OF PUBLIC SAFETY TRAFFIC CRASH	REPORT *DENOTES	MANDATORY FIELD FOR SUPPLEM	MENT REPORT	,	LOCAL REPORT NUMBER	*			
D DHOTOS TAKEN OH-2 OH-3		2 0 2 3	- ₁ 0 ₁ 0 ₁ 0 ₁ 1 ₁ 6	5,9,9,9					
PHOTOS TAKEN OH-1P OTHER	NCIC*	HIT/SKIP NUMBER OF UNITS UNIT IN ERROR							
SECONDARY CRASH PRIVATE PROPERTY	16,7,0,3	1-SOLVED 0,2 98-ANIMAL 0,2 99-UNKNOWN							
COUNTY* LOCALITY* LOCATION: CIT		CRASH DATE / TIME * CRASH SEVERITY 1 - FATAL							
6 7 1 2-VILLAGE Kent	_		1.0.2.1.2.0.2.3./.1.6.1.2. 5 2 - SERIOUS INJURY						
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH S - SOUTH 3 E - EAST WAS A WAS A SOUTH B - SO	LOCATION ROAD NAME		ROAD TYPE	LATITUDE DE		SUSPECTED			
S R 59 3 E-EAST W-WEST		$S \perp T$	41,15,3	8 1 2	MINOR INJURY SUSPECTED				
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH	REFERENCE ROAD NAME (ROA	AD, MILEPOST, HOUSE #)	ROAD TYPE	LONGITUDE D		INJURY POSSIBLE			
ROUTE TYPE ROUTE NUMBER PREFIX N - NORTH S - SOUTH E - EAST W - WEST	LUTHER		A V	-8 ₁ 1 ₀ 3 ₄ 4 ₄	8.4.4.	PROPERTY DAMAGE ONLY			
REFERENCE POINT DIRECTION FROM REFERENCE	ROUTE TYPE	ROAD TYPE		- I	INTERSECTION RELATED	1			
2 - MILE POST C COUTU		AL - ALLEY HW- HIGHWAY AV - AVENUE LA - LANE	RD - ROAD SQ - SQUARE	X WITHIN INTE	RSECTION OR ON APPROA	CH 1			
3-HOUSE # E-EAST	STATE ROUTE	BL - BOULEVARD MP - MILEPOST	ST - STREET	WITHIN INTE	RCHANGE AREA NUM	BER OF APPROACHES			
DISTANCE DISTANCE CR-	NUMBERED COUNTY ROUTE	CR - CIRCLE OV - OVAL CT - COURT PK - PARKWAY	TE - TERRACE TL - TRAIL		ROADWAY				
1-MILES TR-	NUMBERER TOWNSHIP	DR - DRIVE PI - PIKE	WA - WAY	ROADWAY DIV	/IDED				
6 3 2 3-YARDS		HE - HEIGHTS PL - PLACE	,		1				
LOCATION OF FIRST HARMFUL EVEN 1 - ON ROADWAY 9 - CROSSOVER		ANNER OF CRASH COLLISION/IMPA OT COLLISION 4 - REAR-TO-REAR	ACT	DIRECTION OF TRAVE					
. 0 . 1 2 - ON SHOULDER 10-DRIVEWAY	ALLEY ACCESS 2 B	ETWEEN 5 - BACKING	N-NORTH I-DIVIDED FLO						
3-IN MEDIAN 11-RAILWAY G 4-ON ROADSIDE 12-SHARED US	V	EHICLES IN 6-ANGLE	6 - ANGLE 7 - SIDESWIPE, SAME DIRECTION W WEST 2 - DIVIDED FLUSH (≥4 FEET)						
5 - ON GORE TRAILS		EAR-END 8 - SIDESWIPE, OPP		W-WEST		DEPRESSED MEDIAN RAISED MEDIAN			
6 - OUTSIDE TRAFFIC WAY 13-BIRE LANE 7 - ON RAMP 14-TOLL BOOT	3-11	EAD-ON 9 - OTHER / UNKNO	OWN		(ANY TYPE	E)			
8-OFF RAMP 99-OTHER / UN	IKNOWN				9 - OTHER/UN	KNOWN			
WORK ZONE RELATED	WORK ZONE TYPE LANE CLOSURE	LOCATION OF CRASH IN W 1 - BEFORE THE 1ST		CONTOUR	CONDITIONS	SURFACE			
