICLE WEIGHT GVWR/GCWR		US MATERIAL		3 9 3 3 4				
INTERLE DEVICE EQUIPP	OCK HIT/SKIP UNIT		1 - ≤10K LBS. 2 - 10,001 - 26K LBS. 3 - >26K LBS.	MATERIAL RELEASED PLACARD	CLASS # PLACARD ID #	8 7 6 5 4	8 7 6 6 4				
		7 - MOTORCYCLE 2-WHEELED	12 - GOLF CART	18 - LIMO (LIVERY VEHICLE) 19 - Bus (16+ Passengers)	23 - PEDESTRIAN / SKATER	6	11 12 6				
UII.	2 - PASSENGER VAN (MINIVAN) 8 3 - Sport Utility Vehicle	9 - AUTOCYCLE	14 - SINGLE UNIT TRUCK	20 - OTKER VEHICLE	24 - WHEELCHAIR (ANY TYPE) 25 - Other Non-Motorist		11 2 2				
UNIT TYPE	5 - CARGO VAN	10 - MOPED OR MOTORIZED Bicycle		21 - HEAVY EQUIPMENT 22 - Animal With Rider or	26 - BICYCLE 27 - TRAIN	a (	9 3 3				
2	0 - VAR (7-13 3LA13)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 5 4				
	# OF TRAILING UNITS WAS VEHICLE OPERATING IN AUT	ONOMOUS	0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	o - JINIANUMN	11 12 1	6 11 12 1				
2	MODE WHEN CRASH OCCURRED?	0	1 - DRIVER ASSISTANCE	4 - HIGH AUTOMATION	, · viimiy#ii	10 1 2 2	10 1 2				
	1-YES 2-NO 9-OTHER/UNKN	MODE LEVEL		5 - FULL AUTOMATION		9 9 3 3	3 9 9 3 3				
0.1	2 - TAXI	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY	12 - MILITARY	16-FARM 17-MOWING	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	8 7 5 7	8 7 5 74				
CDECIAL	SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS -		- BUS - SHUTTLE 13 - POLICE 18 - BUS - OTHER 14 - PUBLIC UTILITY 19			7 6 5	7 6 5				
	5 - BUS-TRANSIT/COMMUTER	10-AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL			12 12 12				
$\mathbf{L}_1\mathbf{U}_1\mathbf{L}_1$	1 - NO CARGO BODY TYPE /NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	ALLEGATO	8 - POLE 9 - CARGOTANK	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER	12 6. 6					
CARGO BODY TYPE	2 - 8US	4 - LOGGING	T ADDITIONATION OF THE	10-FLÁT BED 11-DUMP	14-GARBAGE/REFUSE 99-OTHER/UNKNOWN	, e . e . e . e . e . e . e . e . e . e	3 9 1 3 9 8 3				
	1 - TURN SIGNALS	4 - BRAKES		9 - MOTOR TROUBLE	99-OTHER/UNKNOWN	6					
VEHICLE		5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE	10-DISABLED FROM PRIOR ACCIDENT			6 6 6				
	1-INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12-FIRST RESPONDER	☐ - NO DAMAGE	[0]  - UNDERCARRIAGE [14]				
NON-MOTORIST				10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR	AT INCIDENT SCENE 99-OTHER/UNKNOWN	☐-TOP [13] ☐-ALL AREAS [15]					
LOCATION AT IMPACT		5 - TRAVEL LANE - OTHER LOCATI		TRAILS		□-UN	IIT NOT AT SCENE [16]				
		1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - Entering Traffic Lane	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING	18 - APPROACHING OR LEAVING VEHICLE		AL POINT OF CONTACT				
4 ACTION	3-STRIKING I U	2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING	9 - LEAVING TRAFFIC LANE 10 - PARKED	SPECIFIED LOCATION 15 - WALKING, RUNNING,	19-STANDING 20-OTHER NON-MOTORIST	0 - NO DAMAGE 14 - UNDERCARRIAGE  0 - 9   1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE					
