OFF PUBLIC SAFETY TRAFFIC CRASH	LOCAL REPORT NUMBER*					
PHOTOS TAKEN OH-2 OH-3	2 0 2 1 - 0 0 0 0 9 7 7 6					
SECONDARY CRASH	REPORTING AGENCY NAME*	NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR	
PRIVATE PROPERTY	City of Kent Police	0   6   7   0   3	1 - SOLVED	0,2	0 1 98 - ANIMAL	
1 - CITY	TY, VILLAGE, TOWNSHIP*		CRASH DATE / T	IME*	CRASH SEVERITY  1 - FATAL	
3-TOWNSHIP			$\{0,6,1,8,2,0,2,1,$		2-SERIOUS INJURY	
ROUTE TYPE ROUTE NUMBER PREFIX 1-NORTH 2-SOUTH 3-EAST	LOCATION ROAD NAME	ROAD TYPE	LATITUDE DE	CIMAL DEGREES	SUSPECTED  3 - MINOR INJURY	
4-WL31	FRANKLIN	AV	4 <sub>1</sub> 1 <sub>e</sub> 1 <sub>5</sub> 0 <sub>1</sub>		SUSPECTED	
ROUTE TYPE ROUTE NUMBER PREFIX 1-NORTH 2-SOUTH 3-EAST 4-WEST	REFERENCE ROAD NAME (ROAD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE DE	CIMAL DEGREES	4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE	
The state of the s	SUMMIT	ST	8 <sub>1</sub> -3 <sub>6</sub> 0 <sub>1</sub>	2   2   8	ONLY	
REFERENCE POINT DIRECTION 1 - INTERSECTION 1 - NORTH IR	ROUTE TYPE ROAD TYPE - INTERSTATE ROUTE (TP) AL - ALLEY HW- HIGHWAY	RD - ROAD	l 521	INTERSECTION RELA		
4 2-MILE POST COUTU	- FEDERAL US ROUTE AV - AVENUE LA - LANE	SQ - SQUARE	WITHIN INTER	RSECTION OR ON APPE	ROACH	
4 - WEST SR	- STATE ROUTE BL - BOULEVARD MP - MILEPOST CR - CIRCLE OV - OVAL	ST - STREET TE - TERRACE	WITHIN INTER	RCHANGE AREA N	UMBER OF APPROACHES	
FROM REPERENCE UNIT OF MEASURE	- NUMBERED COUNTY ROUTE CT - COURT PK - PARKWAY	TL -TRAIL		ROADWAY		
2-FEET	ROUTE DR - DRIVE PI - PIKE HE - HEIGHTS PL - PLACE	WA - WAY	ROADWAY DIV	IDED		
LOCATION OF FIRST HARMFUL EVE	NT MANNER OF CRASH COLLISION/I	MPACT	DIRECTION OF TRAVEL	MED	DIAN TYPE	
1 - ON ROADWAY 9 - CROSSOVE 2 - ON SHOULDER 10-DRIVEWA	DETMEEN	AR	1 - NORTH	1 - DIVIDE	D FLUSH MEDIAN	
1.0.1	Y/ALLEY ACCESS GRADE CROSSING TWO MOTOR VEHICLES IN 6-ANGLE		2-SOUTH 3-EAST	2 - DIVIDE	EET ) ED FLUSH MEDIAN	
4 - ON ROADSIDE 12-SHARED U 5 - ON GORE TRAILS	JSE PATHS OR TRANSPORT 7 - SIDESWIPE, 2 - REAR-END 8 - SIDESWIPE.	SAME DIRECTION OPPOSITE DIRECTION	4- WEST	(≥4 FE 3 - DIVIDE	ET ) D, DEPRESSED MEDIAN	
6 - OUTSIDE TRAFFIC WAY 13-BIKE LAN	E 3-HEAD-ON 9-OTHER/UNI			1	D, RAISED MEDIAN	
7 - ON RAMP 14 - TOLL BOO 8 - OFF RAMP 99 - OTHER / U				ł.	/UNKNOWN	
WORK ZONE RELATED	WORK ZONE TYPE LOCATION OF CRASH II	WORK ZONE	CONTOUR	CONDITIONS	SURFACE	
1	- LANE CLOSURE 1 - BEFORE THE : - LANE SHIET/CROSSOVER WARNING SIG		, 2 ,	. 2	. 2	
-   -	-WORK ON SHOULDER 2 - ADVANCE WAR	RNING AREA	1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE	
	or MEDIAN 3-TRANSITION A - INTERMITTENT OR MOVING WORK 4-ACTIVITY ARE		2 - STRAIGHT GRADE	2 - WET	2 - BLACKTOP, BITUMINOUS,	
ACTIVE SCHOOL ZONE 5	- OTHER 5 - TERMINATION	AREA	I	3 - SNOW	ASPHALT	
LIGHT CONDITION	WEATHER		4 - CURVE GRADE 9 - OTHER/UNKNOWN	4 - ICE 5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK 4 - SLAG, GRAVEL,	
1 - DAYLIGHT 1 2 - DAWN/DUSK	1-CLEAR 6-SNOW  1-CLEAR 6-SNOW 7-SEVERE CROSSWINDS			OIL, GRAVEL	STONE	
3 - DARK - LIGHTED ROADWAY	3-FOG, SMOG, SMOKE 8-BLOWING SAND, SOIL, I			6 - WATER (STANDING MOVING)	5 - DIRT 9 OTHER/UNKNOWN	
4 - DARK - ROADWAY NOT LIGHTED 5 - DARK - UNKNOWN ROADWAY LIGHTING	4 - RAIN 9 - FREEZING RAIN OR FRI 5 - SLEET, HAIL 99 - OTHER / UNKNOWN	NG RAIN OR PREEZING DRIZZLE 7-SLUSH				
9 - OTHER / UNKNOWN				9 - OTHER/UNKNOWN		
NARRATIVE				a	Indicate the north	
UNIT 1 STOPPED AT THE S	TOP SIGN ON			A	an "N" on the compass diagram.	