	LANE SHIFT/CROSSOVER	WARNING SIGN		_1_	_1_				
LAW ENFORCEMENT PRESENT 3-	WORK ON SHOULDER OR MEDIAN	2 - ADVANCE WARNI 3 - TRANSITION ARE	ADVANCE WARNING AREA 1 - STRAIGHT LEVEL 1 - DRY TRANSITION AREA 2 - STRAIGHT GRADE 2 - WET			1 - CONCRETE 2 - BLACKTOP,			
The production of the product of the	INTERMITTENT OR MOVING WO		DEA	3 - SNOW	BITUMINOUS, ASPHALT				
ACTIVE SCHOOL ZONE 5-	OTHER	5 - TERMINATION A	KEA	4 - CURVE GRADE	4 - ICE	3 - BRICK/BLOCK			
LIGHT CONDITION 1 - DAYLIGHT	1-CLEAR	THER 6 - SNOW		9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT, OIL, GRAVEL	4 - SLAG, GRAVEL, STONE			
1 2 - DAWN/DUSK	. O. 2 . 2-CLOUDY	7 - SEVERE CROSSWINDS			6 - WATER (STANDING,	5 - DIRT			
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	OKE 8-BLOWING SAND, SOIL, DIR 9-FREEZING RAIN OR FREEZ	G SAND, SOIL, DIRT, SNOW NG RAIN OR FREEZING DRIZZLE 7 - SLUSH			9 - OTHER/UNKNOWN				
5 - DARK - UNKNOWN ROADWAY LIGHTING	5 - SLEET, HAIL	99 - OTHER / UNKNOWN		9 - OTHER/UNKNOWN					
9 - OTHER / UNKNOWN									
NARRATIVE					A	Indicate the north direction with			
UNIT 1 WAS STOPPED IN TH	E CURB LANE					an "N" on the compass diagram.			
FACING WESTBOUND ON E	MAIN ST AT				in the second				
LUTHER AVE. UNIT 2 WAS 7	TRAVELING								
WESTBOUND ON E MAIN S		ND	S.		ERAVE	E.MAINST.			
PLANTAGE AND A SPECIAL THROUGH FOR THE OPEN AND THE SPECIAL PROBLEM PROPERTY OF A CONTROL OF A SPECIAL				_	-Unit 1 Unit 2				
FAILED TO LEAVE ENOUGH DISTANCE									
BETWEEN HER AND UNIT 1 CAUSING THE									
ACCIDENT. ———————									
		-		1-1-					
			2.000000		Not To Scale				
MIDWAYOR									
CDACH DEDOCTED DATE (TIME	DICDATON DATE /T/AF	ADDIVAL BATE (TVA	-	CCENE OF EADER	DATE /TIME ~	EDODT TAVEL DV			
	DISPATCH DATE / TIME	ARRIVAL DATE / TIM		SCENE CLEARED	I⊽I	POLICE AGENCY			
1 0 2 1 2 0 2 3 / 1 6 1 2 1 0 2 1 2 0 2 3 / 1 6 1 3 1 0 2 1 2 0 2 3 1 0 2 1 2 0 2 3 1 0 2 1 2 0 2 3 1 0 2 1 2 0 2 3 1 0 2 1 2 0 2 3 1 0 2 1 2 0 2 3 1 0 2 1 2 0 2 3 1 0 2 1 2 0 2 3 1 0 2 1 2 0 2 3 1 0 2 1 2 0 2 3 1 0 2 1 2 0 2 3 1 0 2 1 2 0 2 3 1 0 2 1 2 0 2 3 1 0 2 1 2 0 2 3 1 0 2 1 2 0 2 3 1 0 2 1 2 0 2 3 1 0 2 1 2 0 2 3 1 3 0 2 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3 3 0 3									
ROADWAY CLOSED INVESTIGATION TIME MINUT			short, Jas		盲	SUPPLEMENT			
	OFFICER'S	BADGE NUMBER*		BY OFFICER'S BADGE	NUMBER*	(CORRECTION OR ADDITION TO AN EXISTING REPORT SENT TO ODPS)			
	0 2 5 3		2 . 2	8					