	5- BOTH STRIKING ACTIONS & STRUCK	5 - MAKING RIGHTTURN	11 - SLOWING OR STOPPED IN TRAFFIC	JOGGING, PLAYING 16 - WORKING	21 - STANDING OUTSIDE Disabled vehicle	DÍAGI 13-TOP	99 - UNKNOWN				
	9-OTHER/UNKNOWN	6 - MAKING LEFTTURN	12 - DRIVERLESS	17 - PUSHING VEHICLE	99-OTHER/UNKNOWN		TRAFFIC				
	1 - NONE 2 - FAILURE TO YIELD	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / AC	13 - IMPROPER START FROM A PARKED POSITION	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE	21 -LYING IN ROADWAY 22 -Not discernible	TRAFFICWAY FLOW	TRAFFIC CONTROL 1 - ROUNDABOUT 4 - STOP SIGN				
01	3 - RAN RED LIGHT 4 - RAN STOP SIGN	9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING	14-STOPPED OR PARKED Illegally	EQUIPMENT  19 - LOAD SHIFTING/FALLING/	23-OPENING DOOR INTO ROADWAY	2 - TWO-WAY	6 2 - SIGNAL 5 - YIELD SIGN				
CONTRIBUTING GIRCUMSTANCE	5 - UNSAFE SPEED	11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - Wrong Way	SPILLING 20 - IMPROPER CROSSING	99 - OTHER IMPROPER ACTION	# of THROUGH LANES	3 - FLASHER 6 - NO CONTROL				
SEQUENCE	6-IMPROPERTURN E of Events	12 - IMPROPER BACKING				ON ROAD	RAIL GRADE CROSSING  1 - NOT INVOLVED				
EV	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	NON-COLLISION 11-Cross Centerline —	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE	2	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING				
1 2 10	2 - FIRE/EXPLOSION 3 - IMMERSION	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	OPPOSITE DIRECTION OF TRAVEL	17 - ANIMAL — FARM 18 - ANIMAL — DEER	EQUIPMENT 23 - STRUCK BY FALLING,		ION-MOTORIST DIRECTION				
2	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION	19-ANIMAL — OTHER 20-MOTOR VEHICLE IN	SHIFTING CARGO OR Anything set in motion		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST				
3	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10-CROSS MEDIAN	14 - PEDESTRIAN 15 - PEDALCYCLE	TRANSPORT  21 - PARKED MOTOR VEHICLE	BY A MOTOR VEHICLE 24 - Other Movable object	FROM 9 TO	9 3 - EAST 7 - SOUTHEAST 4 - WEST 8 - SOUTHWEST				
-,	25 - IMPACT ATTENUATOR	COLLISI 31 - GUARDRAIL END	ON WITH FIXED OBJEC 37 - TRAFFIC SIGN POST		50 - WORK ZONE MAINTENANCE		4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN				
4	/ CRASH CUSHION 26-BRIDGE OVERHEAD	32 - PORTABLE BARRIER	38 - OVERHEAD SIGN POST	44 - DITCH	EQUIPMENT 51 - WALL	UNIT SPEED	DETECTED SPEED				
5	STRUCTURE  27 - BRIDGE PIER OR ABUTMENT	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL BARRIER	SUPPORT	45 - EMBANKMENT 46 - FENCE	52 - BUILDING	0,0,0	1 - STATED / ESTIMATED SPEED				
	28 - BRIDGE PARAPET	35 - MEDIAN CONCRETE	40 - UTILITY POLE 41 - OTHER POST, POLE OR SUPPORT	47 - MAILBOX 48 - TREE 49 - FIRE HYDRANT	53 - TUNNEL 54 - OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED				
6	6				99-OTHER/UNKNOWN	2 5					
1	FIRST HARMFUL EVE	NT 1 MOST	HARMFUL EVENT				PAGE 2 OF 5				
