OF PUBLIC SAFETY TRAFFIC CRASH	LOCAL REPORT NUMBER*						
PHOTOS TAKEN OH-2 OH-3	$2 \cdot 0 \cdot 2 \cdot 2 \cdot 2 \cdot - \cdot 0 \cdot 0 \cdot 0 \cdot 0 \cdot 7 \cdot 1 \cdot 6 \cdot 6$						
SECONDARY CRASH	REPORTING AGENCY NAME*		NCIC*	HIT/SKIP 1 - SOLVED	NUMBER OF UNITS	UNIT IN ERROR 98 - ANIMAL	
PRIVATE PROPERTY	City of Kent Police	6   7   0   3	L 2 - UNSOLVED	0 2 0	2 99 - UNKNOWN		
COUNTY* LOCALITY* LOCATION: CITY 1 - CITY 2 - VILLAGE Kont	CRASH DATE / TIME*  CRASH SEVERITY  1 - FATAL						
3-TOWNSHIP TENT	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DE		- SERIOUS INJURY SUSPECTED	
S-SOUTH	HAYMAKER WY		PK	65 TO 57 TO 5	3	- MINOR INJURY	
W-WEST	REFERENCE ROAD NAME (ROAD,	MILEPOST, HOUSE #)	ROAD TYPE	_4_11_5_1_ LONGITUDE DE		SUSPECTED - INJURY POSSIBLE	
S - SOUTH E - EAST	MAIN		$\mathbf{S} \cdot \mathbf{T}$		5	- PROPERTY DAMAGE	
REFERENCE POINT DIRECTION	ROUTE TYPE	ROAD TYPE	<u> </u>	81103777	NTERSECTION RELATE	ONLY	
1-INTERSECTION FROM REFERENCE N - NORTH IR -	- INTERSTATE ROUTE(TP) AL	- ALLEY HW- HIGHWAY F	RD - ROAD		RSECTION OR ON APPROA		
3-HOUSE # E-EAST	TEDERAL OS ROOTE		SQ - SQUARE ST - STREET	M WITHIN INTE	RCHANGE AREA NUN	4_IBER OF APPROACHES	
DISTANCE DISTANCE CR.	NUMBERED COUNTY ROUTE CR		TE - TERRACE		ROADWAY		
Ontil of meriodic	NUMBERER TOWNSHIP		TL - TRAIL WA - WAY	ROADWAY DIV	IDED		
3-YARDS	HE	- HEIGHTS PL - PLACE		ROADWAY DIV	IDED		
LOCATION OF FIRST HARMFUL EVEN 1 - ON ROADWAY 9 - CROSSOVER		NER OF CRASH COLLISION/IMPA COLLISION 4-REAR-TO-REAR	СТ	DIRECTION OF TRAVE		NTYPE	
0 1 2-ON SHOULDER 10-DRIVEWAY	ALLEY ACCESS 6 BET	VEEN 5-BACKING		N - NORTH S - SOUTH	( < 4 FEET		
4 - ON ROADSIDE 12-SHARED US	VEHI	CLES IN 6-ANGLE VSPORT 7-SIDESWIPE, SAM	E DIRECTION	E - EAST W - WEST	2 - DIVIDED F (≥4 FEET	FLUSH MEDIAN ( )	
5-ON GORE TRAILS 6-OUTSIDE TRAFFIC WAY 13-BIKE LANE	2 - REAF 3 - HEAG	[18] [18] [18] [18] [18] [18] [18] [18]				DEPRESSED MEDIAN RAISED MEDIAN	
7 - ON RAMP 14-TOLL BOOT	Н	y on y one work			(ANY TYP 9 - OTHER/UN		
8-OFF RAMP 99-OTHER/UN		LOCATION OF ODACH IN MO	DIV ZONE	CONTOUR	CONDITIONS	SURFACE	
	WORK ZONE TYPE LANE CLOSURE	1 - BEFORE THE 1ST		1 1	2	2	
3-	LANE SHIFT/CROSSOVER WORK ON SHOULDER	WARNING SIGN 2 - ADVANCE WARNIN	NG AREA	1 - STRAIGHT LEVEL	1 - DRY	1-CONCRETE	
LAW ENFORCEMENT PRESENT	OR MEDIAN INTERMITTENT OR MOVING WORK	3 - TRANSITION AREA 4 - ACTIVITY AREA	4	2 - STRAIGHT GRADE	2 - WET	2 - BLACKTOP, BITUMINOUS,	
The state of the s	OTHER	5 - TERMINATION AR	EA	3 - CURVE LEVEL 4 - CURVE GRADE	3 - SNOW 4 - ICE	ASPHALT	
LIGHT CONDITION	WEATHE	R		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT,	3 - BRICK/BLOCK 4 - SLAG, GRAVEL,	
1 - DAYLIGHT  1 2 - DAWN/DUSK	1-CLEAR 0 4 2-CLOUDY	6 - SNOW 7 - SEVERE CROSSWINDS			OIL, GRAVEL  6 - WATER (STANDING,	STONE	
3 - DARK - LIGHTED ROADWAY	3 - FOG, SMOG, SMOKE	8 - BLOWING SAND, SOIL, DIRT	T, SNOW MOVING)				
4 - DARK – ROADWAY NOT LIGHTED 5 - DARK – UNKNOWN ROADWAY LIGHTING	4 - RAIN 5 - SLEET, HAIL	9 - FREEZING RAIN OR FREEZI 99 - OTHER / UNKNOWN	ING DRIZZLE		7 - SLUSH 9 - OTHER/UNKNOWN		
9 - OTHER / UNKNOWN							
NARRATIVE					A	Indicate the north direction with	
Unit 1 was West bound on Hay	ymaker Pkwy at W.	Main St.			4	an "N" on the compass diagram.	