LOCAL REPORT NUMBER 2 | 0 | 2 | 3 | - | 0 | 0 | 0 | 1 | 6 | 9 | 9 | 9 OWNED DHONE. DAMAGE OWNER NAME: LAST, FIRST, MIDDLE (X SAME AS DRIVER Redacted per ORC 149.43(A)(1) HEDRICK, CHERYL, ANN DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 2 3226 SHAWNEE TRL, Ravenna Twp, OH 44266 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE DAMAGED AREA(S) INDICATE ALL THAT APPLY **VEHICLE IDENTIFICATION #** VEHICLE YEAR LP STATE LICENSE PLATE # VEHICLE MAKE 2 GNAXNEV3L62494002 0 2 0 Chevrolet O H FPM9316 INSURANCE VERIFIED **INSURANCE COMPANY** INSURANCE POLICY # COLOR VEHICLE MODEL HOME OWNERS BLUEOUINOX 5466296800 TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR INTERLOCK DEVICE #OCCUPANTS MATERIAL CLASS # PLACARD ID # 1 - ≤10KLBS. RELEASED HIT/SKIP UNIT 2 - 10,001 - 26K LBS. EQUIPPED $0_{\perp}1$ PLACARD J 3 - >26K LBS 1 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 12 - GOLF CART 18 - LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 2 - PASSENGER VAN (MINIVAN) 8 - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19-RUS (16+ PASSENGERS) 24 - WHEELCHAIR (ANY TYPE) 0 1 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST UNITTYPE 4 - PICKUP 10 - MOPED OR MOTORIZED 15 - SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE BICYCLE 5 - CARGO VAN 16 - FARM EQUIPMENT 22 - ANIMAL WITH RIDER OR 27 -TRAIN 11 - ALL TERRAIN VEHICLE ANIMAL-DRAWN VEHICLE 6 - VAN (9-15 SEATS) 17 - MOTORHOME 99 - UNKNOWN OR HIT/SKIP (ATV/UTV) 00 # OF TRAILING UNITS WAS VEHICLE OPERATING IN AUTONOMOUS 0 - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 0 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION AUTONOMOUS 2 - PARTIAL AUTOMATION 1-YES 2-NO 9-0THER/UNKNOWN 5 - FULL AUTOMATION MODE LEVEL 1 - NONE 6 - BUS - CHARTER/TOUR 11-FIRE 16-FARM 21 - MAIL CARRIER 0 1 2 - TAXI 7 - BUS - INTERCITY 12 - MILITARY 17 - MOWING 99 - OTHER / UNKNOWN SPECIAL 3 - ELECTRONIC RIDE SHARING 8 - BUS - SHUTTLE 13 - POLICE 18-SNOW REMOVAL FUNCTION 4 - SCHOOL TRANSPORT 9 - BUS - OTHER 14 - PUBLIC UTILITY 19-TOWING 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15 - CONSTRUCTION EQUIPMENT 20 - SAFETY SERVICE PATROL 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 1 - NO CARGO BODY TYPE 8 - POLE 12 - CONCRETE MIXER 0.1 / NOT APPLICABLE MOTORVEHICLE CHASSIS 9 - CARGO TANK 13-AUTOTRANSPORTER CARGO 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE BODY * 7 - GRAIN/CHIPS/GRAVEL 11-DUMP 99 - OTHER / UNKNOWN 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICK TIRES 9 - MOTOR TROUBLE 99 - OTHER / UNKNOWN 8 - TRAILER EQUIPMENT 10-DISABLED FROM PRIOR VEHICLE 2 - HEAD LAMPS 5 - STEERING DEFECTIVE ACCIDENT DEFECTS 3 - TAIL LAMPS 6 - TIRE BLOWOUT -NO DAMAGE [0] - UNDERCARRIAGE [14] 9 - MEDIAN/CROSSING ISLAND 1 - INTERSECTION - MARKED 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 12 - FIRST RESPONDER CROSSWALK AT INCIDENT SCENE ☐-TOP [13] - ALL AREAS [15] 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE 10 - DRIVEWAY ACCESS NON-MOTORIST 2-INTERSECTION - UNMARKED 99 - OTHER / UNKNOWN CROSSWALK B - SIDEWALK 11 - SHARED USE PATHS OR LOCATION CROSSWALK - UNIT NOT AT SCENE [16] 5 - TRAVEL LANE - OTHER LOCATION TRAILS AT IMPACT 1 - NON-CONTACT 1 - STRAIGHT AHEAD 7 - MAKING U-TURN 13 - NEGOTIATING A CURVE 18-APPROACHING INITIAL POINT OF CONTACT OR LEAVING VEHICLE 2 - NON-COLLISION 2 - BACKING 8 - ENTERING TRAFFIC LANE 14 - ENTERING OR CROSSING 1 1 3 - CHANGING LANES 0 - NO DAMAGE 14 - UNDERCARRIAGE 4 19-STANDING SPECIFIED LOCATION 3-STRIKING 9 - LEAVING TRAFFIC LANE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE ACTION 4- STRUCK PRE-CRASH 4 - OVERTAKING/PASSING 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST 10-PARKED DIAGRAM JOGGING, PLAYING 99 - UNKNOWN 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHTTURN 21 - STANDING OUTSIDE 11 - SLOWING OR STOPPED 13-TOP 16-WORKING DISABLED VEHICLE & STRUCK INTRAFFIC 6 - MAKING LEFT TURN 17 - PUSHING VEHICLE 99 - OTHER / UNKNOWN 9-OTHER/UNKNOWN 12 - DRIVERLESS TRAFFIC 1-NONE 13 - IMPROPER START FROM A 17 - VISION OBSTRUCTION 21 -LYING IN ROADWAY 7 - LEFT OF CENTER TRAFFICWAY FLOW TRAFFIC CONTROL PARKED POSITION 2 - FAILURE TO YIELD 8 - FOLLOWING TOO CLOSE / ACDA 18-OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14 - STOPPED OR PARKED EQUIPMENT 2 - TWO-WAY 3 - RAN RED LIGHT 9-IMPROPER LANE CHANGE 23 - OPENING DOOR INTO 5 - YIELD SIGN 0_1 2 - SIGNAL ILLEGALLY 19 - LOAD SHIFTING/FALLING/ ROADWAY 4 - RAN STOP SIGN 10-IMPROPER PASSING 3 - FLASHER 6 - NO CONTROL CONTRIBUTING 5 - UNSAFE SPEED 15 - SWERVING TO AVOID SPILLING 99-OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING # of THROUGH LANES RAIL GRADE CROSSING 6-IMPROPERTURN 12 - IMPROPER BACKING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS 4 2 - INVOLVED-ACTIVE CROSSING NON-COLLISION 1 2 0 1 - OVERTURNIROLLOVER 3 - INVOLVED-PASSIVE CROSSING 6 - EQUIPMENT FAILURE 11 - CROSS CENTERLINE -16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE OPPOSITE DIRECTION OF EQUIPMENT 17 - ANIMAL - FARM 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS TRAVEL 23 - STRUCK BY FALLING, **UNIT / NON-MOTORIST DIRECTION** 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 18-ANIMAL - DEER 12 - DOWNHILL RUNAWAY SHIFTING CARGOOR 1 - NORTH 5 - NORTHEAST 19-ANIMAL - OTHER 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT ANYTH 13 - OTHER NON-COLLISION