HSY8304 C	H1U 1/19 [760-0820]						PAGE 2 UP 5				

LOCAL REPORT NUMBER

 $\begin{bmatrix} 2 & 0 & 2 & 3 & -1 & 0 & 0 & 0 & 0 & 7 & 2 & 1 & 7 \end{bmatrix}$ 

UNIT#	OWNER NAME: LAST, FIRST,	MIDDLE (IX) SAME AS DRIVED	· · · · · · · · · · · · · · · · · · ·	OWNER PHONE: MALIN	DE AREA CODE (   SAME AS DRIVER)		DAMAGE			
0_2					DE RICH CODE ( SAME AS DIVERY	DAMAGE SCALE				
OWNER AL	DORESS: STREET, CITY, STATE, 2	ZIP ( same as driver)				9 2- MINOR DAM				
COMMERC	IAL CARRIER: NAME, ADDRE	SS, CITY, STATE, ZIP		COMMERCIAL CARRIER I	PHONE: INCLUDE AREA CODE	9 - UNKNOWN  DAMAGED AREA(S)				
LP STATE	LICENSE PLATE#	VEHICL	E IDENTIFICATION #	VEHICLE YEA			E ALL THAT APPLY			
INSURA	NCF INSURANCE COMPA	NY I	NSURANCE POLICY #	COLOR	□ Toyota      vehicle model	11 12 1	11 12 1			
VERIFI	ED			MAR	CAMRY	10 11 2	10 12 1 2			
СОММЕ	TYPE OF USE  RCIAL GOVERNMENT	IN EMERGENCY RESPONSE	U\$ DOT #	TOWED BY: COMPANY		9 9 3 3	9 10 2 3 3			
INTER	LOCK VILLE CALL DAY	#OCCUPANTS VE	HICLE WEIGHT GVWR/GCWR 1 - ≤10K lbs.		US MATERIAL Class # Placard ID #	8 7 5 4	8 7 5 4			
L EQUIP	E X HIT/SKIP UNIT		2 - 10,001 - 26K LBS. 3 - >26K LBS.	PLACARD L		7 6 5	12 7 6 5			
Λ 1		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			
$egin{array}{c} oldsymbol{0}, oldsymbol{1}, \  ext{UNIT TYPE} \end{array}$	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE 10 - Moped or motorized		20 - OTHER VEHICLE 21 - HEAVY EQUIPMENT	25-OTHER NON-MOTORIST 26-Bicycle	9	10 2 3			
	5 - CARGO VAN	BICYCLE  11 - ALL TERRAIN VEHICLE	16-FARM EQUIPMENT	22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN	-	8 4 -			
, ,	6 - VAN (9-15 SEATS) # of TRAILING UNITS	(ATV / UTV)	17 - MOTORHOME	ANIMAL-DIAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	12 7	5 12			
	WAS VEHICLE OPERATING IN AUT	ronomous	0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	11 12 1	6 11 12 1			
9	MODE WHEN CRASH OCCURRED? 1-YES 2-NO 9-OTHER/UNKN	1 2 1	A DADTIAL AUTOMATION	4 - HIGH AUTOMATION 5 - FULL AUTOMATION		$\begin{array}{c c} 10 & \frac{1}{10} & \frac{1}{2} & \frac{1}{2} \end{array}$	10 11 2 2			
		6 - BUS - CHARTER/TOUR		16-FARM	21 - MAIL CARRIER	9 3 3 3	9 9 3 3			
9.9	2 - TAXI	7 - BUS - INTERCITY	12 - MILITARY	17 - MOWING	99 - OTHER / UNKNOWN	8 7 6 4	8 7 5 4			
SPECIAL FUNCTION	3 - ELECTRONIC RIDE SHARING 4 - SCHOOLTRANSPORT	8 - BUS - SKUTTLE 9 - BUS - OTHER		18-SNOW REMOVAL 19-TOWING		7 6 5	7 6 5			
	5 - BUS-TRANSIT/COMMUTER		15-CONSTRUCTION EQUIPMENT			:	12 12 12			
99	/NOT APPLICABLE	MOTORVEHICLE	CHASSIS	8 - POLE 9 - Cargo Tank	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER	12 <b>8 8</b>				
CARGO BODY Type	2 - BU\$	4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	10-FLAT BED 11-DUMP	14 - GARBAGE/REFUSE 99 - OTHER / UNKNOWN	e ELL 9	3 9 3 3			
9.9.	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICKTIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	6				