Unit 2 was South bound on V	V. Main St., entering	the					
intersection of W. Main and I	Havmaker Pkwy. Un	it 2					
stated he ran the red light an	•			/////	*		
intersection. Unit 2 said he tr	••	<u></u>	W. MAIN S	111	7	NOT TO SOALE	
because he was too far into th		1		HAY	MAKER PKWY.		
		1		TRAFFIC SIGNAL &			
then entered the intersection	AND THE RESERVE OF THE SECOND						
unit 2, but still struck unit 2.	Chere De						
for red light.	/	/ / /3					
				68			
Ptl. Womack #258							
CRASH REPORTED DATE / TIME	DISPATCH DATE / TIME	ARRIVAL DATE / TIME		SCENE CLEARED I		POLICE AGENCY	
[0+5+0+6+2+0+2+2+1+1+8+3+8+][0+5+0+6+2+0+2+2+1+1+8+3+9+][0+5+0+6+2+0+2+2+1+1+8+4+1+1][0+5+0+6+2+0+2+2+1+1+9+2+6+1+1+1+1+1+1+1+1+1+1+1+1+1+1+1+1+1+1							
TOTAL TIME OTHER TOTA ROADWAY CLOSED INVESTIGATION TIME MINUT	OFFICER'S NAME* Womack, Alec	owen, J	cer's NAME* ared	냚	SUPPLEMENT		
	OFFICER'S BAD		CHECKED	BY OFFICER'S BADGE N	UMBER*	(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO COPS)	
0 0 0 0 3 0 0 7	7 2 5 8		2 1	4			

LOCAL REPORT NUMBER

						$\begin{bmatrix} 2 & 0 & 2 & 2 & - & 0 \end{bmatrix}$	0,0,0,7,1,6,6,	
UNIT #	OWNER NAME: LAST, FIR			OWNER PHONE: INC.	UDE AIEA COCE ( SAME AS DRIVER)		DAMAGE	
0 1 1	HARTZLER, ZACI DDRESS: STREET, CITY, STATE			DAMAGE SCALE  1 - NONE 3 - FUNCTIONAL DAMAGE				
4	IRFIELD DR , Moga	Accessed to the second				4 2-MINOR DAN		
COMMER	CIAL CARRIER: NAME, ADD			COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	9	- UNKNOWN	
- 2010/2010/00/20						DAN	MAGED AREA(S)	
LP STATE	LICENSE PLATE #	VEHICLE	IDENTIFICATION #	VEHICLE YE	AR VEHICLE MAKE		TE ALL THAT APPLY	
$\mathbf{O}_{\perp}\mathbf{H}_{\perp}$	JLS5270		$P_{\perp}P_{\perp}6_{\perp}E_{\perp}A_{\parallel}0_{\perp}0_{\perp}1_{\perp}$	9 7 8 2 0 1	4 Audi	12	12	
X INSURA	INSURANCE COMP	PANY II	NSURANCE POLICY #	COLOR	VEHICLE MODEL	12	11 12	
▲ VERIF		8:	26393930	BLK	S5	10 11 1 2	10 11 1 1 2	
	TYPE OF USE	IN EMERGENCY	US DOT #	TOWED BY: COMPAN Bakers Towing	YNAME	9 10 2 3	10, 2	
COMME	ERCIAL GOVERNMENT	IN EMERGENCY RESPONSE	HICLE WEIGHT GVWR/GCWR	1	US MATERIAL			
INTER	LOCK HIT/SKIP UNI	#UCCUPANTS	1 - ≤10KLBS.	RELEASED	CLASS # PLACARD ID #	8 7 5 4	8 7 5 4	
EQUIP	PED MINISTER SIN	.   0 2 1	2 - 10,001 - 26K LBS 3 - >26K LBS.	. D PLACARD		7 6 5	12 7 6	
	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	12 - GOLF CART	18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	6 11	12 6	
1011	2 - PASSENGER VAN (MINIVAN)		13-SNOWMOBILE	19-BUS (16+ PASSENGERS)	24 - WHEELCHAIR (ANY TYPE)	10	11 1 2	
UNITTYPE	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE	14 - SINGLE UNIT TRUCK	20 - OTHER VEHICLE	25 - OTHER NON-MOTORIST	<i>_</i>	10 2	
	5 - CARGO VAN	10 - MOPED OR MOTORIZED BICYCLE	15 - SEMI-TRACTOR 16 - FARM EQUIPMENT	21 - HEAVY EQUIPMENT 22 - ANIMAL WITH RIDER OR	26 - BICYCLE 27 - TRAIN		8 11 4	
	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 6 5 4	
00	# of TRAILING UNITS	(ATV/UTV)				12 7	6 5 12	
00			D. NO AUTOMATICAL	2 COMPLETABLE ASSESSMENT	O HINNADAN	11 12	6 11 12 1	
ы >	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED		0 - NO AUTOMATION 1 - DRIVER ASSISTANCE	3 - CONDITIONAL AUTOMATION 4 - HIGH AUTOMATION	A - MUKUNMU	10 11 1 2	10 11 1 2	
2	1-YES 2-NO 9-CTHER/UNK	Statement   March   Ma	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		10 2	10 2	
	N. NAME	MODE LEVEL	O. C.			9 3 3	9 9 3	
	1 - NONE 2 - TAXI	6 - BUS - CHARTER/TOUR 7 - BUS - INTERCITY	11 - FIRE 12 - MILITARY	16-FARM 17-MOWING	21 - MAIL CARRIER 99 - OTHER / UNKNOWN	7 5 74	7 5 74	
0   1	3 - ELECTRONIC RIDE SHARING		13 - POLICE	18-SNOW REMOVAL	77-01 HER / UNKNOWN	6	6	
