OFFICIAL SAFETY TRAFFIC CRASH	NT REPORT	LOCAL REPORT NUMBER*					
PHOTOS TAKEN 0H-2 0H-3	2,0,2,0,	- , 0 , 0 , 0 , 1	7,2,6,4				
SECONDARY CRASH	REPORTING AGENCY NAME*	1	NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR	
PRIVATE PROPERTY	City of Kent Police	0.6	7,0,3	1 - SOLVED L 2 - UNSOLVED	0,2	0 1 98 - ANIMAL	
_ I-CITY	TY, VILLAGE, TOWNSHIP*			CRASH DATE /1		CRASH SEVERITY 1 - FATAL	
6,7 1 2-VILLAGE Kent				10222020		2 - SERIOUS INJURY	
ROUTE TYPE ROUTE NUMBER PREFIX 1-NORTH 2-SOUTH	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DES		SUSPECTED  3 - MINOR INJURY	
S R 43 2 3-EAST 4-WEST	WATER		ST	41,15,0		SUSPECTED	
ROUTE TYPE ROUTE NUMBER PREFIX 1-NORTH 2-SOUTH	REFERENCE ROAD NAME (ROAD, MIL	.EPOST, HOUSE #)	ROAD TYPE	LONGITUDE DE		4 - INJURY POSSIBLE	
3-EAST 4-WEST	SUMMIT		ST	-81,03,5,8	2 3 1	5 - PROPERTY DAMAGE ONLY	
REFERENCE POINT DIRECTION 1 - INTERSECTION 1 - NORTH IR	ROUTE TYPE - INTERSTATE ROUTE(TP) AL - AL	ROAD TYPE  LLEY HW-HIGHWAY RD	- ROAD	521	INTERSECTION RELA		
1 2-MILE POST 2 2-SOUTH US	- FEDERAL US ROUTE AV - AV		-SQUARE	X WITHIN INTE	RSECTION OR ON APP	ROACH	
4 - WEST SR	- STATE ROUTE BL - BO		-STREET	WITHIN INTE	RCHANGE AREA	NUMBER OF APPROACHES	
FROM REFERENCE UNIT OF MEASURE	- NUMBERED COUNTY ROUTE CT - CO		-TRAIL	STATEMENT	ROADWAY		
5 0 2-FEET	- NUMBERED TOWNSHIP ROUTE DR - DR HE - HE	Angelog 19 to 19 t	A - WAY	ROADWAY DIV	IDED		
LOCATION OF FIRST HARMFUL EVE		R OF CRASH COLLISION/IMPAC	-				
1 - ON ROADWAY 9 - CROSSOVE	R 1-NOT COL	LLISION 4 - REAR-TO-REAR		DIRECTION OF TRAVE		DIAN TYPE ED FLUSH MEDIAN	
A la	Y/ALLEY ACCESS GRADE CROSSING 7 TWO MO	OTOR STREET		2- SOUTH	(<4 F		
4-ON ROADSIDE 12-SHARED U	ISE PATHS OR VEHICLE	PORT 7 - SIDESWIPE, SAME		3- EAST 4- WEST	(≥4 F	EET )	
5-ON GORE TRAILS 6-OUTSIDE TRAFFIC WAY 13-BIKE LAN	E 2 - REAR-EM E 3 - HEAD-ON					ED, DEPRESSED MEDIAN ED, RAISED MEDIAN	
7 - ON RAMP 14-TOLL BOO	TH				(ANY		
o on than						100	
WORK ZONE RELATED	WORK ZONE TYPE - LANE CLOSURE	1 - BEFORE THE 1ST W		CONTOUR 1	CONDITIONS	SURFACE	
	- LANE SHIFT/CROSSOVER	WARNING SIGN 2 - ADVANCE WARNING	ADEA	1 CYPAGONY I FOUR	1 000	2	
LAW ENFORCEMENT PRESENT	-WORK ON SHOULDER OR MEDIAN	3-TRANSITION AREA	AKLA	1 - STRAIGHT LEVEL 2 - STRAIGHT GRADE	1 - DRY 2 - WET	1 - CONCRETE 2 - BLACKTOP,	
A COUNTY OF THE	- INTERMITTENT OR MOVING WORK - OTHER	4 - ACTIVITY AREA 5 - TERMINATION ARE	Α	3 - CURVE LEVEL	3 - SNOW	BITUMINOUS, ASPHALT	
		3 TEMMINITION AND		4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK	
LIGHT CONDITION  1 - DAYLIGHT	1-CLEAR 6-	- SN <b>0</b> W		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL, STONE	
1 2-DAWN/DUSK		- SEVERE CROSSWINDS			6 - WATER (STANDIN		
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED		- BLOWING SAND, SOIL, DIRT, : - FREEZING RAIN OR FREEZIN			MOVING) 7 - SLUSH	9 - OTHER/UNKNOWN	
5 - DARK – UNKNOWN ROADWAY LIGHTIN 9 - OTHER / UNKNOWN	G 5 - SLEET, HAIL 99	9-OTHER/UNKNOWN			9 - OTHER/UNKNOW!	N	
NARRATIVE						A Fedirent to authorize	
UNIT 2 WAS STOPPED AT 1	PUE DEN I ICUT AT				<	Indicate the north direction with an "N" on the	
S. WATER ST. AND E. SUM						compass diagram.	
WAS IN THE INSIDE STRA							
NORTHBOUND. UNIT 1 W		G			NOT T	O SCALE T	
UNIT 2 FROM BEHIND AN				S. WATER ST.		A	
IMPROPER LANE CHANG				**		MIT ST.	
			1	TRAFFIC SIGNAL	-C2		
ATTEMPTED TO CHANG				34,	1		
INSIDE STRAIGHT LANE							
LANE. UNIT 1 STRUCK U	N11 2. UN11 1				0		
DRIVER WAS CITED.							