VEHICLE		5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE	10-DISABLED FROM PRIOR Accident			6 6 6			
		3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12 - FIRST RESPONDER	- NO DAMAGE [	0]			
NON-MOTORIS	CROSSWALK T 2 - INTERSECTION – UNMARKED	4 - MIDBLOCK - MARKED Crosswalk	7 - SHOULDER / ROADSIDE B - SIDEWALK	10 - DRIVEWAY ACCESS 11 - SHARED USE PATHS OR	AT INCIDENT SCENE 99-OTHER/UNKNOWN	☐-TOP [13]	-ALL AREAS [15]			
LOCATION AT IMPAC	CROSSWALK	5 -TRAVEL LANE - OTHER LOCATE		TRAILS		TINU - X	NOT AT SCENE [16]			
	A (1811 BALL FORAL)	1 - STRAIGHT AHEAD 2 - BACKING	7 - MAKING U-TURN 8 - ENTERING TRAFFIÇ LANE	13 - NEGOTIATING A CURVE 14 - ENTERING OR CROSSING	18 - APPROACHING Or Leaving Vehicle		L POINT OF CONTACT			
ACTION	3-STRIKING U Z	2 - BACKING 3 - CHANGING LANES 4 - OVERTAKING/PASSING	9 - LEAVING TRAFFIC LANE 10-parked	SPECIFIED LOCATION 15-WALKING, RUNNING,	19-STANDING 20-OTHER NON-MOTORIST		TO UNIT 15 - VEHICLE NOT AT SCENE			
HOTTON	5 - BOTH STRIKING ACTIONS & STRUCK	5 - MAKING RIGHTTURN	11 - SLOWING OR STOPPED IN TRAFFIC	JOGGING, PLAYING	21 - STANDING OUTSIDE Disabled Vehicle	DIAGRA 13-TOP	M 99 - UNKNOWN			
	9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	12 - DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		TRAFFIC			
	1 - NONE 2 - FAILURE TO YIELD	7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / AC	13-IMPROPER START FROM A PARKED POSITION	17 - VISION OBSTRUCTION 18 - OPERATING DEFECTIVE	21 - LYING IN ROADWAY 22 - Not discernible	TRAFFICWAY FLOW	TRAFFIC CONTROL			
1,2	3 - RAN RED LIGHT	9-IMPROPER LANE CHANGE	14-STOPPED OR PARKED ILLEGALLY	EQUIPMENT 19-LOAD SHIFTING/FALLING/	23 - OPENING DOOR INTO ROADWAY	1 - 0NE-WAY 2 2 - TWO-WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN			
CONTRIBUTION	4 - RAN STOP SIGN IG 5 - Unsafe speed	10-IMPROPER PASSING 11-DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	SPILLING  20 - IMPROPER CROSSING	99 - OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL			
	6-IMPROPERTURN E OF EVENTS	12-IMPROPER BACKING	20 Mond Mil	20 - IMPROPER GROSSING		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING 1 - NOT INVOLVED			
1		C FAUIDMENT PAILURE	NON-COLLISION 11-cross centerline —	1/ BANDWAYDENIOLE	OO WOOK JONE HARNTENANGE		2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING			
1 2 1	1 - OVERTURN/ROLLOVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE 7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF TRAVEL	16 - RAILWAY VEHICLE 17 - ANIMAL — FARM	22 - WORK ZONE MAINTENANCE EQUIPMENT 23 - STRUCK BY FALLING,		N-MOTORIST DIRECTION			
21	3 - IMMERSION  J 4 - JACKKNIFE	8 - RAN OFF ROAD RIGHT 9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY 13 - OTHER NON-COLLISION	18 - ANIMAL — DEER 19 - ANIMAL — OTHER	SHIFTING CARGO OR ANYTHING SET IN MOTION		1 - NORTH 5 - NORTHEAST			