FRANKLIN AVENUE FACI	NG NORTHBOUND AT					
SUMMIT STREET. UNIT 1	FAILED TO YIELD			1		
TO RIGHT OF WAY TRAF	FIC BEFORE		Avenue			
ENTERING THE INTERSE	ECTION AND TRAVELED		Frankin Avenue			
INTO THE LANE OF WEST	F BOUND TRAFFIC.					
UNIT 2 TRAVELED WEST	AND STRUCK UNIT 1			UNIT 2		
AS IT TRAVELED NORTH		East Summit S	BI			
				T		
			'	'		
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME ARRIVAL DATE / T	IME	SCENE CLEARED D	DATE / TIME	REPORT TAKEN BY	
	1,8,2,0,2,1,/,1,2,2,7,0,6,1,8,2,0,2,1,/	1 2 3 0	0_6_1_8_2_0_2_1	1,1,3,0,7	POLICE AGENCY	
TOTAL TIME OTHER TOT ROADWAY CLOSED INVESTIGATION TIME MINU		CHECKED BY DFFI Ennemos			MOTORIST  SUPPLEMENT	
	OFFICER'S BADGE NUMBER*	Снескев	BY OFFICER'S BADGE N	UMBER*	(CORRECTION OF ADDITION TO AN EXISTING REPORT SENT TO COPS)	
0 1 0 0 1 5 0 5	5 5 2 5 0	2 5	5			

2,0,2,1,-,0,0,0,9,7,7,6,

UNIT#	OWNER NAME: LAST, FIRS	T, MIDDLE (X SANE AS DRIVER		OWNED DHONE		DAMAGE				
0 1	THOMPSON, STEE	PHEN, GAIL		E	1	DAMAGE SCALE				
OWNER AL	DDRESS: STREET, CITY, STATE	, ZIP (X SAME AS DRIVER)				1 - NONE 2 FUNCTIONAL DAMAGE				
4455 TIN	MBERDALE DR ,Sto	ow ,OH 44224				3 2- MINOR E	DAMAGE 4 - DISABLING DAMAGE			
COMMERC	IAL CARRIER: NAME, ADD	RESS, CITY, STATE, ZIP		COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	1	9 - UNKNOWN			
							DAMAGED AREA(S)			
LP STATE	LICENSE PLATE #	VEHICL	E IDENTIFICATION #	VEHICLE YE	AR VEHICLE MAKE	INDI	CATE ALL THAT APPLY			
$O_1H_1$	PATTIS	$J_1M_1G_1L_1$	V <sub>1</sub> M7 <sub>1</sub> J <sub>1</sub> 1 <sub>1</sub> 3 <sub>1</sub> 1 <sub>1</sub> 0 <sub>1</sub> 4	1 3 8 2 0 1	8 Mazda	12	17			
X INSURAL VERIFI	NCE INSURANCE COMP	ANY 1	NSURANCE POLICY #	COLOR	VEHICLE MODEL	"	11 1			
VERIFI	ED STATE FARM	1	612815C2835D	GRY	MAZDA 6	10	2 10 11 1 2			
	TYPE OF USE		US DOT #	TOWED BY: COMPAN		10 2	10,6000 2			
COMME	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE	<u> </u>	Bakers Towing		9 9 1	D 9 9 3			
INTERI	UCA		HICLE WEIGHT GVWR/GCWR		OUS MATERIAL	8 4 -				
DEVICE EQUIP	HIT/SKIP UNI		1 - ≤10K LBS. 2 - 10,001 - 26K LBS	RELEASED	CLASS # PLACARD ID #	B 7 5 V	4 B 7 7 5 4			
EQUIP	PED —	0 1	3 - >26K LBS	PLACARD		7	12 7 5			
	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	12-GOLF CART	18-LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	6	11 1 6			
0,1	2 - PASSENGER VAN (MINIVAN)	8 - MOTORCYCLE 3-WHEELED	13-SNOWMOBILE	19-BUS (16+ PASSENGERS)	24 - WHEELCHAIR (ANY TYPE)	10 /	11 1 2			
	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE	14-SINGLE UNITTRUCK	20-OTHER VEHICLE	25 - OTHER NON-MOTORIST	<u> </u>	10 2			
UNIT TYPE		10 - MOPED OR MOTORIZED BICYCLE		21 - HEAVY EQUIPMENT	26-BICYCLE	9	9 3 3			
	5 - CARGO VAN 6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE		22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN	_				
9 00	A - MILL ( )-13 GEH ( 3 )	(ATV / UTV)	17 - MOTORHOME	MITTINGE PROPERTY VEHICLE	99 - UNKNOWN OR HIT/SKIP	8 / 1 = 3 / 4				
00	# OF TRAILING UNITS					12	7 5 12			
	WAS VEHICLE OPERATING IN AU	TONOMOUS	0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	11	6 11 12			
	MODE WHEN CRASH OCCURRED	. 0		4 - HIGH AUTOMATION		10 11 1	2 10 11 1 2			
2_	1-YES 2-NO 9-OTHER/UNK	Mainthing	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		10 2 =	10 2			
		MODE LEVEL				9 9 3	3 9 9 3			
		6 - BUS - CHARTER/TOUR		16 - FARM	21 - MAIL CARRIER					
0 1		7 - BUS - INTERCITY		17 - MOWING	99-OTHER/UNKNOWN		1			
SPECIAL	3 - ELECTRONIC RIDE SHARING	9 - BUS - SHUTTLE		18 - SNOW REMOVAL		7	7 5			