FUNCTION	4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14 - PUBLIC UTILITY	19-TOWING		6	6	
	5 - BUS - TRANSIT/COMMUTER	10-AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL			12 12 12	
	1 - NO CARGO BODYTYPE	3 - VEHICLE TOWING ANOTHER	5 - INTERMODAL CONTAINER	8 - POLE	12 - CONCRETE MIXER	12		
CARGO	/ NOT APPLICABLE 2 - BUS	MOTORVEHICLE	CHASSIS	9 - CARGO TANK	13-AUTOTRANSPORTER	RA /		
BODY	2 - 805	4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX 7 - GRAIN/CHIPS/GRAVEL	10-FLAT BED	14 - GARBAGE/REFUSE	9 8 3 9	3 9 7 3 9 🕸 3	
TYPE	Stort Control of the State of t	0.41922.033.03	- Graning its distinct C	11-DUNP	99-OTHER/UNKNOWN			
	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	6	⊕	
	2 - HEAD LAMPS 3 - TAIL LAMPS	5 - STEERING 6 - TIRE BLOWOUT	8 - TRAILER EQUIPMENT DEFECTIVE	10 - DISABLED FROM PRIOR ACCIDENT			6 6 6	
						- NO DAMAGE [	UNDERCARRIAGE [14]	
r r r	1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER 4 - MIDBLOCK - MARKED	6 - BICYCLE LANE 7 - SHOULDER / PRADSIDE	9 - MEDIAN/CROSSING ISLAND 10 - DRIVEWAY ACCESS	12 - FIRST RESPONDER AT INCIDENT SCENE	□-TOP [13]	- ALL AREAS [ 15 ]	
NON-MOTORIS	T 2-INTERSECTION - UNMARKED	CROSSWALK	0000044414		99 - OTHER / UNKNOWN	1 <u></u>		
AT IMPACT		5 -TRAVEL LANE - OTHER LOCATION		11-SHARED USE PATHS OR TRAILS		- UNIT	NOTAT SCENE [16]	
	1-NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18-APPROACHING	INITIAL	POINT OF CONTACT	
3	2 - NON-COLLISION	2 - BACKING	8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING	OR LEAVING VEHICLE	0 - NO DAMAGE		
		3 - CHANGING LANES 4 - OVERTAKING/PASSING	9 - LEAVING TRAFFIC LANE	SPECIFIED LOCATION 15 - WALKING RUNNING.	19-STANDING 20-OTHER NON-MOTORIST		O UNIT 15 - VEHICLE NOT AT SCENE	
AUTON	5 - BOTH STRIKING ACTIONS	5 - MAKING RIGHT TIEN	10 - PARKED 11 - SLOWING OR STOPPED	JOGGING, PLAYING	21 -STANDING OUTSIDE	DIAGRA	M 99 - UNKNOWN	
	& STRUCK	6 - MAKING LEFT TURN	INTRAFFIC	16 - WORKING	DISABLED VEHICLE	13-T0P		
	9-OTHER/UNKNOWN		12 - DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		TRAFFIC	
	1-NONE	7 - LEFT OF CENTER	DADI/ED DOCITION	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL	
1927	2 - FAILURE TO YIELD 3 - RAN RED LIGHT	8 - FOLLOWING TOO CLOSE / ACDA 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 1	4 - RAN STOP SIGN	10 - IMPROPER PASSING	ILLEGALLY	19-LOAD SHIFTING/FALLING/	ROADWAY	2 2 - TWO-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL	
CONTRIBUTION	•	11 - DROVE OFF ROAD	15 - SWERVING TO AVOID 16 - WRONG WAY	SPILLING 24 IMPROPER CROSSING	99-OTHER IMPROPER ACTION		35 Fee (SSSHUC) S AMMOND SQUUDAN ARCOND STOCKED (MINISTER)	
	6-IMPROPERTURN	12 - IMPROPER BACKING	AU INORU IIAI	20 - IMPROPER CROSSING		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING  1 - NOT INVOLVED	
CIRCUMSTANCE  SEQUENCI	E OF EVENTS		Nan 2211			4	2 - INVOLVED-ACTIVE CROSSING	
	1 - OVERTURNIROLLOVER	6 - EQUIPMENT FAILURE	NON-COLLISION 11-CROSS CENTERLINE —	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING	
1 2 0	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	17 - ANIMAL — FARM	EQUIPMENT	HAIT / NON	MOTODICT DIDECTION	
5000 to 10	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	TRAVEL  12 - DOWNHILL RUNAWAY	18-ANIMAL - DEER	23 - STRUCK BY FALLING, SHIFTING CARGOOR	UNII / NON	-MOTORIST DIRECTION  1 - NORTH 5 - NORTHEAST	
2	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	13 - OTHER NON-COLLISION	19-ANIMAL — OTHER 20-MOTOR VEHICLE IN	ANYTHING SET IN MOTION	_	2 - SOUTH 6 - NORTHWEST	
6225 VI VI	5 - CARGO / EQUIPMENT LOSS OR SHIFT	10 - CROSS MEDIAN	14-PEDESTRIAN	TRANSPORT	BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM L3 TO L		