	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10-CROSS MEDIAN	14 - PEDESTRIAN 15 - PEDALCYCLE	20 - MOTOR VEHICLE IN TRANSPORT	BY A MOTOR VEHICLE 24 - Other Movable object	FROM L 1 TO L				
3 [	J	COLLISI	ON WITH FIXED OBJEC	21 - PARKED MOTOR VEHICLE  T - STRUCK			4 - WEST 8 - SOUTHWEST 9 - OTHER / UNKNOWN			
4	25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END 32 - Portable Barrier	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST	43 - CURB 44 - DITCH	50 - WORK ZONE MAINTENANCE EQUIPMENT	UNIT SPEED	DETECTED SPEED			
51 1	26-BRIDGE OVERHEAD STRUCTURE	33-MEDIAN CABLE BARRIER 34-MEDIAN GUARDRAIL	39-LIGHT/LUMINARIES SUPPORT	45 - EMBANKMENT 46 - FENCE	51 - WALL 52 - Building		3 1 - STATED / ESTIMATED SPEED			
	27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	BARRIER 35-MEDIAN CONCRETE	40 - UTILITY POLE 41 - OTHER POST, POLE	47 - MAILBOX 48 - Tree	53 - TUNNEL 54 - OTHER FIXED OBJECT		2 - CALCULATED / EDR 3 - UNDETERMINED			
611_	29-BRIDGE RAIL 30-GUARDRAIL FACE	BARRIER 36-MEDIAN OTHER BARRIER	OR SUPPORT 42 - CULVERT	49 - FIRE HYDRANT	99-OTHER/UNKNOWN	POSTED SPEED	3 - MADELEKIMIAED			
1	LEIDET HADMEIH EVER	. 1	HADMEH EVENT			1				

ONIO DEPARTMENT MOTORIST / NON-MOTORIST  MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER							
									12 10 12 13 1- 10 10 10 10 17 12 11 7						
UNIT#	UNIT # NAME: LAST, FIRST, MIDDLE  0 1 BOYD, RONDA, ANN									DATE OF BIRTH AGE GENDER 0 7 1 5 1 9 7 5 4 7 F					
	STREET, CITY, STA	•	····		*					HONE - INCLUDE AREA C		_ [4,/	<u>F</u>		
=1		ST ,Kent ,OH 442	40						Redacted per QRC 149.43 (A)(1)(mm)						
INJURIES	INJURED E TAKEN BY	EMS AGENCY (NAME)	**- * *	INJURED	TAKENTO: N	MEDICAL FACILITY	(NAME, CITY)	USED	DOT-Cor	MPLIANI		USAGE EJECTION	۱ .		
5 OL STATE		CENSE NUMBER		UEEEN	SE CHADO	FD	LOCAL	0 1 OFFENSE DESC	MC HEL	MET 0 1	CITATI	ON NUMBER	1		
OLSIAIE O. H.						LU	CODE	OFFENSE DESC	VIL I TOM		GLIAIL	ON MOMBER			
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT U	PTO3 DRIV	/ER FRACTED	ALCOH	IOL / DRUG SUSP		CONDITION	ALC STATUS TY	OHOL TEST (PE VALUE		DRUG TEST(S	) T select up to 4		
. 4			BY	1	=	OHOL MA	RIJUANA	1 1	317103 11	VALUE	PIMIDS	TIFE KESUL	atusCIUPTO4		
UNIT #	NAME: LAST, F	IRST, MIDDLE			LJ OTH	IER DRUG				DATE OF BIRTH		AGE	GENDER		
0 2	·	·								I I I I	ı i	11 1 1	"-"."		
ADDRESS:	STREET, CITY, STA	ATE, ZIP			-				CONTACT	PHONE - INCLUDE AREA O	ODE				
3				7					Redac	ted per ORC					
INJURIES	TAKEN BY	EMS AGENCY (NAME)		INJURED	TAKENTO: N	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED	DOT-Co	SEATING POSITIO	N AIR BAG	USAGE EJECTION	TRAPPED		
OL STATE		ICENSE NUMBER		OFFEN	SE CHARG	ED	LOCAL	OFFENSE DESC			CITAT	ION NUMBER	<u> </u>		
X0	Redacte	ed per ORC 4501:	1-12				CODE					,			
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT U	DIS	VER TRACTED	party.	IOL / DRUG SUSP		CONDITION	ALC STATUS T	OHOL TEST YPE VALUE	STATUS	DRUG TEST(S Type   Resul	T SELECT UP TO 4		
, ,	BY			9		OHOL MA HER DRUG	RIJUANA	9	1	1	. 1	1	n .		