20 - MOTOR VEHICLE IN

21 - PARKED MOTOR VEHICLE

TRANSPORT

45 - EMBANKMENT

49-FIRE HYDRANT

43-CURB

44 - DITCH

46-FENCE

48-TREE

47 - MAILBOX

ANYTHING SET IN MOTION BY A MOTOR VEHICLE 24 - OTHER MOVABLE OBJECT	FROM 3 TO 4	2 - SOUTH 3 - EAST 4 - WEST	6 - NORTHWEST 7 - SOUTHEAST 8 - SOUTHWEST 9 - OTHER / UNKNOWN
50 - WORK ZONE MAINTENANCE EQUIPMENT 51 - WALL 52 - BUILDING 53 - TUNNEL 54 - OTHER FIXED OBJECT 99 - OTHER / UNKNOWN	UNIT SPEED O O O POSTED SPEED 3 5	1 2-0	CTED SPEED TATED / ESTIMATED SPEED ALCULATED / EDR NDETERMINED
			DAGE 2 OF 4

5 - CARGO / EQUIPMENT

25 - IMPACT ATTENUATOR

/ CRASH CUSHION

27 - BRIDGE PIER ORABUTMENT

26 - BRIDGE OVERHEAD

STRUCTURE

28-BRIDGE PARAPET

30 - GUARDRAIL FACE

_ 29-BRIDGE RAIL

LOSS OR SHIFT

10 - CROSS MEDIAN

31 - GUARDRAIL END

32 - PORTABLE BARRIER

34 - MEDIAN GUARDRAIL

35 - MEDIAN CONCRETE

BARRIER

FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

33 - MEDIAN CABLE BARRIER

36 - MEDIAN OTHER BARRIER

14-PEDESTRIAN

15 - PEDAL CYCLE

COLLISION WITH FIXED OBJECT - STRUCK

37 - TRAFFIC SIGN POST

38 - OVERHEAD SIGN POST

39-LIGHT/LUMINARIES

SUPPORT

40 - UTILITY POLE

OR SUPPORT

42 - CULVERT

41 - OTHER POST, POLE

OWNER NAME: LAST, FIRST, MIDDLE (SAME AS DRIVER) OWNED DHONE. IN DAMAGE Redacted per ORC 149.43(A)(1) CALDWELL, HEATHER, KINGSLEY DAMAGE SCALE 1 - NONE 3 - FUNCTIONAL DAMAGE OWNER ADDRESS: STREET, CITY, STATE, ZIP (SAME AS DRIVER) 2 125 PEARL ST ,Kent ,OH 44240 2 - MINOR DAMAGE 4 - DISABLING DAMAGE 9 - UNKNOWN COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE YEAR VEHICLE MAKE 2 0 1 3 Toyota 4, T, 1, B, F, 1, F, K, 4, D, U, 6, 8, 7, 4, 8, 3, O H KDS9715 INSURANCE VERIFIED INSURANCE COMPANY INSURANCE POLICY # COLOR VEHICLE MODEL USAA WHI CIC0084649087105 CAMRY US DOT# TYPE OF USE TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS INTERLOCK DEVICE EQUIPPED MATERIAL CLASS # PLACARD ID # 1 - ≤10KLBS. 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OVERHEAD SIGN POST 44 - DITCH UNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 51-WALL 33 - MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 45 - EMBANKMENT 1 - STATED / ESTIMATED SPEED STRUCTURE 34 - MEDIAN GUARDRAIL SUPPORT 52 - BUILDING 46-FENCE 0,1,0, 27 - BRIDGE PIER ORABUTMENT BARRIER 40 - UTILITY POLE 53-TUNNEL 2 - CALCULATED / EDR 47 - MAILBOX 28-BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54 - OTHER FIXED OR JECT 48-TREE 3 - UNDETERMINED POSTED SPEED _ 29-BRIDGE RAIL OR SUPPORT 99 - OTHER / UNKNOWN 49-FIRE HYDRANT 36 - MEDIAN OTHER BARRIER 30-GUARDRAIL FACE 42 - CULVERT 3 5 FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