3	20 man (1900 1900 1900 1900 1900 1900 1900 190	COLLISIO	15-PEDALCYCLE N with Fixed object	21 - PARKED MOTOR VEHICLE			4 - WEST 8 - SOUTHWEST	
	25-IMPACT ATTENUATOR	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43-CURB	50 - WORK ZONE MAINTENANCE		9 - OTHER / UNKNOWN	
4	/ CRASH CUSHION	32 - PORTABLE BARRIER	38 - OVERHEAD SIGN POST	44 - DITCH	EQUIPMENT	UNIT SPEED	DETECTED SPEED	
	26-BRIDGE OVERHEAD STRUCTURE	33 - MEDIAN CABLE BARRIER 34 - MEDIAN GUARDRAIL	39 - LIGHT / LUMINARIES SUPPORT	45 - EMBANKMENT 46 - FENCE	51 - WALL 52 - BUILDING		1 - STATED / ESTIMATED SPEED	
5	27 - BRIDGE PIER ORABUTMENT	BARRIER	40 - UTILITY POLE	47 - MAILBOX	53 - TUNNEL	0 4 5	2 - CALCULATED / EDR	
41	28-BRIDGE PARAPET 29-BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT	48-TREE	54 - OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED	
0	30-GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER	42 - CULVERT	49-FIRE HYDRANT	99 - OTHER / UNKNOWN			
1	FIRST HARMFUL EVEN	T 1 I MOSTH	ARMFUL EVENT			3 5		

LOCAL REPORT NUMBER

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

							7, 0, 0, 0, 7, 1, 0, 0,				
UNIT #	OWNER NAME: LAST, FIRS	- 1 <del>7</del> 7	R)	OWNER PHONE: INC	LUDE AFEA CODE ( SAME AS DRIVER)	DAMAGE					
0   2	MONCZEWSKI, C			L		DAMAGE SCALE  1 - NONE 3 - FUNCTIONAL DANAGE					
1	DDRESS: STREET, CITY, STATE	Parameter State of the State of	44010			4 2 - MINOR DAMAGE 4 - DISABLING DAMAGE					
	USHWOOD CIR ,BI		44212	1 -		Total and the second se	MAGE 4 - DISABLING DAMAGE				
COMMER	CIAL CARRIER: NAME, ADDR	RESS, CITY, STATE, ZIP		COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE						
<u> </u>	140				<del></del>	DAMAGED AREA(S) INDICATE ALL THAT APPLY					
LP STATE	LICENSE PLATE #		LE IDENTIFICATION #	VEHICLE YE		INDICA	ALE THAT AFFLI				
$\lfloor \mathbf{O}_{\perp} \mathbf{H}_{\perp}$	HDN7344		5   R   9   5   N   5   5   5			12 1	11 12				
X INSURA	NCE INSURANCE COMP	roundered	INSURANCE POLICY #	COLOR	VEHICLE MODEL	12	12				
VERIF)			9476532E2435D	RED	SEBRING	10 11 1 2	10 11 1 2				
<b>П</b>	TYPE OF USE	IN EMERGENCY	US DOT #	City Service	IY NAME	10 2	10 2 -				
COMME	RCIAL GOVERNMENT	■ RESPONSE L		1	OUS MATERIAL	9 9 3	, , , , , , ,				
INTER	LOCK	#OCCUPANTS	/EHICLEWEIGHT GVWR/GCWR 1 - ≤10K LBS.	MATERIAL	CLASS # PLACARD ID #	7 5 74	7 5 7				
LEQUIP	E HIT/SKIP UNI	8	2 - 10,001 - 26K LBS	RELEASED PLACARD		6	6				
		0 1	3 - >26K LBS.			6 1	12 7 6				
	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED		18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	10 <	12				
0 1	2 - PASSENGER VAN (MINIVAN) 3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE 3-WHEELED	14 - SINGLE UNIT TRUCK	19-BUS (16+ PASSENGERS) 20-OTHER VEHICLE	24 - WHEELCHAIR (ANY TYPE) 25 - OTHER NON-MOTORIST		11 1 2				
UNITTYPE	4 - PICKUP	10 - MOPED OR MOTORIZED	15 - SEMI-TRACTOR	21 - HEAVY EQUIPMENT	26-BICYCLE	9	9 3 3				
	5 - CARGO VAN	BICYCLE	16 - FARM EQUIPMENT	22 - ANIMAL WITH RIDER OR	27 -TRAIN	_	8 11 4				
	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 6 5 4				
00	# of TRAILING UNITS	(ATV / UTV)				12	6 5 12				
						11	6 11				
4	WAS VEHICLE OPERATING IN AU MODE WHEN CRASH OCCURRED		D - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	9 - UNKNOWN	10 11 1 2	10				
2			1 - DRIVER ASSISTANCE  2 - PARTIAL AUTOMATION	4 - HIGH AUTOMATION		10 2	10 2				
	1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOU MODE LEVE	3	5 - FULL AUTOMATION		9 3	3 9 9 3 3				
	1 - NONE	6 - BUS - CHARTER/TOUR	11-FIRE	16-FARM	21 - MAIL CARRIER	8 4	8 4				