FUNCTION	4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER		14-PUBLIC UTILITY 15-CONSTRUCTION EQUIPMENT 2	19-TOWING		•	6			
						}	12 12 12			
0.1	1 - NO CARGO BODY TYPE / NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER MOTOR VEHICLE	COACCIO	B - POLE	12 - CONCRETE MIXER	12				
CARGO		4 - LOGGING	/ CARCOVALUENO: ARED DOV	9 - CARGO TANK	13 - AUTO TRANSPORTER	R.A				
BODY Type		4 - 10001110	7 CDAINICHIDCACBANCI	10-FLAT BED	14-GARBAGE/REFUSE	9 0 3	9 46 3 9 7 3 9 🛞 3			
ITPE			, and the state of	11 - DUMP	99-OTHER/UNKNOWN	0				
		4 - BRAKES	7 - WORN OR SLICKTIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	6				
		5 - STEERING		13-DISABLED FROM PRIOR			6 6 6			
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT						
	1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12-FIRST RESPONDER	NO DAMAGE	[0] UNDERCARRIAGE [14]			
ــــــــــــــــــــــــــــــــــــــ	CROSSWALK	4 - MIDBLOCK - MARKED		10 - DRIVEWAY ACCESS	AT INCIDENT SCENE	□-TOP [13]	- ALL AREAS [15]			
LOCATION	2 - INTERSECTION – UNMARKED CROSSWALK	CROSSWALK		11 - SHARED USE PATHS OR	99-OTHER/UNKNOWN		_			
AT IMPACT	CRUSSWALK	5 - TRAVEL LANE - OTHER LOCATIO	1	TRAILS		□- UR	IIT NOT AT SCENE [16]			
	1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18-APPROACHING					
1	2 - NON-COLLISION	2 - BACKING	B - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING	OR LEAVING VEHICLE	0 - NO DAM	AL POINT OF CONTACT			
	3-STRIKING UIL	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	SPECIFIED LOCATION	19-STANDING					
ACTION	4- STRUCK PRE-CRASH	4 - OVERTAKING/PASSING	SO THINKES	15 - WALKING, RUNNING, 20 - OTHER NON JOGGING, PLAYING 21 - STANDING (		0 3 1-12 - REFE	RTO UNIT 15 - VEHICLE NOT AT SCENE			
	5- BOTH STRIKING ACTIONS & STRUCK		11 - SLOWING OR STOPPED IN TRAFFIC	16 - WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE	13-TOP	99 - UNKNOWN			
	9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	14 1 1504 1 15	17 - PUSHING VEHICLE	99-OTHER/UNKNOWN					
		7	12 - 0117 ERE 233				TRAFFIC			
		7 - LEFT OF CENTER 8 - FOLLOWING TOO CLOSE / ACD	DADVED BACITION	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL			
		9-IMPROPER LANE CHANGE	14-STOPPED OR PARKED	18 - OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE 23 - OPENING DOOR INTO	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN			
0 4	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY	19 - LOAD SHIFTING/FALLING/	ROADWAY	2 2 - TWO-WAY	4 2 - SIGNAL 5 - YIELD SIGN			
CONTRIBUTING		11 - DROVE OFF ROAD	15 - SWERVING TO AVOID	SPILLING	99-OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL			
- CINCOMILANCES		12 - IMPROPER BACKING	16 - WRONG WAY	20 - IN PROPER CROSSING		# of THROUGH LANES	RAIL GRADE CROSSING			
SEQUENCE	OF EVENTS		· · · · · · · · · · · · · · · · · · ·		<del></del>	ON ROAD	1 - NOT INVOLVED			
			EVENTS			2	1 2 - INVOLVED-ACTIVE CROSSING			
1_2   0		6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE -	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING			
		7 - SEPARATION OF UNITS	TRAVEL	L7 - ANIMAL — FARM	EQUIPMENT	HMTT (A)	ON MOTODICT DIDECTION			
21		8 - RAN OFF ROAD RIGHT	12_DOWNHILL DINAWAY	IS-ANIMAL — JEER	23 - STRUCK BY FALLING, SHIFTING CARGO OR	ONTI / N	ON-MOTORIST DIRECTION  1 - NORTH 5 - NORTHEAST			
2[]		9 - RAN OFF ROAD LEFT	12 OTHER NON COLLEGION	19-ANIMAL — OTHER 20-MOTOR VEHICLE IN	ANYTHING SET IN MOTION		2 - SOUTH 6 - NORTHWEST			
	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14-PEDESTRIAN	TRANSPORT	BY A MOTOR VEHICLE 24-OTHER MOVABLE CBJECT	FROM 2 TO				