OFF PUBLIC BAFETY MOTORIST / NON-MOTORIST						LOCAL REPORT NUMBER									
SAFETY - MENY	ICE - PROTECTION	010K131 / 140) IA – IA	1010	K12	ı			2 0	2 3 -	0_0_	$0_{\perp}1_{\perp}$	6,9,9	9	
UNIT#	UNIT # NAME: LAST, FIRST, MIDDLE						DATE OF BIRTH AGE GENDER								
0,1	0 1 HEDRICK, CHERYL, ANN								0 7 3 1 1 9 5 7 6 6 F						
ADDRESS: STREET, CITY, STATE, ZIP									PHONE - INCLUD			10/4	\(4)		
3226 SHAWNEE TRL ,Ravenna Twp ,OH 44266								reas	cted pe			•			
INJURIES	TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	USED	□ ВОТ-С	MPLIANT	POSITION	AIR BAG USAG	E EJECTION	TRAPPED	
2 5	BY	L YOUNGE MUMAPUR		OFFERI				0,4		LMET 0	11	L	L	L	
OLSTATE		LICENSE NUMBER CTED PER ORC 450	RGED	CODE	OFFENSE DESC	CRIPTION			CITATION NUMBER						
O, H,	ENDORSEMEN	T RESTRICTION SELECT	UPTO3 DRI	VER	AL C	OHOL / DRUG SUSPE	ECTED	CONDITION	ALO	OHOL TEST	MI	DR	UG TEST(S	5)	
OL OLASS	SELECT UP TO 2	KESIKIS IISK SEEESI	DIST	TRACTED	_	LCOHOL MAF		CONDITION	STATUS T		E ST	TATUS TY		T SELECTUPTO4	
_ 4	ے ا			1		THER DRUG		1	_1	1	ے لیا	1_1	عاتا ا	ــاــاـــ	
UNIT #	NAME: LAST	, FIRST, MIDDLE						^-		DATE OF BI	RTH		AGE	GENDER	
0,2	CALD	WELL, EVELYN	, ANN	A					0 9	$1 \cdot 0 \cdot 2$	10	0 6	1.7	F	
=	STREET, CITY, S									PHONE - INCLUD			10.40/		
125 N	PEARI	LST ,Kent ,OH 44	240						Red	acted p					
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	USED	□ DOT-C	MPLIANT	12	AIR BAG USAG	E EJECTION	TRAPPED	
<u> 5</u>	BY							0,4	MC HELMET 0 1			<u> 1 1 1 1 </u>			
OL STATE		LICENSE NUMBER CTED PER ORC 450	1-1-12	OFFENS			LOCAL	OFFENSE DESC	OFFENSE DESCRIPTION			CITATION NUMBER			
O, H	2			4511			X	Assured Clea		CALLOL TEST		26389 DRUG TEST(S)			
OL CLASS	SELECT UP TO 2		UP TO 3 DRIV	TRACTED	_	DHOL / DRUG SUSPE	E CTED RIJUANA	CONDITION	STATUS T	YPE VALU	E ST	TATUS TYP		T SELECTUPTO4	
4	1 16			1	=	THER DRUG		1 ,	1 1	1	1 11	1 1		n n n	
UNIT#	NAME: LAST	, FIRST, MIDDLE			_					DATE OF BI	RTH		AGE	GENDER	
										1 1 1	1 1	1 1	- 1- 1-	1	
ADDRESS:	STREET, CITY, S	STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
NOTO N										1 1	1 1		1 1		
INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJUREDT	AKEN TO	MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	DOT-C	MPLIANT	POSITION	AIR BAG USAG	E EJECTION	TRAPPED	
0N/	BY							MC HELMET			Ĺ	ـــارـ	ـــــا		
OL STATE	OPERATOR	LICENSE NUMBER		OFFENSE CHARGED LOCAL OFFENSE DESC			RIPTION			CITATION	CITATION NUMBER				
			Tees						AL C	OHOL TEST		D.D.	UG TEST(S	1	
OL CLASS	SELECT UP TO 2			TRACTED		DHOL / DRUG SUSPE		CONDITION	STATUS T		E ST		E RESUL		
		ے بے بے ا			=	THER DRUG				_ •	ے اب		عاليا إل	لــالــالــ	
	RIES	SEATING POSITION		IR BAG		OL CLASS	5	OL RESTRIC		DRIVER DIS		No.	TEST STA	TUS	
1 - FATAL 2 - SUSPECTED	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		1 - NOT DISTRAC 2 - MANUALLY D			ONE GIVEN EST REFUSED		