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME	7.00	SCENE CLEARED		REPORT TAKEN BY  POLICE AGENCY	
	2,2,2,0,2,0,/,1,7,0,4,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1		<u> </u>	[ 0 2 2 2 0 2	U,/,1,7,4,6	MOTORIST	
	Luff, Kevin M	G	aydosh	, Ryan		SUPPLEMENT (CORRECTION OR ADDITION	
0 0 0 0 3 0 0	7 2 2 4 6		CHECKED 1	BY OFFICER'S BADGE	NUMBER*	TO AMERISTING REPORT SERT TO COPS)	

LOCAL REPORT NUMBER

MATTER AMERICAN					[Z, 0, Z, 0, -]	0, 0, 1, 7, 2, 6, 4,
UNIT # OWNER NAME: LAST, FIF 0 1 AINA, AJIBC	OLA, CAROL	INE	UMPEU VIONE			DAMAGE DAMAGE SCALE
DWNER ADDRESS: STREET, CITY, STAT	E, ZIP (XI SAME AS DRIVER)				2 1-NONE	3 - FUNCTIONAL DAMAGE
540 WATER ST 605		4240		Diane	Z - MINOR DA	
O STATE OF THE PARTY NAME AND	ALSO, CITT, STATE, EIT		GOMMERCIAL GARRIER	PHONE: INCLUDE AREA CODE		9 - UNKNOWN AMAGED AREA(S)
LP STATE LICENSE PLATE #	VEHICL VEHICL	E IDENTIFICATION # S.B.9.HB1,2,3	VEHICLE YE			ATE ALL THAT APPLY
O. H. JFG8413  ENSURANCE INSURANCE COM		INSURANCE POLICY #		- CHOTTOICE	11 12	11 12
INSURANCE COMIERIE		Q575407575	GRY	TRAX	10 11 12	10 12
TYPE OF USE	IN EMERGENCY	US DOT #	TOWED BY: COMPAN		10 2	10,2003,2
COMMERCIAL GOVERNMENT	IN EMERGENCY RESPONSE	EHICLE WEIGHT GVWR/GCWR	HAZARDO	US MATERIAL		3 9 0 3
INTERLOCK HIT/SKIP UN	IT #UCCUPANIS	1 - ≤10K LBS. 2 - 10,001 - 26K LBS		CLASS # PLACARD ID #	7 9 7	77.
EQUIPPED -	0,2	3 - >26K LBS	PLACARD			12 7 5
1 - PASSENGER CAR 2 - PASSENGER VAN (MINIVAN)	7 - MOTORCYCLE 2-WHEELED 8 - MOTORCYCLE 3-WHEELED	12-GOLF CART 13-SNCWMOBILE	18-LIMO (LIVERY VEHICLE) 19-BUS (16+ PASSENGERS)	23 - PEDESTRIAN / SKATER 24 - WHEELCHAIR (ANY TYPE)	10 /	2
3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE	14-SINGLE UNIT TRUCK	20-OTHERVEHICLE	25 - OTHER NON-MOTORIST	7	10 2
UNIT TYPE 4 - PICK UP 5 - CARGO VAN	10-MOPED OR MOTORIZED Bicycle	15 - SEMI-TRACTOR 16 - FARM EQUIPMENT	21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR	26 - BICYGLE 27 - TRAIN	9	3 3
6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE (ATV / UTV)	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	7.	
00 # OF TRAILING UNITS					12	7 6 5 12
WAS VEHICLE OPERATING IN AL		0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	12	1 12
MODE WHEN CRASH OCCURRE  1-YES 2-NO 9-OTHER/UNV	Trouble U	1 - DRIVER ASSISTANCE 2 - PARTIAL AUTOMATION	4 - HIGH AUTOMATION 5 - FULL AUTOMATION		10 11 1 2	10 1 2
	MODE LEVEL		3 - TULE AUTOMATION		9 9 3	3 9 9 3
1 · NONE 0 1 2 · TAXI	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY	11 - FIRE 12 - MILITARY	16 - FARM 17 - MOWING	21 - MAIL CARRIER	7 5 7	5 4 7
SPECIAL 3 - ELECTRONIC RIDE SHARING		13-POLICE	18-SNOW REMOVAL	99-OTHER/UNKNOWN	The state of the s	
FUNCTION 4 - SCHOOL TRANSPORT 5 - BUS - TRANSIT/COMMUTER	9 - BUS - OTHER	14-PUBLIC UTILITY	19-TOWING		6	6
1 - NO CARGO BODY TYPE		15-CONSTRUCTION EQUIPMENT				12 12 12
/NOT APPLICABLE	MOTOR VEHICLE	5 - INTERMODAL CONTAINER CHASSIS	8 - POLE 9 - CARGOTANK	12 - CONCRETE MIXER 13 - AUTO TRANSPORTER	12	
BODY 2-BUS	4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX	10-FLAT BED	14-GARBAGE/REFUSE	R AR.	