3				21 - PARKED MOTOR VEHICLE	- · viii an invitable tildett		4 - WEST 8 - SOUTHWEST			
	25 MIDACT ATTENHATOR		N WITH FIXED OBJECT		PA HARM TRAIN ALLE		9 - OTHER / UNKNOWN			
4	LOBACH CHEURON	31 - GUARDRAIL END 32 - PORTABLE BARRIER		43 - CURB 44 - Ditch	50 - WORK ZONE MAINTENANCE EQUIPMENT	411179 4				
	26 - BRIDGE OVERHEAD	33 - MEDIAN CABLE BARRIER		15 - EMBANKMENT	51 - WALL	UNIT SPEED	DETECTED SPEED			
5	STRUCTURE	34 - MEDIAN GUARDRAIL	SUPPORT	16 - FENCE	52 - BUILDING	10,1,0,	1 - STATED / ESTIMATED SPEED			
	27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	BARRIER	A) OTHER DACK BOLE	17 - MAILBOX	53 - TUNNEL		2 - CALCULATED / EDR			
61 1 1	29-BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	DR STIPPORT	48-TREE	54 - OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED			
		36-MEDIAN OTHER BARRIER	42-CULVERT	49 - FIRE HYDRANT	99 - OTHER / UNKNOWN					
1 1 .	FIRST HARMFUL EVEN	т 1 1 наст.	IARMFUL EVENT			2 5				
	. THE I HAVING OF EACH	MUSI P	INNITUL EVENT							

2,0,2,1,-,0,0,0,9,7,7,6,

	UNIT #	OWNER NAME: LAST, FIR	R NAME: LAST, FIRST, MIDDLE ( SAME AS DRIVER)			ER PHONE-165	no secs cont . Tesser se natural	DAMAGE				
æ	0   2	CARNEY, KEITH, MICHAEL					J	DAMAGE SCALE				
빌	OWNER AL	DDRESS: STREET, CITY, STATE	ZIP ( SAME AS DRIVER)		<del></del>	-		3 1 - NONE 3 - FUNCTIONAL DAMAGE				
N A	125 HAR	RTLE RD ,GLENSH	AW ,PA 15116					2-MINOR D	AMAGE	4 - DISABLING DAMAGE		
0	COMMERC	CIAL CARRIER: NAME, ADD	RESS, CITY, STATE, ZIP		Co	MMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	9 - UNKNOWN				
								0	JAMAGE	ED AREA(S)		
	LP STATE	LICENSE PLATE #	VEHIC	LE IDENTIFICATION #		VEHICLE YE	AR VEHICLE MAKE			LL THAT APPLY		
	PA	P + A = JXB8848 $[1 + Y + V + H + P + 8 + 1 + A + 6 + 9 + 5 + M + 2 + 0]$								- 12 -		
		NCE INSURANCE COMP		INSURANCE POLICY#		COLOR	VEHICLE MODEL	11 0		11 12 1		
	X INSURAL VERIFI	ED STATE FARM		4209732D1838D		BLU	MAZDA 6	10 12	2	10 12		
		TYPE OF USE		US DOT #	Tnw	ED BY: COMPAN			7	11 11 1		
	COMME		IN EMERGENCY RESPONSE			y Service	T MAINE	9 9 3	3			
			,	/EHICLE WEIGHT GVWR/GCWR	, <u>                                      </u>	HAZARDO	US MATERIAL	0 4 -	1			
	INTERE	LOCK HIT/SKIP UNI	#UCCUPANIS	1 - ≤10K LBS	$\Box$	MATERIAL ( RELEASED	CLASS # PLACARD ID #	7 5	4	7 9 5		
	EQUIP	ED MHII/SKIE ONI	1 0 2	2 - 10,001 - 26K LBS		PLACARD 1				6		
		3 Discription of D		3 - >26K LBS				6 5	11 -	12 7 6 5		
		1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED			IVERY VEHICLE)	23 - PEDESTRIAN / SKATER		< 1	12		
	0 1	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE		20-0THER \	+ PASSENGERS)	24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST	10/	11			
	UNIT TYPE	4 - DICK HP	10 - MOPED OR MOTORIZED		21 - HEAVY		26-BICYCLE	_	10	2		
		5 - CARGO VAN	BICYCLE			WITH RIDER OR	27 - TRAIN	l °∟	8	n : _ '		
		6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE	17 - MOTORHOME		-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	7.	7	5 74		
Ы	00		(ATV/UTV)	27 1100110110			33 - Old Month of Hit 1/2/Cit	8 /		6		
2	00	# of TRAILING UNITS						12 1	7	5 12 1		
VEHICL		WAS VEHICLE OPERATING IN AU		0 - NO AUTOMATION	3 - CONDITI	ONAL AUTOMATION	9 - UNKNOWN	12		12		
>	2	MODE WHEN CRASH OCCURRED	)? (0)	1 - DRIVER ASSISTANCE	4 - HIGH AU	TOMATION		10	2	10 11 2		
		1-YES 2-NO 9-OTHER/UNK			5 - FULL AU	TOMATION		10 2	1.	10 2		
		1 None	MODE LEVE					9 9 3	3	9 9 3		
	- A 74V1 7 010 11900017V				16-FARM		21 - MAIL CARRIER	7 5 7	4	T 1:11:11.7.		