1011	2 - TAXI	7 - BUS - INTERCITY	12 - MILITARY	17 - MOWING	99 - OTHER / UNKNOWN	8 7 5 4	8 7 5 4				
SPECIAL	3 - ELECTRONIC RIDE SHARING	8 - BUS - SHUTTLE	13 - POLICE	18 - SNOW REMOVAL		7 6 5	7 6 5				
FUNCTION	4 - SCHOOL TRANSPORT	9 - BUS - OTHER	14 - PUBLIC UTILITY	19-TOWING		6	6				
	5 - BUS - TRANSIT/COMMUTER	10-AMBULANCE	15 - CONSTRUCTION EQUIPMENT	20 - SAFETY SERVICE PATROL			12 12 12				
				8 - POLE	12 - CONCRETE MIXER	12	1 1 📻				
CARGO	/ NOT APPLICABLE	MOTORVEHICLE	CHASSIS	9 - CARGO TANK	13-AUTOTRANSPORTER	9 9					
BODY	2 - BUS	4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX	10-FLAT BED	14-GARBAGE/REFUSE	e ER MRe	_ = 3 9 T 3 9 <b>※</b> 3				
TYPE			7 - GRAIN/CHIPS/GRAVEL	11-DUMP	99-OTHER / UNKNOWN		9				
7 7 7	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICKTIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	6					
VEHICLE	2 - HEAD LAMPS	5 - STEERING	8 - TRAILER EQUIPMENT	10-DISABLED FROM PRIOR		8	6 6 6				
	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]				
	CROSSWALK	4 - MIDBLOCK - MARKED		10 - DRIVEWAY ACCESS	AT INCIDENT SCENE	□-TOP [13]	- ALL AREAS [ 15 ]				
NON-MOTORIST	7 2-INTERSECTION - UNMARKED	CROSSWALK	B - SIDEWALK	11-SHARED USE PATHS OR	99 - OTHER / UNKNOWN	<u></u>					
AT IMPACT	CROSSWALK	5 -TRAVEL LANE - OTHER LOCAT	ION	TRAILS		- UNIT	NOTAT SCENE [16]				
	1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18-APPROACHING	INITIA	L POINT OF CONTACT				
1	2 - NON-COLLISION	2 - BACKING	8 - ENTERING TRAFFIC LANE	14 - ENTERING OR CROSSING	OR LEAVING VEHICLE	0 - NO DAMAG					
4		3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	SPECIFIED LOCATION	19-STANDING	1 10 05550	TO UNIT 15 - VEHICLE NOT AT SCENE				
ACTION	4 - STRUCK PRE-CRASH	4 - OVERTAKING/PASSING	10-PARKED	15 - WALKING, RUNNING, JOGGING, PLAYING	20 - OTHER NON-MOTORIST 21 - STANDING OUTSIDE	0 7 1-12 - REFER					
	5 - BOTH STRIKING ACTIONS & STRUCK		11 - SLOWING OR STOPPED INTRAFFIC	16-WORKING	DISABLED VEHICLE	13-T0P					
	9 - OTHER / UNKNOWN	6 - MAKING LEFT TURN	12 - DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN						
	5/10/05/10	7 - LEFT OF CENTER	100. 000.000.000.000.000.000.000.000.000	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY		TRAFFIC				
		8 - FOLLOWING TOO CLOSE / AC	DIDI/ED DOCITION	18-OPERATING DEFECTIVE	22 -NOT DISCERNIBLE	TRAFFICWAY FLOW	TRAFFIC CONTROL  1 - ROUNDABOUT 4 - STOP SIGN				
0 2		9-IMPROPER LANE CHANGE	14 - STOPPED OR PARKED	EQUIPMENT	23 -OPENING DOOR INTO						
0 3	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID	19 - LOAD SHIFTING/FALLING/	ROADWAY	2 2 - TW0-WAY	2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL				
CONTRIBUTING CIRCUMSTANCE	5 - UNSAFE SPEED	11 - DROVE OFF ROAD	16 - WRONG WAY	SPILLING 20 - IMPROPER CROSSING	99-OTHER IMPROPER ACTION	# <b>T</b> UDOUGUS	5.74.80 pm (5.8400.10 pope Alexandron HSP (5.4.8)				
1	6-IMPROPERTURN	12-IMPROPER BACKING	www.energeneral.TSTSTSTS	Et : HEI NOT EN UN0331NG		# OF THROUGH LANES ON ROAD	RAIL GRADE CROSSING  1 - NOT INVOLVED				
SEQUENCE	OF EVENTS		NAM AGUITATA			2	1 - INVOLVED-ACTIVE CROSSING				
	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	NON-COLLISION 11 - CROSS CENTERLINE —	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING				
1 2 1 0		7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	17 - ANIMAL — FARM	EQUIPMENT						
	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	12 - DOWNHILL RINAWAY	18-ANIMAL - DEER	23 - STRUCK BY FALLING, SHIFTING CARGOOR	UNIT / NOI	N-MOTORIST DIRECTION				
2		9 - RAN OFF ROAD LEFT	13 - OTHER NON-COLLISION	19 - ANIMAL — OTHER	ANYTHING SET IN MOTION		1 - NORTH 5 - NORTHEAST 2 - SOUTH 6 - NORTHWEST				