TYPE		7 - GRAIN/CHIPS/GRAVEL	11-OUMP	99-OTHER/UNKNOWN		
1 - TURN SIGNALS VEHICLE 2 - HEAD LAMPS	4 - BRAKES 5 - STEERING	7 - WORN OR SLICK TIRES 8 - TRAILER EQUIPMENT	9 - MOTOR TROUBLE 10 - DISABLED FROM PRIOR	99 - OTHER / UNKNOWN	6	
DEFECTS 3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT			6 6 6
1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAY/CROSSING ISLAND	12-FIRST RESPONDER	- NO DAMAGE	0]  - UNDERCARRIAGE [ 14 ]
NON-MOTORIST 2 - INTERSECTION - UNMARKED	4 - MIDBLOCK - MARKED CROSSWALK	7 - SHOULDER / ROADSIDE	10 - DRIVEWAY ACCESS	AT INCIDENT SCENE	-TOP (13)	- ALL AREAS [ 15 ]
LOCATION CROSSWALK	5 -TRAVEL LANE - OTHER LOCATIO	B - SIDEWALK	11 - SHARED USE PATHS OR TRAILS	99 - OTHER / UNKNOWN	INU - UNI	T NOT AT SCENE [ 16 ]
1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18-APPROACHING		
	2 - BACKING 3 - Changing Lanes		14 - ENTERING OR CROSSING SPECIFIED LOCATION	OR LEAVING VEHICLE 19-STANDING	O - NO DAMAC	L POINT OF CONTACT  GE 14 - UNDERCARRIAGE
ACTION 4- STRUCK PRE-CRASH	4 - OVERTAKING/PASSING	9 - LEAVING TRAFFIC LANE 10 - PARKED	15 - WALKING, RUNNING,	20 - OTHER NON-MOTORIST	0 4 1-12 - REFER	TO UNIT 15 - VEHICLE NOT AT SCENE
5 - BOTH STRIKING ACTIONS & STRUCK	5 - MAKING RIGHT TURN	11 - SLOWING OR STOPPED	JOGGING, PLAYING 16 - WORKING	21 - STANDING OUTSIDE DISABLED VEHICLE	DIAGRA 13 - TOP	AM 99 - UNKNOWN
9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	111 115/11 1 10	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		There
1 - NONE	7 - LEFT OF CENTER		17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL
2 - FAILURE TO YIELD  3 - RAN RED LIGHT	8 - FOLLOWING TOO CLOSE / ACD.	A PARKED POSITION  14-STOPPED OR PARKED	19-OPERATING DEFECTIVE EQUIPMENT	22 - NOT DISCERNIBLE	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN
4 - RAN STOP SIGN	9 - IMPROPER LANE CHANGE 10 - IMPROPER PASSING	ILLEGALLY	19 - LOAD SHIFTING/FALLING/	23-OPENING DOOR INTO ROADWAY	2 2 TWO-WAY	2 2-SIGNAL 5-YIELD SIGN
CONTRIBUTING 5 - UNSAFE SPEED	11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	SPILLING 20 - IN PROPER CROSSING	99-OTHER IMPROPER ACTION		3 - FLASHER 6 - NO CONTROL
6 - IMPROPER TURN SEQUENCE OF EVENTS	12 - IMPROPER BACKING		20 - He i Not Ch Choading		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING  1 - NOT INVOLVED
SEMBERGE OF EVENIS		EVENTS			4	1 2 - INVOLVED-ACTIVE CROSSING
1 2 0 1 - OVERTURN/ROLLCVER 2 - FIRE/EXPLOSION	6 - EQUIPMENT FAILURE	ADDRESTE DIRECTION AC	16 - RAILWAY VEHICLE	22 - WCRK ZONE MAINTENANCE   EQUIPMENT		3 - INVOLVED-PASSIVE CROSSING
3 - IMMERSION	7 - SEPARATION OF UNITS 8 - RAN OFF ROAD RIGHT	TRAVEL	17 - ANIMAL — FARN 18 - ANIMAL — DEER	23 - STRUCK BY FALLING,	UNIT / NO	N-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
5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14 - PEDESTRIAN	TRANSPORT	BY A MOTOR VEHICLE 24-OTHER MOVABLE CBJECT	FROM 2 TO L	1 3 - EAST 7 - SOUTHEAST
3	COLLISIO	15-PEDALCYCLE N WITH FIXED OBJECT	21 - PARKED MOTOR VEHICLE - STRUCK			4 - WEST 8 - SOUTHWEST
25 - IMPACT ATTENUATOR 4	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB	SG-WORK ZONE MAINTENANCE		9 - OTHER/ UNKNOWN
26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	** ************************************	44 - DITCH 45 - EMBANXMENT	EQUIPMENT 51 - WALL	UNIT SPEED	DETECTED SPEED
STRUCTURE 27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL BARRIER	SUPPORT	46 - FENCE	52 - BUILDING	0,1,0,	1 - STATED / ESTIMATED SPEED
28 - BRIDGE PARAPET	35 - MEDIAN CONCRETE	41 - OTHER POST, POLE	47 - MAILBOX 48 - TREE	53 - TUNNEL 54 - OTHER FIXED OBJECT		2 - CALCULATED / EDR
6 29-BRIDGE RAIL 30-GUARDRAIL FACE	BARRIER 36-MEDIAY OTHER BARRIER	OR SHPPORT	49 - FIRE HYDRANT	99-OTHER/UNKNOWN	POSTED SPEED	3 - UNDETERMINED
1 FIRST HARMFUL EVEN	1	ARMFUL EVENT			2 , 5	



LOCAL REPORT NUMBER

2,0,2,0,-,0,0,1,7,2,6,4,

0 . 2	OWNER NAME: LAST, FIRST JEFFERS, BR	T, MIDDLE (X) SAME AS DRIVERS	ORA	or and other   Means at indivers		DAMAGE	
OWNER AD	DRESS: STREET, CITY, STATE,	ZIP (X SAME AS DRIVER)				1 - NONE	DAMAGE SCALE  3 - FUNCTIONAL DAMAGE
	PROSPECT ST		wp ,OH 44266	T		2 2- MINOR DA	