	4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5			17 - MOWING		99-OT-IER/UNKNOWN		•				
		CTION 4 - SCHOOLTRANSPORT 9 - BUS - OTHER 14-PUBLIC UTILIT			18 - SNOW REMOVAL  19 - TOWING  NT 20 - SAFETY SERVICE PATROL			7 5		7 6 5		
	FUNCTION			15 - CONSTRUCTION EQUIPMENT			,		•			
						<del></del>		12	12 12			
	0 1 1	1 - NO CARGO BODY TYPE / NOT APPLICABLE	3 - VEHICLE TOWING ANOTHE MOTOR VEHICLE	CHACCE	B - POLE		12 - CONCRETE MIXER	12				
	CARCO		4 - LOGGING	4 04 04 04 14 14 14 14 14 14 14 14 14 14 14 14 14	9 - CARGOT		13-AUTOTRANSPORTER	. 8.8 .				
	BODY	TYPE 7 - GRAIN/CHIPS/GRAVEL		7 CDAINICUIDEICDAVEI	10-FLAT BE	.D	14-GARBAGE/REFUSE	9 ( )	, √€	3 9 🕇 3 9 🏶 3		
	TIPE				11-DUMP		99 - OT HER / UNKNOWN	0	- 4	00		
	1 1 1	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICKTIRES	9 - MOTORT	ROUBLE	99-OTHER/UNKNOWN	6				
	VEHICLE	2 - HEAD LAMPS	5 - STEERING			D FROM PRIOR			6	6 6		
	DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDE	VI.		C was a series				
		1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN	CROSSING ISLAND	12 - FIRST RESPONDER	- NO DAMAGE	101	UNDERCARRIAGE [ 14]		
		CROSSWALK 4 - MIDBLOCK - MARKED 7 2 - INTERSECTION - UNMARKED CROSSWALK		7 - SHOULDER / ROADSIDE 10-DA		AY ACCESS	AT INCIDENT SCENE	□-TOP [13]		- ALL AREAS [15]		
	HON-MOTORIST LOCATION					USE PATHS OR	99-OTHER/UNKNOWN					
	AT IMPACT	CROSSWALK	5 -TRAVEL LANE - OTHER LOCAT	701	TRAILS			□-UN	IT NOT	AT SCENE [16]		
		1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13-NEGOTI	ATING A CURVE	18-APPROACHING					
		2 - NON-COLLISION	2 - BACKING			NG OR CROSSING	OR LEAVING VEHICLE			NT OF CONTACT		
	3	3-STRIKING 0 1	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE				0 - NO DAMA		14 - UNDERCARRIAGE		
	ACTION	4 - STRUCK PRE-CRASH	4 - OVERTAKING/PASSING	10 - PARKED	- PARKED 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIS		20 - OTHER NON-MOTORIST	1 2 1-12 - REFE		IT 15 - VEHICLE NOT AT SCENE		
		5 - BOTH STRIKING ACTIONS	5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED				13 - TOP	CPCIVI	99 - UNKNOWN		
		& STRUCK	6 - MAKING LEFT TURN	IN TRACTIC	16 - WORKING 17 - PUSHING VEHICLE		DISABLED VEHICLE 99 - OTHER / UNKNOWN	13-101				
		9-OTHER/UNKNOWN		12-DRIVERLESS	11 - r v anta	BACUIOTE	TT-UINER! URKNUWN		TRA	AFFIC		
			7 - LEFT OF CENTER		17 - VISION (	DESTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW		TRAFFIC CONTROL		
		2 - FAILURE TO YIELD	8-FOLLOWING TOO CLOSE / AC	DA PARKED POSITION  14 - STOPPED OR PARKED		ING DEFECTIVE	22 - NOT DISCERN BLE	1 - ONE-WAY		1 - ROUNDABOUT 4 - STOP SIGN		
	0 1	3 - RAN RED LIGHT	9-IMPROPER LANE CHANGE	BUCCALLY	EQUIPM		23 - OPENING DOOR INTO	2 - TWO-WAY	4	2 - SIGNAL 5 - YIELD SIGN		
		4 - RAN STOP SIGN	10 - IMPROPER PASSING	15 - SWERVING TO AVOID	SPILLIN	IFTING/FALLING/ G	ROADWAY		_	3 - FLASHER 6 - NO CONTROL		
(S)	CIRCUMSTANCES	1	11 - DROVE OFF ROAD	16 - WRONG WAY		ER CROSSING	99 - OTHER IMPROPER ACTION	# of THROUGH LANES		DATE CRAPE OPOCCING		
ENT(s		6 - IMPROPER TURN	12 - IMPROPER BACKING					ON ROAD		RAIL GRADE CROSSING  1 - NOT INVOLVED		
EVE	SEQUENCE	OF EVENTS						2 ,	. 1	2 - INVOLVED-ACTIVE CROSSING		
ш		1 - OVERTURN/ROLLGVER	6 - EQUIPMENT FAILURE	EVENTS 11 - CROSS CENTERLINE —	16 - RAILWA	ANERIO E	22 - WORK ZONE MAINTENANCE		1	3 - INVOLVED-PASSIVE CROSSING		