	5 - CARGO / EQUIPMENT	10-CROSS MEDIAN	14-PEDESTRIAN	20 - MOTOR VEHICLE IN TRANSPORT	BY A MOTOR VEHICLE	FROM 2 TO L					
3	LOSS OR SHIFT		15 - PEDALCYCLE	21 - PARKED MOTOR VEHICLE	24 - OTHER MOVABLE OBJECT	FROM 10 L	4 - WEST 8 - SOUTHWEST				
			ON WITH FIXED OBJECT				9 - OTHER / UNKNOWN				
4	LABRAIL AUGUSAN	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE EQUIPMENT	, <del>.</del>	BETTATES 2				
	26-BRIDGE OVERHEAD	32 - PORTABLE BARRIER 33 - MEDIAN CABLE BARRIER	38 - OVERHEAD SIGN POST 39 - LIGHT / LUMINARIES	44 - DITCH 45 - EMBANKMENT	51 - WALL	UNIT SPEED	DETECTED SPEED				
5	STRUCTURE	34 - MEDIAN GUARDRAIL	SUPPORT	46-FENCE	52 - BUILDING	10 10 15 1	1 - STATED / ESTIMATED SPEED				
	27 - BRIDGE PIER ORABUTMENT	BARRIER	40 - UTILITY POLE	47 - MAILBOX	53 - TUNNEL	0 0 3	2 - CALCULATED / EDR				
21 7 .	28 - BRIDGE PARAPET 29 - BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT	48-TREE	54 - OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED				
لـــــــه	30-GUARDRAIL FACE	36 - MEDIAN OTHER BARRIER		49 - FIRE HYDRANT	99 - OTHER / UNKNOWN						
1	FIRST HARMFUL EVEN	1	HARMFUL EVENT			2 5					

OHIO DEP	S OHIO DEPARTMENT MOTORIST / NON-MOTORIST						LOCAL REPORT NUMBER  2								
3350. -(1	20000				IX10	•			2_0			$0_{\perp}0_{\perp}$	0 1 7		
UNIT#		FIRST, MIDDLE ZLER, ZACHAR`	V KVI	LE					DATE OF BIRTH AGE GENDER 1 0 / 1 6 / 1 9 9 2 2 9 M						
	STREET, CITY, S	(15)	1, 111	LL							E - INCLUDE AREA	*	4		IVI
3		ELD DR ,Mogado	re ,OH	I 4426	60				ı		in the same and a	OVDE			
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED	TAKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	□ DOT-0	Compliai	SEATING POSITIO	ON AIR BA	G USAGE	EJECTION	TRAPPED
_5_	BY							_0_4_	.1 130003100	IELMET	0 1	ـــا اـــا	1	_1_	_1_
OLSTATE	OPERATOR	LICENSE NUMBER		OFFEN	SE CHAI	RGED	LOCAL CODE	OFFENSE DESC	RIPTION			CITA	TION NU	JMBER	
O, H,	ENDORSEMEN'	T RESTRICTION SELECT	UPTO3 DRI	VED.	41.0	OHOL / DRUG SUSPE		CONDITION	A	COHO	L TEST		DRIIG	TEST(S)	
UL GLASS	SELECT UP TO 2	RESIRICITON SELECT		TRACTED		LCOHOL MAF		CONDITION	STATUS		VALUE	STATUS	TYPE		SELECTUPTO4
_4	ــاـــا			1		THER DRUG	1 1	1	_1_	1_	•——	_1_	_1_	اللا	لالال
UNIT #		FIRST, MIDDLE							2000 T 1000	ANT 5000	ATE OF BIRTH	7400 XI		AGE	GENDER
0_2	200000000000000000000000000000000000000	CZEWSKI, ZACH	IARY,	TYL	ER				0 3		6 / 2		1 2	2 1	$\lfloor M \rfloor$
	STREET, CITY, S	vate, zip WOOD CIR ,BRU	INCW	ICK	ОН	14212			CONTAC	T PHON	IE - INCLUDE AREA	C0DE			
INJURIES		EMS AGENCY (NAME)	JINO VV			MEDICAL FACILITY	(NAME CITY)	SAFETY EQUIPMENT	L		SEATING POSITIO	ON LATE BA	G USAGE	EJECTION	TRAPPED
5	TAKEN BY				THE TO			USED 0 4		COMPLIAI IELMET	(T		1	1 .	1
OL STATE	OPERATOR	LICENSE NUMBER		OFFEN	SE CHAI	RGED	LOCAL	OFFENSE DESC	RIPTION			CITA	TION NU	JMBER	
O H				313.	03C1	l	CODE	Traffic C	ontro	l Sig	n	215	539		
OL CLASS	ENDORSEMENT SELECT UP TO 2		DIS	VER TRACTED	_	OHOL / DRUG SUSPE		CONDITION	STATUS		VALUE	STATUS		RESULT	SELECTUPT04
. 4	,		BY	1 .	=	LCOHOL MAR	RIJUANA	1 .	1 1	1	ar r r i	. 1	1		
UNIT#	NAME: LAST,	FIRST, MIDDLE								D/	ATE OF BIRTH		Т	AGE	GENDER
										1	1 1/1	1 1		1.1.3	
ADDRESS:	STREET, CITY, S	TATE, ZIP							CONTAC	T PHON	E - INCLUDE AREA	C0DE			
										_1_			1		
INJURIES	INJURED TAKEN BY	EMS AGENCY (NAME)		INJURED	TAKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT USED		COMPLIA		ON AIR BA	G USAGE	EJECTION	TRAPPED
OLSTATE		LICENSE NUMBER		OFFEN	SE CHAI	RGED	LOCAL	OFFENSE DESC			<u> </u>	CITA	TION NU	JMBER	
	PAGE AND PAGE OF THE PAGE					PATE 10 PATE 1	CODE								
OL CLASS	ENDORSEMENT SELECT UP TO 2			VER TRACTED		OHOL / DRUG SUSPE		CONDITION	STATUS		L TEST VALUE	STATUS	DRUG TYPE	RESULT	SELECTOP TO 4