COMMERC	JAL GARRIEN: NAME, ADJR	ESS, CITY, STATE, ZIP		COMMERCIAL GARRIER	PHONE: INCLUDE AREA CODE		9 - UNKNOWN AMAGED AREA(S)
	LICENSE PLATE #	VEHICLI	E IDENTIFICATION #	VEHICLE YE	AR VEHICLE MAKE		ATE ALL THAT APPLY
	HQN5742		E0,GH7,2,6,7		_ ILYUMUMI	12	12
X INSURAN	INSURANCE COMPA		NSURANCE POLICY #	TAN	ELANTRA	12	
	TYPE OF USE		US DOT #	TOWED BY: COMPANY		10 1 2	11 1 1
COMME	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE		HAZADOD	US MATERIAL	9 3 4	3 9 9 3
INTERL	OCK HIT/SKIP UNIT	#ULCUPANIS	HICLE WEIGHT GVWR/GCWR 1 - <10K LBS		CLASS # PLACARD ID #	T. H=1.7	
DEVICE	ED MINISKIP DIKI	0,5	2 - 10,001 - 26K LBS	PLACARD			12 7
		7 - MOTORCYCLE 2-WHEELED		3-LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	6	11 2 8
UI	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE	8 - MOTORCYCLE 3-WHEELED 9 - AUTOCYCLE		19-BUS (16+ PASSENGERS) 10-OTHER VEHICLE	24 - WHEELCHAIR (ANY TYPE) 25 - CTHER VON-VOTORIST	10/	11 1 2
UNIT TYPE		10 - MOPED OR MOTORIZED		1 - HEAVY EQUIPMENT	26-BICYCLE	9	9 3 3
	5 - CARGO VAN 6 - VAN (9-15 SEATS)	BICYCLE 11 - ALL TERRAIN VEHICLE	16-FARM EQUIPMENT 2 17-MOTORHOME	2 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN 99 - UNKNOWN OR HIT/SKIP	_	
1	# of TRAILING UNITS	(ATV / UTV)	17 - IEOTOMORE		12 - PHY 42 MAR BIRISHIN - LL	8	6
	WAS VEHICLE OPERATING IN AUT	TONOMOUS	0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	O HAVEONE	11 12	5 11 12 1
2	MODE WHEN CRASH OCCURRED?		1 - DRIVER ASSISTANCE	4 - HIGH AUTOMATION	7 - UNIKNOWN	10 11 1	10 11 2
	1-YES 2-NO 9-OTHER/UNKN	OWN AUTONOMOUS	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		9 9 3	3 9 9 3 3
		6 - BUS - CHARTER/TOUR	11-FIRE	16 - FARM	21 - MAIL CARRIER		8 4 -
TO I		7 - EUS - INTERCITY		L7 - MOWING	99-OTHER/LINKNOWN		7 5 4
SPECIAL FUNCTION	3 - ELECTRONIC RIDE SHARING 4 - SCHOOL TRANSPORT	9 - BUS - OTHER		13 - SNOW REMOVAL 19 - Toweng		7 8 5	7 6 5
	5 - BLS - TRANSIT/COMMUTER	10 - AMBULANCE	15 - CONSTRUCTION EQUIPMENT	23-SAFETY SERVICE PATROL			12 12 12
0,1,	1 - NO CARGO BODYTYPE / NOT APPLICABLE	3 - VEHICLE TOWING ANOTHER NOTOR VEHICLE	CHACCIC	3 - POLE	12-CONCRETE MIXER	12	
CARGO		4 - LOGGING	/ nancautalization and how	9 - CARGO TANK LJ-FLAT BED	13-AUTOTRANSPORTER 14-GARBAGE/REFUSE	~ RA ~	A 1
BODY TYPE		7 - 0		II-DUMP	99-OTHER/UNKNOWN	,000,	9 T 3 9 B 3
		4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MOTORTROUBLE	99-OTHER/UNKNOWN	6	
		5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT :	10 - DISABLED FROM PRIOR ACCIDENT			6 6 6
-	200	A 100 Miles				- NO DAMAGE	01 - UNDERCARRIAGE [14]
	CRCSSWALK	3 -INTERSECTION - OTHER 4 - WIDELOCK - MARKED		9 - MEDIAN/CROSSING ISLAND LO-DRIVEWAY ACCESS	12-FIRST RESPONDER AT INCIDENT SCENE	□-TOP [13]	-ALL AREAS [ 15 ]
NON-MOTORIST LOCATION	2-INTERSECTION - UNMARKED CRCSSWALK	CROSSWALK	8 - SIDEWALK	11 - SHARED USE PATHS OR	99-OTHER/UNKNOWN		
AT IMPACT		5 -TRAVEL LANE - OTHER LICENTE		TRAILS		LI - UNI	IT NOT AT SCENE [16]
	2 - NON-COLLISION	1 - STRAIGHT AHEAD 2 - BACKING		13 - NEGOTIATING A CURVE 14 - Entering or Crossing	18-APPROACHING OR LEAVING VEHICLE	INITIA	AL POINT OF CONTACT
4	3-STRIKING	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	SPECIFIED LOCATION	19-STANDING	0 - NO DAMA	
ACTION	4- STRUCK PRE-CRASH 5- BOTH STRIKING ACTIONS	4 - OVERTAKING/PASSING	TO THINKES	15 - WALKING, RUNNING JOGGING, PLAYING	20 - OTHER NON-YOTORIST 21 - STANDING OUTSIDE	0 8 1-12 - REFER	RTO UNIT 15-VEHICLE NOT AT SCENE AM 99-UNKNOWN
	& STRUCK	6 - MAKING LEFT TURN	118 1 1020 1 16	16 - WORKING	DISABLED VEHICLE	13 - TOP	
4	9-OTHER / UNKNOWN		IL ON FENELOS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		TRAFFIC
		7-LEFT OF CENTER  8-FOLLOWING TOO CLOSE / ACC	DARWER BREITING	17 - VISION OBSTRUCTION 13 - OPERATING DEFECTIVE	21 - LYING IN ROADWAY 22 - NOT DISCERNIBLE	TRAFFICWAY FLOW	TRAFFIC CONTROL
0,1,	3-RAN RED LIGHT	9-IMPROPER LANE CHANGE	14-STOPPED OR PARKED	EQUIPMENT	23 - OPENING DOOR INTO	1 - CNE-WAY 2 - TWO WAY	1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN
		10 - IMPROPER PASSING 11 - DROVE OFF ROAD	15 - SWERVING TO AVOID	19-LOAD SHIFTING/FALLING/ SPILLING	ROADWAY  99-OTHER IMPROPER ACTION	2 2 - TWO-WAY	2 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL
CIRCUMSTANCE	3	12 - IMPROPER BACKING	16 - WRONG WAY	20 - IN PROPER CROSSING	77 OTTER SHO NOT E PROFITO	# of THROUGH LANES	RAIL GRADE CROSSING
	OF EVENTS					ON ROAD	1 - NOT INVOLVED
2 2 0	1 - OVERTURN/ROLLCVER	6 - EQUIPMENT FAILURE	EVENTS 11 - CROSS CENTERLINE -	16 - RAILWAY VEHICLE	22 - WCRK ZONE MAINTENANCE	4	2 - INVOLVED-ACTIVE CROSSING 3 - INVOLVED-PASSIVE CROSSING
1 2 0	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	17-ANIMAL — FARM	EQUIPMENT	HMIT , MC	DN-MOTORIST DIRECTION
21		8 - RAN OFF ROAD RIGHT	12 - DOWNHILL RUNAWAY	16-ANIMAL — DEER 19-ANIMAL — OTHER	23-STRUCK BY FALLING, SHIFTING CARGO CR	UNII / NO	1 - NORTH 5 - NORTHEAST
	5 - CARGO / EQUIPMENT	10-CROSS MEDIAN	13 - OTHER NEW COLLISION	20 - MOTOR VEHICLE IN TRANSPORT	ANYTHING SET IN MOTION BY A MOTOR VEHICLE	2	2 - SOUTH 6 - NORTHWEST
3L	LOSS OR SHIFT		15-PEDALCYCLE	21 - PARKED MOTOR VEHICLE	24-OTHER MOVABLE CBJECT	FROM 2 TO	4 - WEST 8 - SOUTHWEST
	25 - IMPACT ATTENUATOR	COLLISIO 31 - GUARDRAIL END	ON WITH FIXED OBJECT 37-TRAFFIC SIGN POST	- STRUCK 43-CURB	50 - WORK ZONE MAINTENANCE		9 - OTHER/UNKNOWN
4	/ CRASH CUSHIGN	32 - PORTABLE BARRIER	38-OVERHEAD SIGN POST	44-DITCH	EQUIPMENT	UNIT SPEED	DETECTED SPEED
51 1 4	STRUCTURE	33 - MEDIAY CABLE BARRIER 34 - MEDIAN GUARDRAIL	CHARRET	45 - EMBANKMENT 46 - FENCE	51-WALL 52-BUILDING	0,0,0	1 - STATED / ESTIMATED SPEED
	27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	BARRIER 35 - MEDIAN CONCRETE	40 - UTILITY POLE	47 - MAILBOX	53 - TUNNEL	0,0,0	2 - CALCULATED / EDR
6	29-BRIDGE RAIL	BARRIER	OR SUPPORT	48 - TREE 49 - FIRE HYDRANT	54-OTHER FIXED OBJECT 99-OTHER/UNKNOWN	POSTED SPEED	3 - UNDETERMINED
. 1	30-GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT			2 5	
	FIRST HARMFUL EVEN	T MOST	HARMFUL EVENT				

OHIO DES	Software Motorist / Non-Motorist								LOCAL REPORT NUMBER				
			) IX = 1 <b>V</b>	1010	W12				2,0,2,0,-,0,0,1,7,2,6,4,				
UNIT #	NAME: LAST, F								DATE OF BIRTH AGE GENDER				
		AJIBOLA, CARO	DLINI	E						1,7,1,9		7.9	F_
540 S		ST 605, Kent, O	H 442	40					CONTACT	PHONE - INCLUDE AREA CU	DE		
INJURIES	INJURED I	EMS AGENCY (NAME)		INJURED	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-COA		AIR BAG US	AGE EJECTION	TRAPPED
	WY L	ACTUOT NUMBER		-				0,4	MC HELMET 0, 1, 1, 1				1
OL STATE O, H	OPERATOR L	ICENSE NUMBER		331.1	FENSE CHARGED LOCAL OFFENSE DESCRIPTION OF CODE							111	
O, H,	ENDORSEMENT	RESTRICTION SELECT	DETOS TOR	IVER		HOL / DRUG SUSPE	X	Signals Before		OHOL TEST	62305	) Rug test(s	
	SELECT UPTO 2			STRACTED	prompt of	COHOL MAF		CONDITION	STATUS TY				T SELECT UP TO 4
			الل	1	01	THER DRUG		1	1 1		1	1	
UNIT #	NAME: LAST, F		-							DATE OF BIRTH		AGE	GENDER
0,2		RS, BRITTANY,	FLOI	RA					0 2	2 0 1 9	9 4	2,6	F
ADDRESS:	STREET, CITY, STA	ATE, ZIP PECT ST , Raveni	no Thur	, OH	4424				CONTACT F	PHONE - INCLUDE AREA CO	OE.		
INJURIES		EMS AGENCY (NAME)	ia iw	4 /		MEDICAL FACILITY	LAME OF	SAFETY EQUIPMENT	L	PEATING BACITION	T 410 040 110	ar Ingana	]
ADDRESS: 5650 S INJURIES OL STATE O, H,	TAKEN BY	THE RELIEF WANTE		INJURED	AKEN IO.	MEDICAL PACILITY	HAME, CLIFE	USED 0 4	DOT-COM		AIR BAG US	AGE EJECTION	TRAPPED 1
OL STATE	OPERATOR L	ICENSE NUMBER		OFFEN:	SE CHAR	RGED	LOCAL	OFFENSE DESC	RIPTION		CITATIO	N NUMBER	
O, H,													
E OL CLASS	SELECT UP TO 2	RESTRICTION SELECT	DIS	IVER STRACTED		COHOL / DRUG SUSPE	CTED RIJUANA	CONDITION	STATUS TY	OHOLTEST PE VALUE S		RUG TEST(S	T SELECT UPTO 4
4			BY	1		THER DRUG	CIDUANA	. 1	1	1	1	1	
UNIT#	NAME: LAST, F	CONTRACTOR OF THE PERSON AS A						DATE OF BIRTH			AGE GENDER		
ADDRESS:	STREET, CITY, ST	ATE, ZIP							CONTACT	PHONE - INCLUDE AREA CO	OE 30		
										1 1 1			
ADDRESS:	INJURED TAKEN	EMS AGENCY (NAME)		INJURED	AKENTO	MEDICAL FACILITY	NAME CITY)	SAFETY EQUIPMENT USED	DOT-Con		AIR BAG US	AGE EJECTION	TRAPPED
OL STATE		ICENSE NUMBER		OFFEN	SE CHAR	ocen	LOCAL	OFFENSE DESC	MC HEL	.MET			
OL STATE	OI ENATOR E.	TO END END EN		OFFER.	JE GRAN	NGED.	CODE	OFFENSE DESC	KIPIIUN		CITATIO	N NUMBER	