3 - SUSPECTED		2 - FRONT - MIDDLE	3- DEPLOYE					3 - CORRECTIVE LE	ENSES ELECTRONIC COMMUNICATION DE VICE (TEXTING, TYPIN			ATION 3 - TEST GIVEN, CONTAMINATED			
4 - POSSIBLE IN 5 - NO APPAREN		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	4 - DEPLOYE 5 - NOTAPP		BOTH FRONT / SIDE 4 - REGULAR CLASS 4 - FARM WAIVER			DIALING)			4 - TI	SAMPLE / UNU SABLE 4 - TEST GIVEN, RESULTS KNOWN			
		(MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE		MENT UNKNO	WN	5 - M/C MOPED ONLY		6 - EXCEPT CLASS		COMMUNICAT		5 - TI	ST GIVEN, RES	SULTS	
1 - NOT TRANSP	ORTED	6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTO	R-TRAILER	4 - TALKING ON I			1000010000000		
/TREATED A	and the same of th	7 - THIRD – LEFT SIDE (M0TORCYCLE SIDE CAR)		ECTION		OL ENDORSE	MENT	8 - INTERMEDIATE		5 - OTHER ACTIV		N 1-N	COHOL TE: One	SITTPE	
2 - EMS 3 - POLICE		8 - THIRD - MIDDLE	1 - NOTEJE 2 - PARTIAL	LY EJECTED		H - HAZMAT M - MOTORCYCLE		9 - LEARNER'S PER	MIT	6 - PASSENGER	DEALCE	2 - B			
9 - OTHER / UNK	(NOWN	9 - THIRD - RIGHT SIDE 10 - SLEEPER SECTION	3-TOTALLY			P - PASSENGER		RESTRICTIONS 10 - LIMITED TO DAY	LICHTONIA	7 - OTHER DISTR		3 - U 4 - R	RINE REATH		
SAFETY E	QUIPMENT	OF TRUCK CAB	4-NOTAPP	LICABLE		N - TANKER Q - MOTOR SCOOTER		11 - LIMITED TO EM		8 - OTHER DISTR	ACTION OUT				
1 - NONE USED		11 - PASSENGER IN OTHER ENCLOSED CARGO AREA		RAPPED		R-THREE-WHEEL MO	TORCYCLE	12 - LIMITED - OTHE		9 - OTHER / UNK			RUG TEST	TYPE	
2 - SHOULDER E 3 - LAP BELT ON		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	1 - NOTTRA 2 - EXTRICA			S - SCHOOL BUS	TDAN FRO	13 - MECHANICAL DI (SPECIAL BRAK	ES, HAND	A 1555/2007/2007	and the same of th	1 - N			
4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED MECHA		VICAL MEANS TOUGHE & TRIPLE TRAILERS COT				CONTROLS, OR OTHER CONDITION ADAPTIVE DEVICES) 1 - APPARENTLY NORM		J-EATTER							
5 - CHILD RESTI FORWARD FA	RAINT SYSTEM – ACING	13 - TRAILING UNIT	3- FREED B NON-ME	Y Chanical Me	EANS	GENDER	new hove	14 - MILITARY VEHICLE		2 - PHYSICAL IM	PAIRMENT	4 - 0			
6 - CHILD RESTI REAR FACIN	RAINT SYSTEM -	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	2 MILHOOL	3 - EMOTIONAL (ANGRY, DISTURB			JG TEST RI	ESULT(S)	
7 - BOOSTER SE		15 - NON-MOTORIST				M - MALE		16 - OUTSIDE MIRRO		4 - ILLNESS	CAUTES		MPHETAMINES		
8 - HELMET US		99 - OTHER / UNKNOWN				U -OTHER / UNKNOWN		17 - PROSTHETIC AII 18 - OTHER		5 - FELL ASLEEP, FATIGUED, ET			ARBITURATES Enzodiazepin	IES	
9 - PROTECTIVE (ELBOW, KNE										6 - UNDERTHE IN OF MEDICATIO		4.0	ANNABINOIDS		
10 - REFLECTIVE										/ALCOHOL		5 - 0	CAINE	ns	
11 - LIGHTING - I / BICYCLE OF										9- OTHER/UNK	NO WN		PIATES / OPIOII THER	U S	
99 - OTHER / UNK	CNOWN												EGATIVE RESU	LTS	

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