			BY	-	=	LCOHOL MAF	RIJUANA								
INJU	RIES	SEATING POSITION	A	IR BAG		OL CLASS	5	OL RESTRIC	TION(S)		IVER DISTRAC	TION	Т	EST STA	TUS
1 - FATAL	SERIOUS INJURY	1 - FRONT - LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP 2 - DEPLOYE			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER 2 - CDL INTRASTAT			IOT DISTRACTED	IC AN	1 - NONE	E GIVEN REFUSED	
3 - SUSPECTED		2 - FRONT - MIDDLE	3- DEPLOYE			3 - CLASS C		3 - CORRECTIVE LE		E	LECTRONIC COMMUI	NICATION	3 - TEST	GIVEN, CON	
4 - POSSIBLE IN 5 - NO APPAREN		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	4- DEPLOYE 5- NOTAPP		NT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARMWAIVER 5 - EXCEPT CLASS	A DILE	1	IALING)			PLE / UNU SA   GIVEN, RES	ULTS KNOWN
		(M0TORCYCLE PASSENGER)  5 - SECOND - MIDDLE	9- DEPLOYI		OWN	5 - M/C MOPED ONLY		6 - EXCEPT CLASS			ALKING ON HANDS-F OMMUNICATION DEV			GIVEN, RES	ULTS
1 - NOT TRANSP	ORTED BY	6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTO	R-TRAILER		ALKING ON HAND-HE OMMUNICATION DEV			0.000000	ST TYPE
/TREATED AT 2 - EMS	TSCENE	7 - THIRD - LEFT SIDE (M0TORCYCLE SIDE CAR)	1 NOTEJE	CTED		OL ENDORSEM H - HAZMAT	MENT	8 - INTERMEDIATE RESTRICTIONS	LICENSE		THER ACTIVITY WIT	H AN	1 - NONE		, , , , ,
3 - POLICE		8 - THIRD - MIDDLE	2 - PARTIAL			M - MOTORCYCLE		9 - LEARNER'S PER	MIT		ASSENGER		2 - BL00 3 - URIN		
9 - OTHER / UNK	(NOWN	9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION	3-TOTALLY 4-NOTAPP			P - PASSENGER N - TANKER		RESTRICTIONS 10 - LIMITED TO DAY	LIGHT ONLY		THER DISTRACTION NSIDE THE VEHICLE		4 - BREA		
Lord Adoleran Address of South	QUIPMENT	OF TRUCK CAB  11 - PASSENGER IN OTHER			2154	Q - MOTOR SCOOTER		11 - LIMITED TO EMP			THER DISTRACTION HE VEHICLE	OUTSIDE	5 - OTHE	R	
1 - NONE USED 2 - SHOULDER B	BELT ONLY USED	ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,	1-NOTTRA	PPED PPED	UE DU	R - THREE-WHEEL MO S - SCHOOL BUS	TORCYCLE	12 - LIMITED - OTHE 13 - MECHANICAL DE	EVICES	9-0	THER / UNKNOWN		DRU 1 - NONE	UG TEST	TYPE
3 - LAP BELT ON	NLY USED LAP BELT USED	PICK-UP WITH CAP)  12 - PASSENGER IN UNENCLOSED	2 - EXTRICA MECHAN	TED BY	5	T - DOUBLE & TRIPLE	TRAILERS	CONTROLS, OR O	THER		CONDITION		2 - BL00		
5 - CHILD RESTR	RAINT SYSTEM -	CARGO AREA	3- FREED B			X - TANKER / HAZMAT		ADAPTIVE DEVI			PPARENTLY NORMAI Hysical impairmei		3 - URIN 4 - OTHE		
FORWARD FA 6 - CHILD RESTR	ACING RAINT SYSTEM –	13 - TRAILING UNIT 14 - RIDING ON VEHICLE EXTERIOR	HOIPHIE!	WINITIVAL III	-net	GENDER F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	S WITHOUT	3 - E	MOTIONAL (E.G., DEPR				SULT(S)
REAR FACING 7 - BOOSTER SE	G	(NON-TRAILING UNIT) 15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRRO			LNESS		Details and the Co.	HETAMINES	
8 - HELMET USE		99 - OTHER / UNKNOWN				U -OTHER / UNKNOWN		17 - PROSTHETIC AID 18 - OTHER	)		ELL ASLEEP, FAINTE ATIGUED, ETC.	D,		BITURATES ZODIAZEPINI	FC
9 - PROTECTIVE (ELBOW, KNE								TO VITIEN		6-U	NDERTHE INFLUENCE F MEDICATIONS / DRI			ZODIAZEPINI NABINOIDS	LS
10 - REFLECTIVE	CLOTHING									- 1	ALCOHOL		5 - COCA		
11 - LIGHTING - F / BICYCLE ON										9-0	THER/UNKNOWN		6 - OPIA	TES / OPIOID ER	15
99 - OTHER / UNK	CNOWN													ATIVE RESUL	LTS

HSY8306 OH1M 1/19 [760-1500] PAGE 4 OF 7

O	OHO DEPARTMENT OCCUPANT / WITNESS ADDENDUM						LOCAL REPORT NUMBER						
_	% 	1780	15. 5 S745 BIREAU S74					2,0,2,2,-,0,0,0,7,1,6,6,					
	UNIT#		T, FIRST, MIDDLE		_			DATE OF BIRTH AGE GENDER					
Ŀ	01 HARTZLER, KNISLEY, ROSE								6, / 2 0		0 1	_F_	
OCCUPANT	3790 FAIRFIELD DR, Mogadore, OH 44260							CONTACT PHONE	- INGLUDE AREA GO	DE			