	1 2 0	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	ARRANGE BIRGARIAN AR	17 - ANIMAL		EQUIPMENT					
		3 - IMMERSION	8 - RAN OFF ROAD RIGHT	TRAVEL	18-ANIMAL		23 - STRUCK BY FALLING,	UNIT / NO	TOM-NO	TORIST DIRECTION		
	2	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY	19-ANIMAL	- OTHER	SHIFTING CARGO OR ANYTHING SET IN MOTION			1 - NORTH 5 - NORTHEAST		
		5 - CARGO / EQUIPMENT	10 - CROSS MEDIAN	13-OTHER NON-COLLISION 14-Pedestrian	20-MOTORY		BY A MOTOR VEHICLE	,	4	2 - SOUTH 6 - NORTHWEST		
	21 ( (	LOSS OR SHIFT			TRANSP		24-OTHER MOVABLE OBJECT	FROM 3 TO	4	J 3-EAST 7-SOUTHEAST		
	3		COLLIET	ON WITH FIXED OBJECT		MOTOR VEHICLE				4 - WEST B - SOUTHWEST		
		25 - IMPACT ATTENUATOR	31 - GUARDRAIL END		43 - CURB	N.	50 - WORK ZONE MAINTENANCE			9 - OTHER/UNKNOWN		
	4	/ CRASH CUSHION	32 - PORTABLE BARRIER		44 - DITCH		EQUIPMENT	UNIT SPEED		DETECTED SPEED		
		26 - BRIDGE OVERHEAD STRUCTURE	33 - MEDIAN CABLE BARRIER	39-LIGHT/LUMINARIES	45 - EMBAN	KMENT	51 - WALL			1 - STATED / ESTIMATED SPEED		
	5	27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL	AN HITH ITH BOLF	46-FENCE		52 - BUILDING	0 2 5				
		28 - BRIDGE PARAPET	BARRIER 35 - MEDIAN CONCRETE	43 OTHER DOCT DOLE	47 - MAILBO	Х	53 - TUNNEL 54 - OTHER FIXED OBJECT			2 - CALCULATED/ EDR		
	61_1_1	29 - BRIDGE RAIL	BARRIER	OR SUPPORT	48-TREE	DDANT	99 - OTHER / UNKNOWN	POSTED SPEED		3 - UNDETERMINED		
		30-GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT	49 - FIRE HY	URANT	VIII CAI VIII MINIONIII					
	_1	FIRST HARMFUL EVEN	IT 1 MOST	HARMFUL EVENT				2 5				
التور								1	1			

OF PUBLIC BAPETY MOTORIST / NON-MOTORIST								LOCAL REPORT NUMBER					
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UNIT # NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH AGE GENDER				
	0_1_THOMPSON, STEPHEN, GAIL								0 9 / 2 3 / 1 9 4 8 7 2 M				
	: STREET, CITY, ST.	CRDALE DR ,Stow ,OH 44224							CONTACT	PHONE - INCLUDE AREA O	ODE		
S INJUDIES		EMS AGENCY (NAME)	,ОП 4			MEDION 5401		Tai	1				
INJUNIES	TAKEN BY	EMS AGENCY (NAME)		INJURED	TAKEN 10:	: MEDICAL FACIL	LTY (NAME, CITY)	SAFETY EQUIPMENT	DOT-CON			SAGE EJECTION	TRAPPED
		ICENSE NUMBER		OFFEN	SE CHAR	RGED LOCAL		OFFENSE DESC	0 1		3	ON NUMBER	
OL STATE OL O, H		torus nombri		331.1		(GED	CODE		n of Vehicle		1480		
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UNIT#	NAME: LAST, F	•					-			DATE OF BIRTH		AGE	GENDER
0_2	1	EY, ALYSSA, DA	NIEL	LE					12/	1, 8, / ,1	9 9 8	2 2	F
Ħ	STREET, CITY, ST.		OTT 44	240					CONTACT F	HONE - INCLUDE AREA C	ODF.		
0332 (		F,Franklin Twp,	OH 44			MERICAL FACE	-	Ta. ====	L				
NON 5	TAKEN BY	EMS AGENCT (NAME)		INJUREDI	TAKEN TO:	: MEDICAL FACIL	II ▼ (NAME, CITY)	USED	DOT-COM		AIR BAG U	ISAGE EJECTION	TRAPPED
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UNIT #	T # NAME: LAST, FIRST, MIDDLE									DATE OF BIRTH		AGE	GENDER
ADDRESS	STREET, CITY, STA	ATT: 110		_		_				/	<u> </u>	ا	نــــا
SINO WIDE	: 51 KEE1, C117, 517	A1 E, ZIP							CONTACT PHONE - INCLUDE AREA CODE				
5 ≥ INJURIES	INJURED	EMS AGENCY (NAME)		LIMITIDED 1	TAVEN IN	MEDICAL FACIL	TV ANDRES OF THE	SAFETY EQUIPMENT	SEATING POSITION   AIR BAG USAGE   EJECTION   TRAPPED				
ADDRESS:	TAKEN BY	Elio Macifor (Miller		INJURED	IAKEN IS	MEDICAL PACIL	II F (NAME, CITY)	USEO	DOT-COM	PLIANT	AIR BAG U	ISAGE EJECTION	TRAPPED