UNIT#	NAME: LAST, F									DATE OF BIRTH	<u></u>	AGE	GENDER		
											11		JiL		
ADDRESS:	: STREET, CITY, ST	ATE, ZIP							CONTACT	PHONE - INCLUDE AREA	CODE				
INJURIES	INJURED	EMS AGENCY (NAME)		INJURED	TAKEN TO-	MEDICAL FACILITY	(NAME CITY)	SAFETY EQUIPMENT		SEATING POSITIO	IN ATD DAG	USAGE   EJECTIO	N TRAPPED		
INJURIES	TAKEN BY							USED	DOT-CO	MPLIANT	AIR DAG	III	INAPPED		
OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN	OFFENSE CHARGED LOCAL OFFENSE DE			OFFENSE DESC	CRIPTION CITATI			TON NUMBER	-1		
	ENDODOSTATION	DECYPTO-VALL		l l				ALCOHOL TEST DRUG TEST(S				c)			
OL CLASS	ENDORSEMENT SELECT UP TO 2	RESTRICTION SELECT U	IPTO3   DRI DIS BY	VER TRACTED			<b>PECTED</b> Arijuana	CONDITION		YPE VALUE	STATUS	TYPE RESU	S) LT selectupto4		
						HER DRUG									
INJU 1-FATAL	JRIES	SEATING POSITION  1-FRONT-LEFT SIDE	1 - NOT DEF	AIR BAG PLOYED		OL CLAS 1-CLASS A	5 <b>S</b>	OL RESTRIC	1 27 12 25 25 25 25 25 25 25 25 25 25 25 25 25	DRIVER DISTRACTED	MOIT	TEST ST 1 - NONE GIVEN	ATUS		
	SERIOUS INJURY. Minor injury	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 - DEPLOY 3 - DEPLOY	1.00 Carlo		2 - CLASS B 3 - CLASS C		2 - CDL INTRASTAT	Navigna	2 - MANUALLY OPERATII Electronic commu		2 - TEST REFUSED			
4 - POSSIBLE II		3 FRONT-RIGHT SIDE		ED BOTH FR	ONT/SIDE	4 - REGULAR CLASS		3 - CORRECTIVE LE 4 - FARM WAIVER	-N9E9	DEVICE (TEXTING, TY DIALING)		3 - TEST GIVEN, CO SAMPLE / UNU	SABLE		
5 - NO APPAREN	NT INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT APP	PLICABLE Ment unkn	inwn	(OHIO = D) 5 - M/C MOPED ONLY		5 - EXCEPT CLASS 6 - EXCEPT CLASS		3 - TALKING ON HANDS-F		4 - TEST GIVEN, RI 5 - TEST GIVEN, RI			
INJURED 1-NOT TRANSF	TAKEN BY	5 - SECOND - MIDDLE 6 - Second - Right Side	32,201	311(1)		6 - NO VALID OL		& CLASS B BUS		4 -TALKING ON HAND-HI	ELD	UNKNOWN			
/TREATED A		7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	Charles as a	JECTION		OL ENDORSI	EMENT	7-EXCEPT TRACT 8-INTERMEDIATE	LICENSE	5-OTHER ACTIVITY WIT	H AN	ALCOHOL TI 1-NONE	EST TYPE		
2 - EMS 3 - POLICE		8-THIRD - MIDDLE	1 - NOT EJE 2 - PARTIAI	CTED LLY EJECTEI	0	H - HAZMAT M - Motorcycle		RESTRICTIONS 9 - LEARNER'S PE	RMIT	ELECTRONIC DEVICE 6 - Passenger		2 - BL00D			
9-OTHER/UNI	KNOWN	9 - THIRD - RIGHT SIDE 10 - Sleeper Section	3 - TOTALLY			P - PASSENGER N - TANKER		RESTRICTIONS 10 - LIMITED TO DA	A CONTRACTOR OF THE	7 - OTHER DISTRACTION		3 - URINE 4 - Breath			
ARTHUR STORY	QUIPMENT	OF TRUCK CAB 11 - Passenger in Other				Q - MOTOR SCOOTER	40.00	11 - LIMITED TO EN	MPLOYMENT	8 - OTHER DISTRACTION THE VEHICLE	OUTSIDE	5-OTHER			
1 - NONE USED 2 - Shoulder	BELT ONLY USED	ENCLOSED CARGO AREA (Non-trailing unit, bus,	1 - NOTTR/	RAPPED APPED		R - THREE-WHEEL ! S - SCHOOL BUS	MOTORCYCLE	13 - MECHANICAL I	DEVICES	9 - OTHER / UNKNOWN		DRUG TES	TTYPE		