E OL CLASS	ENDORSEMENT	RESTRICTION SELECT		IVER	ALCO	HOL / DRUG SUSPE	CTED	CONDITION	ALC	OHOL TEST		RUG TEST(S	
	Selection 100		BY	STRACTED	Al	COHOL MAR	ANAULIS		STATUS TY	PE VALUE S	STATUS	YPE RESUL	T SELECT WE FOR
INII	JRIES	SEATING DOSITION		ALD DAC	01	THER DRUG	SHOWS	OL DESTOLO					السالسال
1-FATAL	INIES	1-FRONT-LEFT SIDE	1 - NOT DE	PLOYED		OL CLASS 1-CLASS A		OL RESTRIC		DRIVER DISTRACT  1-NOT DISTRACTED	per planta de la companya de la comp	TEST STA	ATUS
2 - SUSPECTED 3 - SUSPECTED	SERIOUS INJURY	(MOTORCYCLE DRIVER) 2 - FRONT - MIDDLE	2 DEPLOY			2 - CLASS B		2 - CDL INTRASTAT		2 - MANUÁLLY OPERATING ELECTRONIC COMMUNI	AN 2-	TEST REFUSED	
4 - POSSIBLE IN		3 - FRONT - RIGHT SIDE	3-DEPLOY 4-DEPLOY	YED BOTH FRO	NT/SIDE	3 - CLASS C 4 - REGULAR CLASS		3 - CORRECTIVE LE 4 - FARM WAIVER	NSES	DEVICE (TEXTING, TYP) DIALING)	ale 2-	TEST GIVEN, CON SAMPLE / UNUS	NTAMINATED ABLE
5 - NO APPAREN	IT INJURY	4 - SECOND - LEFT SIDE (MOTORCYCLE PASSENGER)	5 - NOT API			(OHIO = D) 5 - M/C MOPED ONLÝ		5 - EXCEPT CLASS		3 -TALKING ON HANDS-FRE	LL.	TEST GIVEN, RES	Company of the last of the las
THE RESERVE OF THE PARTY OF THE	TAKEN BY	5 - SECOND - MIDDLE 6 - SECOND - RIGHT SIDE	9 DEPLOY	MENT UNKNO	WN	6 - NO VALID OL		6 - EXCEPT CLASS & GLASS B BUS		COMMUNICATION DEVICE  4 TALKING ON HAND-HELI		NKNOMN	20512
1 - NOT TRANSP /TREATED AT		7-THIRD - LEFT SIDE	E	JECTION		OL ENDORSEM	MENT	7 - EXCEPT TRACTO 8 - INTERMEDIATE	ACCOUNT OF THE PARTY OF	COMMUNICATION DEVICES  5 OTHER ACTIVITY WITH	AN A	LCOHOL TE	ST TYPE
2 - EMS		(MOTORCYCLE SIDE CAR) 8-THIRD - MIDDLE	1 - NOT EJE	CONTRACTOR OF THE PARTY OF		H - HAZMAT		RESTRICTIONS		ELECTRONIC DEVICE	1.	NONE BLOOD	
3-POLICE 9-OTHER/UNK	CNOWN	9 - THIRD - RIGHT SIDE	2 - PARTIA 3 - TOTALL	LLY EJEGTED Y EĴECTED		M - MOTORCYCLE P - PASSENGER		9 - LEARNER S PER RESTRICTIONS	MIT	6 - PASSENGER 7 - OTHER DISTRACTION	ALL PLANTS	URINE	
SAFFTY F	QUIPMENT	10-SLEEPER SECTION OF TRUCK GAB	4 NOT API	PLICABLE		N-TANKER		10 - LIMITED TO DAY		INSIDE THE VEHICLE  8-OTHER DISTRACTION OF		BREATH OTHER	
1 - NONE USED		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	T	RAPPED		Q - MOTOR SCOOTER  R - THREE WHEEL MO	TORCYCLE	12 - LIMITED - OTHE	STATE OF THE PARTY.	THE VEHICLE		DRUG TEST	TVDE
2 - SHOULDER B 3 - LAP BELT ON		(NON-TRAILING UNIT, BUS, PICK UP WITH CAP)	1 - NOTTRA 2 - EXTRIC			S - SCHOOL BUS		13 - MECHANICAL DI (SPECIAL BRAK	ES HAND .	9-OTHER/UNKNOWN		NONE	
4 - SHOULDER &	LAP BELT USED	12 - PASSENGER IN UNENCLOSED CARGO AREA	MECHA	NICAL MEANS		T DOUBLE & TRIPLET X - TANKER / HAZMAT	IRAILERS	CONTROLS, OR O ADAPTIVE DEVI		1 - APPARENTLY NORMAL	Section of the latest	BLOOD Urine	
5 - CHILD REST		13 - TRAILING UNIT	3 - FREED NON-ME	ECHANICAL M	EANS	GENDER	Fig. 3.	14 - MILITARY VEHIO	The second second second	2 PHYSICAL IMPAIRMENT	4	OTHER	
6 - CHILD REST		14 - RIDING ON VEHICLE EXTERIOR (NON-TRĂILING UNIT)				F-FEMALE		15 MOTOR VEHICLE AIR BRAKES		3 - EMOTIONAL (E.G. DEPRE: ANCRY, DISTURBED)		RUG TEST RI	ESULT(S)
7 - BOOSTER SE	AT	15 - NO N-MOTORIST				M - MALE U - OTHER / UNKNOWN	1	16 - OUTSIDE MIRRO 17 - PROSTHETIC ALI	ESTABLISHED TO SEE	4- ILLNESS 5- FELL ASLEEP, FAINTED	7 14 15 16 16 16	AMPHETAMINES	
8 - HELMET US 9 - PROTECTIVE		99-OTHER/UNKNOWN				C WHICK TORRIDAN		18 - OTHER		FATIGUED, ETC	3	BARBITURATES BENZODIAZEPIN	ŒS
(ELBOW, KINE	EES ETCJ									6- UNDER THE INFLUENCE OF MEDICATIONS / DRUG	S 4-	CANNABINOIDS	
10 - REFLECTIVE 11 - LIGHTING - I	PEDESTRIAN									9- OTHER / UNKNOWN		COCAINE OPIATES/OPIOI	20
/BICYCLE ON 99 - OTHER / UNK											. 7-	OTHER	
- Inchi onn								STEEL DESCRIPTION			B -	<b>NEGATIVE RESU</b>	LTS

V	POPUL BAPETY OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER						
					JO T IDDENIED			2,0,2,0,-,0,0,1,7,2,6,4					
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DATE OF BIRTH AGE GENDER					
ı	. 01	OGUI	NSANYE, BAN	MKALE				0,4,0,6,1,9,9,3,2,7, F					
¥	ADDRESS:	: STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
9	540 S	WATE	R ST ,Kent ,O	H 44240									
8		INJURED	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FAC	HITY (MANE MIY)	SAFETY ENHIDMENT		SEATING POSITION	AID BAC USAGE	Triravian	Iznanasa	