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			BY	INSTALLED		_	ANAULISAN			T VALUE	SIMIUS	TIPE RESUL	1 SELECTOPIO
INJU	JRIES	SEATING POSITION		IR BAG	[] OI	THER DRUG OL CL	ACC	OL RESTRIC	TION(E)	DRIVER DISTRACT			
1 - FATAL		1-FRONT-LEFT SIDE	1 - NOT DEP			1 - CLASS A	433	1-ALCOHOL INTER	THE PERSON NAMED IN COLUMN	1-NOT DISTRACTED	Committee of the last	TEST STA -NONE GIVEN	arus
2 - SUSPECTED 3 - SUSPECTED	SERIOUS INJURY	(MOTORCYCLE DRIVER)	2 - DEPLOYE 3 - DEPLOYE			2 - CLASS B		2 - COL INTRASTAT		2 - MANUALLY OPERATING ELECTRONIC COMMUN	MATION	-TEST REFUSED	
4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE		ED BOTH FRO	NT/SIDE	3 - CLASS C 4 - REGULAR CLAS	SS	3 - CORRECTIVE LE 4 - FARM WAIVER	NSES	DEVICE (TEXTING, TYP DIALING)		SAMPLE / UNUS	
5 - NO APPAREN	NT INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT APP			(OHIO = D) 5 - M/C MOPED ON	IV	5 - EXCEPT CLASS		3 - TALKING ON HANDS-FR	LL.	4 - TEST GIVEN, RESULTS KNOWN	
INJURED	TAKEN BY	5 - SECOND - MIDDLE	9 - DEPLOYM	MENT UNKNO	WN	6 - NO VALID OL		6 - EXCEPT CLASS & CLASS B BUS	150			-TEST GIVEN, RES UNKNOWN	20112
1 - NOT TRANSP /TREATED A		6 - SECOND - RIGHT SIDE 7 - THIRD - LEFT SIDE	EJ	ECTION		OL ENDOR:	SEMENT	7 - EXCEPT TRACTO		COMMUNICATION DEVI	CE	ALCOHOL TE	ST TYPE
2 - EMS		(MOTORCYCLE SIDE CAR) 8-THIRD-MIDDLE	1 - NOT EJE			H - HAZMAT		8 - INTERMEDIATE RESTRICTIONS	LIVENSE	ELECTRONIC DEVICE		- NONE	
3 - POLICE 9 - OTHER / UNK	CNOWN	9-THIRD - RIGHT SIDE	2 - PARTIAL! 3 - TOTALLY			M - MOTORCYCLE P - PASSENGER		9 - LEARNER'S PER RESTRICTIONS	9 - LEARNER'S PERMIT 6 - PASSENGER 2 - BLOOD RESTRICTIONS 7 - OTHER DISTRACTION 3 - URINE				
		10 - SLEEPER SECTION OF TRUCK CAB	4 - NOT APP			N-TANKER		10 - LIMITED TO DAY	AYLIGHT ONLY INSIDE THE VEHICLE 4 - BREATH				
1-NONE USED	QUIPMENT	11 - PASSENGER IN OTHER	TF	RAPPED		Q - MOTOR SCOOT R - THREE WHEEL		11 - LIMITED TO EMI 12 - LIMITED - OTHE		8 - OTHER DISTRACTION O THE VEHICLE	ALZIDE 2	-OTHER	
ALCOHOLD STATE OF STREET	BELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1 - NOTTRA		1018	S - SCHOOL BUS	MOTORCICLE	13 - MECHANICAL DI	DEVICES 9-OTHER/UNKNOWN DRUGT			DRUG TEST	TYPE
3 - LAP BELT ON 4 - SHOULDER 8	NLY USED & Lap Belt Used	PICK-UP WITH CAP)  12 - PASSENGER IN UNENCLOSED	2 - EXTRICA MECHAN	TED BY ICAL MEANS		T DOUBLE & TRI	AT THE REAL PROPERTY.	(SPECIAL BRAK CONTROLS, OR O ADAPTIVE DEVI	THER	HER CONDITION		- BLOOD	
BARRY WINDOWS	RAINT SYSTEM -	CARGO AREA  13 - TRAILING UNIT	3 - FREED B	Y Chanical Mi	EANS	X - TANKER / HAZ		14 - MILITARY VEHI		1 - APPARENTLY NORMAL 2 - PHYSICAL IMPAIRMEN	1925 27 18 18 18	- URINE - OTHER	
6- CHILD REST	RAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR				GENDER		15 - MOTOR VEHICLE AIR BRAKES	TUOHTIW 2	3 - EMOTIONAL (E.G., DEPRE AHCRY DISTURBED)	SSED		ECILITIE)
7 - BOOSTER SE		(NON-TRAILING UNIT) 15 - NON-MOTORIST			F - FEMALE M - Male		16-OUTSIDE MIRRO		4 - ILLNESS	Contract of the	DRUG TEST RI -AMPHETAMINES	10	
8 - HELMET US		99 - OTHER / UNKNOWN				U - OTHER / UNKNO	DWN .	17 - PROSTHETIC AU 18 - OTHER	)	5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.	MARKET	- BARBITURATES	
9 - PROTECTIVE (ELBOW, KNE								10-VINER		6- UNDER THE INFLUENCE	A	- BENZODIAZEPIN - CANNABINOIDS	VES.