000		INJURED	EMS AGENCY (NAME)	gadore ,OI	1 4420U INJURED TAKEN TO: MEDICAL FACILI	TV (NAME OFFICE)	SAFETY EQUIPMENT	L	SEATING POSITION	AIR BAG USAGE	FIECTION	TRAPPED	
=	5	TAKEN BY 1	Kent Fire		INSURED TAKEN TO. MEDICAL PAGE	TT CHAME, CITY	USED 0 6	MC HELMET	0 6	1 1	1	1	
Н	UNIT#	NAMETIAS	T. FIRST, MIDDLE				UU	DAT	E OF BIRTH	<u> </u>	AGE	GENDER	
	1 1		, , , , , , , , , , , , , , , , , , , ,						1/1		1 1		
ANT	ADDRESS	STREET, CITY,	STATE, ZIP				p.s.	CONTACT PHONE	- INGLUDE AREA GO	DE			
OCCUPAN									1 1		1 1		
ō	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	TY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
	نــــا	BY						MC HELMET	نستسا	L		نــــا	
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER	
E												نــــا	
OCCUPANT	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE			
000	INJIIRIES	INJURED	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	TY (NAME CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR RAG HSACE	EJECTION	TRAPPED	
	INCONIES	TAKEN BY	Emo Asener (NAME)		INSURED PAREN TO. MEDICAL PAGE	TT CHARLE, CETT	USED	DOT-COMPLIANT MC HELMET	SEATING F OSITION	AIR DAG GOAGE	Location	I I I	
Н	UNIT#	NAME-1AS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER	
	0.111.11	Transcription of	, Tho, mode					/ .					
ANT	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE .			
OCCUPANT													
ō	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACILI	TY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED	
		BY					- L	MC HELMET	سبب	L		نـــا	
	3 5174		JRIES		Y EQUIPMENT USED		SEATING POS	ITION		AIR BAG U	SAGE		
	1 - FATA		RIOUS INJURY	1 - NONE US VEHICLE	OCCUPANT		IT – LEFT SIDE ORCYCLE DRIV	ER)	1 - NOT DE	YED FRONT			
i			INOR INJURY	2 - SHOULD	ER BELT ONLY USED	3 - DEPLOYED SIDE							
	4 - POSS	SIBLE INJU	JRY		T ONLY USED		IT – RIGHT SIDE ND – LEFT SIDI	E 4 - DEPLOYED BOTH					
Ë	5 - NO A	PPARENT	INJURY		ER & LAP BELT USED ESTRAINT SYSTEM –	(MOTORCYCLE PASSENGER) FRONT/SIDE  5 - SECOND – MIDDLE 5 - NOT APPLICABLE							
	UNI.	INJURED	TAKEN BY		D FACING		ND - RIGHT SIE						
		TRANSPOR		6 - CHILD RI	ESTRAINT SYSTEM -		D - LEFT SIDE ORCYCLE SIDE						
	2- EMS		CENE	7 - BOOSTER			D - MIDDLE	1 - NOT EJECTED					
Ê	3- POLI	ICE		8 - HELMET	USED		D – RIGHT SIDE PER SECTION (	PARTIALLY EJECTED					
	9- OTH	ER / UNKNO	OWN		TVE PADS USED			HER ENCLOSED 3 - TOTALLY EJECTED					
		GE	NDER		KNEES, ETC.) TVE CLOTHING		O AREA (NON-TE PICK-UP WITH CAL						
Ę	F-FEMA				G – PEDESTRIAN		ENGER IN UNE	NCLOSED		TRAPPI	E D		
	M - MAL	E R/UNKNO	WN	/ BICYCL			O AREA LING UNIT		F011 4 NIV	241			
	99- OTHER / UNKNOWN 14 - RIDING ON VEHICLE						EXTERIOR	MEANS	ATED BY M	ECHANIC	JAL		
	(NON-TRAILING UNIT) 15 - NON-MOTORIST								3 - FREED BY NON-MECHAN			AL	
						99 - OTHE	R / UNKNOWN		MEANS				
SS	NAME: LAS	ST, FIRST, MIDD	DLE					DAT /	E OF BIRTH		AGE	GENDER	
WITNESS	ADDRESS	: STREET, CITY,	STATE ZIP					CONTACT PHONE	- INCLUDE AREA COL	DE L			
×		, , , ,						i i i	1 1			1 1	
	NAME: LAS	ST, FIRST, MIDD	DLE					DAT	E OF BIRTH		AGE	GENDER	
WITNESS								1/1 1					
MIT	ADDRESS: STREET, CITY, STATE, ZIP						CONTACT PHONE	- INCLUDE AREA CO	DE				
H	NAME: LAST, FIRST, MIDDLE							DIT	E OF BIRTH	<del></del>	AGE	GENDER	
SS	NAME: LAS	ai, FIKSI, MIDE	, LC					JAI	E UF BIKIH		AGE	GENDER	
WITNESS	ADDRESS	: STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE L		لـــــا	
≯												1	

HSY 8355 OH1P 3/19 [760-1500] PAGE **5** OF **7** 

OHO DEPARTMENT Narrative Continuation	LOCAL REPORT NUMBER
100 feet	\[ \begin{align*} \be

PAGE

HSY8306 OH1M 1/19 [760-1500]