	, 5 ,	TAKEN			THE ONCE THE PARTY TO . INCUIDATE THE	marr (ment, cirr)	USED	DOT-COMPLIANT		AIR BAB USAGE	ESECTION	IRAPPED	
5	100		A				0,4,	- INC HELMET	0 3				
	UNIT#		T, FIRST, MIDDLE	20					E OF BIRTH		AGE	GENDER	
	_02_		ER, CHARLE	22				1,2,1,0,1,9,9,1,2,8, M					
PAN		: STREET, CITY						CONTACT PHONE - INCLUDE AREA CODE					
冒	5650 8	S PROS	SPECT ST ,Ra	venna Twr	,ОН 44266			1					
		INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FAC	ILITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
	_ 5	5 BY							0 3	. 1	1	1 ,	
	UNIT # NAME: LAST, FIRST, MIDDLE							DAT	E OF BIRTH	-	AGE	GENDER	
g	02 SNYDER, DAMON								1,2,0,	1.4	0.5.	M	
ANT	ADDRESS:	: STREET, CITY	STATE, ZIP		0 - 10			CONTACT PHONE					
CUP	5650 S	PROS	PECT ST ,Rav	enna Twn	OH 44266								
00		INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FAC	ILITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR RAG USAGE	FJECTION	TRAPPEN	
	, 5 ,	TAKEN					USED 0.5	MC HELMET	0 4	1	1	1	
	UNIT#	NAME	ST. FIRST. MIDDLE				00		-				
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Ę		STREET CITY						0,2,1,			0 1	M_	
CCUPAN			SPECT ST ,Ray	······································	OH 44266			CONTACT PHONE - INCLUDE AREA CODE					
30				venna i wp				L 1 1	1 1		1	1 1	
		INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FA:	CILITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
	_ 5_						0,6	MC HELMET	0,5	1	1	1_	
	2 545	2000	URIES		EQUIPMENT USED		SEATING POS	ITION		AIR BAG U	SAGE		
	1 - FATA			1 - NONE US VEHICLE	ED - OCCUPANT		T – LEFT SIDE DRCYCLE DRIV	FR)	1 - NOT DE	PLOYED			
			ERIOUS INJURY		ER BELT ONLY USED		T - MIDDLE		2 - DEPLO	YED FRONT			
			INOR INJURY		TONLY USED	3 - FRON	T - RIGHT SIDE		3 - DEPLO	YED SIDE			
		SIBLE INJU		4 - SHOULDI	4 - SECOND'- LEFT SID  ER & LAP BELT USED (MOTORCYCLE PASS								
	5 - NUA	APPARENT	INJURY		ESTRAINT SYSTEM -	(MOTOROTOLE FASC			5 - NOT APPLICABLE				
		INJURED	TAKEN BY	FORWAR	RD FACING 6 - SECOND - RIGHT SI								
	The second second	TRANSPOR			RESTRAINT SYSTEM - 7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE								
	2 EMS	EATED AT S	CENE	REAR FA		ESECTION							
	3 - POL			8 - HELMET	9 - THIRD - RIGHT SIDE								
H		ER / UNKN	OVAZNI		IVE PADS USED			OF TRUCK CAB 2- PARTIALLY EJECTED					
	7-0111				KNEES, ETC.)		ENGER IN OTH O AREA (NON-TI	ER ENCLOSED 3 - TOTALLY EJECTED					
		Sall Edge Comment	NDER	10 - REFLECT	IVE CLOTHING	BUS, F	ICK UP WITH CA						
B	F-FEMA M-MAL				G – PEDESTRIAN		ENGER IN UNE O AREA	NCLOSED	Manager 1	TRAPP	E D		
В		ER/UNKNO	WN	/ BICYCL			LING UNIT	1- NOTTRAPPED					
	99 - OTHER / UNKNOWN				UNKNOWN	14 - RIDIN	G ON VEHICLE	EXTERIOR	2 - EXTRIC	ICATED BY MECHANICAL			
							BASED THE PROPERTY OF THE PERSON OF THE PERS					2010.755/00/00/00/00	
							TRAILING UNIT)		100		CHANIC	A1	
District Co.						15 - NON-	TRAILING UNIT) MOTORIST		100	BY NON-ME	CHANIC	AL	
7	NAME: LA	AST FIRST, MID	DLE			15 - NON-	TRAILING UNIT)	DAT	3 - FREED MEANS	BY NON-ME			
ESS		ST, FIRST, MID	DLE			15 - NON-	TRAILING UNIT) MOTORIST	DAT	3 - FREED	BY NON-ME	AGE	GENDER	
ITNESS		ST FIRST, MID 5: STREET, CITY				15 - NON-	TRAILING UNIT) MOTORIST	DAT	3 - FREED MEANS E OF BIRTH	BY NON-ME			
WITNESS						15 - NON-	TRAILING UNIT) MOTORIST		3 - FREED MEANS E OF BIRTH	BY NON-ME			
	ADDRESS NAME: 1 A		r, state, zip			15 - NON-	TRAILING UNIT) MOTORIST	CONTACT PHONE	3 - FREED MEANS E OF BIRTH	BY NON-ME			
	ADDRESS NAME: 1 A	S: STREET, CITY	r, state, zip			15 - NON-	TRAILING UNIT) MOTORIST	CONTACT PHONE	3 - FREED MEANS E OF BIRTH	BY NON-ME	AGE	GENDER	
	ADDRESS NAME: 1 A	S: STREET, CITY	C, STATE, ZIP			15 - NON-	TRAILING UNIT) MOTORIST	CONTACT PHONE	3 - FREED MEANS E OF BIRTH  - INCLUDE AREA CO  B OF BIRTH	BY NON-ME	AGE	GENDER	
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OHIO DE OF Puai	COUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER					
			2,0,2,0,-,0,0,1,7,2,6,4,									
UNIT#		T, FIRST, MIDDLE					DATE OF BIRTH AGE GENDER					
02	SIN Y D	ER, DEVON					1 1 2 3 2 0 1 5 0 4 M					
		SPECT ST,Ra	wanna Tua	оп 44266			CONTACT PHONE	- INCLUDE AREA CO	OE .			