10 - REFLECTIVE	CLOTHING									OF MEDICATIONS / DRU- /ALCOHOL	69	-COCAINE	
11 - LIGHTING - I / BICYCLE OF										9-OTHER/UNKNOWN		- OPIATES / OPION	DS
99-OTHER/UNK	CNOWN											- NEGATIVE RESU	ILTS

OCCUPANT / WITNESS ADDENDUM								LOCAL REPORT NUMBER						
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	UNIT#		T, FIRST, MIDDLE	TTONIUS/ N	-	DATE OF BIRTH AGE GENDER								
Į.	02	STREET, CITY	SHOUSE, WE	HIINEY, N		0 4 / 0 3 / 1 9 9 8 2 3 F								
OCCUPANT		0.000	Y ST 204, Ken	t OH 4424	CONTACT PHONE	- INCLUDE AREA CO	Œ							
၁၀		INJURED	EMS Agency (NAME)	,011 4424		SEATING POSITION	Tain sac usasr	1 CIECTION	TRADES					
	, 5 ,	TAKEN BY			INJURED TAKEN TO: Medical Fac	and theme, and	SAFETY EQUIPMENT USED 0 4	DOT-COMPLIANT	0 . 3 .	A A	1	1		
	UNIT#	NAME: LAS	T, FIRST, MIDDLE	-				DAT	E OF BIRTH		AGE	GENDER		
								AGE GENDE						
PANT	ADDRESS:	STREET, CITY,	STATE, ZIP	·		CONTACT PHONE - INCLUDE AREA CODE								
OCCUPAN														
	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FAC	ILITY (NAME, CITY)	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED			
5		BY						LIMC HELMET		L	<u> </u>			
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
Ė-	ADDRESS:	STREET, CITY,	STATE 710											
OCCUPAN		orneed or o	STATE, EN					CONTACT PHONE	- INCLUDE AREA CO	DE				
Эō-	INJURIES	INJURED	EMS AGENCY (NAME)	·	INJURED TAKEN TO: MEDICAL FAC	ILITY (NAME, CITY)	SAFETY EQUIPMENT	<u> </u>	SEATING POSITION	AIR BAG USAGE	FJECTION	TRAPPED		
		TAKEN				esse de africación	USED	DOT-COMPLIANT MC HELMET		7331 574 56462				
7	UNIT#	NAME: LAS	T, FIRST, MIDDLE	<del></del>		··· <u>·</u>		DAT	E OF BIRTH		AGE	GENDER		
OCCUPAN	ADDRESS:	IDDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE					
1000											<u></u>			
	INJURIES	ES INJURED EMS AGENCY (NAMF) TAKEN BY			INJURED TAKEN TO: MEDICAL FACILITY (HAME, CITY) SAFETY EQUIPMENT USED			DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
4			RIES	SAFFTY	EQUIPMENT USED		SEATING POS	MC HELMET		ALD DAG H	CACE			
1	1 - FATA	The state of the state of		1 - NONE US			T - LEFT SIDE	11101	1 - NOT DE	AIR BAG U	BAGE	見る重		
	2 - SUSF	PECTED SE	RIOUS INJURY		VEHICLE OCCUPANT  - SHOULDER BELT ONLY USED  - LAP BELT ONLY USED  - SHOULDER & LAP BELT USED  - CHILD RESTRAINT SYSTEM –  (MOTORCYCLE DRIV  2 - FRONT – MIDDLE  3 - FRONT – RIGHT SIDE  4 - SECOND – LEFT SIDE  (MOTORCYCLE PASS  5 - SECOND – MIDDLE									
			NOR INJURY					E 3 - DEPLOYED SIDE						
		SIBLE INJU PPARENT I							'ED BOTH SIDE					
L			and the section					Endello		PPLICABLE				
ı		TRANSPOR	TAKEN BY		D FACING 6 - SECOND - RIGHT SIE ESTRAINT SYSTEM - 7 - THIRD - LEFT SIDE			DE 9 - DEPLOYMENT UNKNOWN						
		ATED AT S		REAR FAC		(MOT	CAR)		EJECTIO	D N				
	2 - EMS			7 - BOOSTER			D – MIDDLE D – RIGHT SIDE	1 - NOT EJECTED						
1	3 - POLI	CE Er/Unkno	MAAN	8 - HELMET			PER SECTION (	OF TRUCK CAB 2 - PARTIALLY EJE			D			
1	9 - UIRE		DER		IVE PADS USED (NEES, ETC.)		ENGER IN OTH	DAU INC HAIT						
ı	F-FEMA		EXECUTE OF THE	10 - REFLECT	IVE CLOTHING	BUS, P	ICK UP WITH CAP	9)	4 - NOT APPLICABLE					
	M - MALE			11 - LIGHTING / BICYCLE	- PEDESTRIAN ONLY		ENGER IN UNE O AREA	ENCLOSED TRAPPED  1 - NOTTRAPPED						
1	U - OTHE	R/UNKNO\	٧N	99 - OTHER / L	INKNOWN		LING UNIT IG ON VEHICLE	EYTERIAR	CAL					
ı				1		(NON-	TRAILING UNIT)	LATERIOR	MEANS					
ı							MOTORIST R/UNKNOWN		MEANS	BY NON-ME	CHANICA	AL.		
	NAME: LAS	T, FIRST, MIDD	LE				200	DAT	E OF BIRTH		AGE	GENDER		
WITNESS									, /					
WIT	ADDRESS:	STREET, CITY,	STATE, ZIP				-	CONTACT PHONE	- INCLUDE AREA COD	JE				
9	NAME: LAST, FIRST, MIDDLE								<u> </u>					
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WITNESS	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA COD	Œ				
	NAME: LAS	T, FIRST, MIDDI	E					DATE	OF BIRTH		AGE	GENDER		
TNESS	ADDRESS-	STREET, CITY,	STATE 71P				w	CONTACT	<u> </u>					
ΙM		~ rna_1,611 T <sub>r</sub> :	erni bj till					CONTACT PHONE - INCLUDE AREA CODE						
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