3 - LAP BELT 0 4 - Shoulder	NLY USED & Lap Belt Used	PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED	2 - EXTRIC Mechai	ATED BY Nical Mean	IS (	T - DOUBLE & TRIPL		(SPECIAL BRAI	OTHER	CONDITION	N. C. S. S. S. S. S. S.	2 - BLOOD			
5 - CHILD REST	TRAINT SYSTEM -	CARGO AREA 13 - Trailing Unit	3 - FREED			X - TANKER / HAZM.	AT	ADAPTIVE DEV 14 - MILITARY VEH		1 - APPARENTLY NORMA 2 - Physical impairme		3 - URINE 4 - OTHER			
6-CHILD RESTRAINT SYSTEM - 14-RIDING ON VEHICLE EXTERIOR				GENDE F-FEMALE	R	15 - MOTOR VEHICL AIR BRAKES	CLES WITHOUT 3 - EMOTIONAL (E.G., DEPRESSED.			DRUG TEST RESULT(S					
REAR FACIN 7 - Booster S		(NON-TRAILING UNIT) 15 - NON-MOTORIST				M - MALE		16-OUTSIDE MIRROR 4-ILL		4-ILLNESS		1 - AMPHETAMIN	ES		
8 - HELMET US	医静脉动脉 化二氯化二氯化	99 - OTHER / UNKNOWN				U - OTHER / UNKNOV	YN	17 - PROSTHETIC A 18 - Other	10	5 - FELL ASLEEP, FAINTI FATIGUED, ETC.	ED,	2 - BARBITURATE 3 - BENZODIAZER			
9 - PROTECTIV (ELBOW, KN	VEES, ETC.)									6- UNDER THE INFLUEN OF MEDICATIONS/DI		4 - CANNABINOID	Lind in the control of the control o		
10 - REFLECTIV 11 - LIGHTING -	- PEDESTRIAN									/ALCOHOL 9-OTHER/UNKNOWN		5 - COCAINE 6 - OPIATES / OPI	OIDS		
/ BICYCLE O 99-OTHER/UN	ONLY											7-OTHER			
YV-VIIIEKYUN	inity in the	37. 15年1日 1986 CIR 168 168 168 168 168 168 168 168 168 168	.00 00 v		建制制						被放弃	8 - NEGATIVE RE	SULTS		

OCCUPANT / WITNESS ADDENDUM								LOCAL REPORT NUMBER						
								2 0 2 3		$0_{+}0_{+}7_{-}$				
	UNIT#	NAME: LAS	r, FIRST, MIDDLE					DATE OF BIRTH AGE GENDER						
Į.	ADDRESS:	: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE					
CCUPAN		, o, n, c, r, r,	5177 <u>21</u> 7											
ġ.	INJURIES		EMS Agency (NAME)		INJURED TAKEN TO: Medical Facili	TY (NAME, CITY)	SAFETY EQUIPMENT	Si	EATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
		TAKEN BY					USED	DOT-COMPLIANT MC HELMET		1	1 1			
	UNIT#	NAME: LAS	T, FIRST, MIDDLE			3 '9		DATE	OF BIRTH		AGE	GENDER		
ì		l i			L	11		_1 { _1						
CCUPAN	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE -	INCLUDE AREA COD	E		•		
						SAFETY EQUIPMENT	L   SEATING POSITION   AIR BAG USAGE   EJECTION   TRAPPED							
	INJURIES	INJURED TAKEN BY	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACILI	DOT-COMPLIANT MC HELMET	EATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED				
	LIMIT		T COOT WOOD 5					L	OF BYDTH	<u></u>	السال			
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DATE	OF BIRTH		AGE	GENDER		
E	ADDRESS	STREET, CITY,	STATE, ZIP					CONTACT PHONE -	INCLUDE AREA COI	DF		<u> </u>		
CCUPAN														
8	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	ITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-Compliant	EATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED		
		BY					USED	MC HELMET		L	_	الـــــا		
	UNIT#	NAME: LAS	T, FIRST, MIDDLE	4 · · · · · · · · · · · · · · · · · · ·				DATE	OF BIRTH		AGE	GENDER		