INJURIES	INJURED	EMS AGENCY (NAME)	ivenna i w	INJURED TAKEN TO: MEDICAL FACIL	rest (man man)	SAFETY EQUIPMENT		legavine seeman	Lunana	1 1		
, 5	TAKEN BY	LING ABERT MAMES		INJURED TAKEN TO: MEDICAL PACI	LITY (NAME, CITY)	USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG		TRAPPED	
UNIT #	NAME. LAS	T, FIRST, MIDDLE				0,5		0,6				
CMIT	MAME: LAS	I, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER	
ADDRESS	: STREET, CITY,	STATE ZIP		***			CONTACT PHONE	- INCLUSE AREA OF				
ADDRESS							CONTROL PHONE	- INCLUDE AREA CL	UE			
INJURIES		EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACIL	LITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED	
	TAKEN					USED	MC HELMET					
UNIT#	NAME: LAS	T, FIRST, MIDDLE	-100		-		DAT	E OF BIRTH		AGE	GENDER	
, ,											GENDER	
ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CL	30			
ADDRESS								1		1		
INJURIES	INJURED TAKEN	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACIL	LITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED	
	ВУ					USED	MC HELMET					
UNIT#	NAME: LAS	T, FIRST, MIDDLE			-	h	DAT	E OF BIRTH		AGE	GENDER	
ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE					
		74-1-1-17										
INJURIES	INJURED TAKEN BY	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACIL	LITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAG	E EJECTION	TRAPPED	
		love c			11	بيا	MC HELMET			ــــا		
1 - FATA	Maria de la compansión de	JRIES	1 - NONE US	EQUIPMENT USED		SEATING POS T—LEFT SIDE	ITION	1 NOT DE	AIR BAG L	JSAGE	ar Nasiavi	
MAN COMM		RIOUS INJURY		OCCUPANT	The state of the s	ORCYCLE DRIV	ER)	1 - NOT DE	PLOYED YED FRONT			
1000	The same of the	NOR INJURY	2 - SHOULDI	R BELT ONLY USED		T - MIDDLE		3 - DEPLO				
4 - POS	SIBLE INJU	RY	3 - LAP BEL		No. of Concession, Name of Street, or other Designation, or other	T – RIGHT SIDI ND – LEFT SIDI		4 - DEPLO				
5 - NO A	PPARENT	INJURY		R & LAP BELT USED		ORCYCLE PASS	ENGER)	FRONT				
TELES	INJURED	TAKEN BY		5 - CHILD RESTRAINT SYSTEM - 5 - SECOND 6 - SECOND 6 - CHILD RESTRAINT SYSTEM - 7 - THIRD - 7 - THIRD - 5 - SECOND 5 - SECOND 5 - SECOND 6 - SE			DE	5 - NOT APPLICABLE				
	TRANSPOR		ECT STALLSCADE IF THO HOPE WATER					9 - DEPLOYMENT UNKNOWN				
2 - EMS	EATED AT S	CENE	(구시) 등 전기 (10ml chap) 에 (10ml chap) (10ml			ORCYCLE SIDE D – MIDDLE	CAR)	EJECTION				
3 - POL			SMALL EXTENDED	8 - HELMET USED 9 - THIRD - RIGH				1 NOT EJECTED				
Allen Statute	ER / UNKNO	)WN	THE PERSON NAMED IN	IVE PADS USED	USED 10 - SLEEPER SECTION 11 - PASSENGER IN 0TH			2 - PARTIALLY EJECTED  3 - TOTALLY EJECTED				
	GEN	NDER		KNEES, ETC.)	CARG	O AREA (NON-T	RAILING UNIT,		- NOT APPLICABLE			
F-FEMA	ALE .			IVE CLOTHING		ICK-UP WITH CAI ENGER IN UNE		E STATE OF THE STA	TRAPP	ED		
M - MAL			/ BICYCL	G – PEDESTRIAN E ONLY	CARG	OAREA	1 - NOT TRAPPED					
U-01HE	R/UNKNO	WN	99 - OTHER /	JNKNOWN		LING UNIT IG ON VEHICLE	EXTERIOR	2 - EXTRICATED BY MECHANICAL				
					(NON-	TRAILING UNIT)		MEANS		TOU A NITO		
					15 - NON-I	NOTORIST R/UNKNOWN		MEANS	BY NON-M	LCHANIC/	IL.	
NAME: LA	ST, FIRST, MIDD	LE	Section of the last		7,111		DAT	E OF BIRTH		AGE	GENDER	
ADDRESS								1 1 1	, ,			
ADDRESS	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE			
										1		
	ST, FIRST, MIDD	t E					DAT	E OF BIRTH		AGE	GENDER	
Annarce	STREET, CITY,	STATE 710		7			CONTACT CUC					
ADDRESS		to   b.11'					CONTACT PHONE	- INCLUDE AREA CO	DE			
NAME: LAS	ST, FIRST, MIDD	LE			-	-	DAT	E OF BIRTH	-	AGE	GENDER	
							, ,			AGE.	GLADEK	
ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO.	DE			
								1		1 1		
									and the same of th			