										1		]		
OCCUPAN	ADDRESS	RESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE					
990	INJURIES	INJURED	EMS Agency (NAME)		IN UDDED TAKEN TO, Manager France		SAFETY EQUIPMENT	1,	SEATING POSITION	ATD DAD HEAD	r leicozion	TRADDED		
!	INJUNIES	TAKEN BY	ENIS AGENCY (NAME)	ICY (NAME) INJURED TAKEN TO: MEDICAL F			USED	DOT-COMPLIANT MC HELMET	SEATING PUSITION	AIK BAU USAU	E EJECTION	IKAPPED		
		INJ	JRIES	SAFET	Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG	J ∟ USAGE			
	1 - FAT	AL		1 - NONE US	"大汉",宋朝在大路在城上,就是他的大大震震,以此,而不不知识于路域。大	医甲甲基甲磺基酚 化磺基甲基 电流点 化二氯化	IT – LEFT SIDE		1 - NOT DE	PLOYED				
	4000		RIOUS INJURY		OCCUPANT ER BELT ONLY USED	O FRONT MIDDLE			/ER) 2 - DEPLOYED FR					
	100	SPECTED M SIBLE INJU	INOR INJURY		T ONLY USED	NT – RIGHT SID		3 - DEPLOYED SIDE  4 - DEPLOYED BOTH						
	New York	APPARENT		4 - SHOULD	ER & LAP BELT USED	4 - SECOND - LEFT SID (MOTORCYCLE PASS 5 - SECOND - MIDDLE 6 - SECOND - RIGHT SI		14、19、19、19、19、19、19、19、19、19、19、19、19、19、	FRONT/SIDE 5 - NOT APPLICABLE					
			TAKEN BY	<ul> <li>A Company of the compan</li></ul>	ESTRAINT SYSTEM – D FACING			N.						
	1 - NOT	TRANSPOR	CESTON AND CONTRACT TO A SECURITION OF SECUR		ESTRAINT SYSTEM =	2. Paragraphic	RD – KIGHT SI RD – LEFT SIDE	JE.	9 - DEPLOYMENT UNKNOWN					
		EATED AT S		, REAR FA	CING	(MOTORCYCLE SIDE 8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDI		CAR)	EJECTION  1 - NOT EJECTED  2 - PARTIALLY EJECTED			Contraction for		
	2 - EMS			7 - BOOSTEI 8 - HELMET				E						
	3 - POL 9 - OTH	.ICE IER / UNKN	OWN.		TIVE PADS USED	有自然的自然的原理。	EPER SECTION			ALLY EJEC LY EJECTE				
			NDER		KNEES, ETC.)	CAR	SENGER IN OTH GOAREA (NON-T	RAILING UNIT,		PPLICABLE				
	F-FEM	1988年4月1日日本中			TIVE CLOTHING	F = [ 40,000,000,000,000,000,000,000,000,000,	PICK-UPWITH CA SENGER IN UNI	생활하다 그 하는 생님 그렇게 하고 하다면		TRAP	PED	To Pain keeds		
ı	M - MAL	人名巴克里 医多类试验检验		/BICYCL	G – PEDESTRIAN E ONLY	CAR	GO AREA		1 - NOTTI	RAPPED				
	U - 01 H	ER/UNKNO	IWN .	99 - OTHER/	UNKNOWN	State of the state	ILING UNIT NG ON VEHICLI	EXTERIOR	EXTERIOR 2 - EXTRICATED BY MECHANICAL MEANS					
							-TRAILING UNIT) -MOTORIST			BY NON-N	/IECHANI	CAL		
							ER/UNKNOWN		MEAN	S				
	Į.	AST, FIRST, MID							E OF BIRTH		AGE	GENDER		
			ENNIS, R					0,8,0,			$\lfloor 6_{\perp} 8_{\perp}$	M		
ADDRESS: STREET, CITY, STATE, ZIP 610 STINAFF ST , Kent, ,OH 44240							Redacted			3 (A)(1	)(mm)			
NAME: LAST, FIRST, MIDDLE								E OF BIRTH	<u> </u>	AGE	GENDER			
							J	1 1		1 1 1	WENDEN			
ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE	- INCLUDE AREA O	CODE	1				
									<u> </u>					
9	NAME: L	AST, FIRST, MID	DLE					DAT	E OF BIRTH		AGE	GENDER		
N I	ADDRES	S: STREET, CIT	y, STATE, ZIP					CONTACT PHONE	- INCLUDE ARFA	1 CODE				
181		•							1	<u>1</u> 1				
	-													