OFF PUBLIC SAFTING TRAFFIC CRASH	LOCAL REPORT NUMBER*							
PHOTOS TAKEN 0H-2 0H-3	NT REPORT	2,0,2,0,-,0,0,0,5,7,2,6,						
X OH-1P OTHER	REPORTING AGENCY NAME*		NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR		
SECONDARY CRASH PRIVATE PROPERTY	City of Kent Police	0.6	7,0,3	1 - SOLVED 2 - UNSOLVED	0 2	0 2 98-ANIMAL		
1-CITY	VILLAGE TOWNSHIP*			CRASH DATE /T	IME*	CRASH SEVERITY 1 - FATAL		
6 7 1 2-VILLAGE Kent					03222020		2 - SERIOUS INJURY	
2- SOUTH	LOCATION ROAD NAME			ROAD TYPE	LATITUDE DEC	- 1	SUSPECTED 3 - MINOR INJURY	
	WATER			ST	4,1,1,3,5		SUSPECTED	
5 2- SOUTH	REFERENCE ROAD NAME (ROAD	, MILEPOST, HOUSE #)		ROAD TYPE	LONGITUDE DE		4 - INJURY POSSIBLE 5 - PROPERTY DAMAGE	
	BERYL			D, R,	-81,35,4	8,4,0,	ONLY	
REFERENCE POINT DIRECTION 1 - INTERSECTION FROM REFERENCE 1 - NORTH IR -	ROUTE TYPE INTERSTATE ROUTE(TP) AL	ROAD - ALLEY HW-HIG		-ROAD	657	NTERSECTION REL		
2 MILE DOST	. EBEITHE OU HOUTE	- AVENUE LA - LA	NE SQ	- SQUARE	WITHIN INTER	RSECTION OR ON APP	ROACH 4	
4-WEST SR-	STATE RUUTE CR	- BOULEVARD MP - MII - CIRCLE OV - OV		- STREET	WITHIN INTER	RCHANGE AREA	NUMBER OF APPROACHES	
FROM REFERENCE UNIT OF MEASURE	MUMPEDED TOWNSHIP	- COURT PK - PA		-TRAIL		ROADWAY		
	ROUTE	R-DRIVE PI-PIK E-HEIGHTS PL-PLA		A - WAY	ROADWAY DIV	IDED		
LOCATION OF FIRST HARMFUL EVENT	MAN	INER OF CRASH COLLIS	SION/IMPAC	T	DIRECTION OF TRAVE	ME	DIAN TYPE	
1 - ON ROADWAY 9 - CROSSOVER 2 - ON SHOULDER 10 - DRIVEWAY/	ALLEY LOOSES BET	COLLISION 4-REAR-			1 - NORTH	1 - DIVID	ED FLUSH MEDIAN	
U 1 3-IN MEDIAN 11-RAILWAY G	RADE CROSSING 2 TWO	O MOTOR HICLES IN 6-ANGL			2-SOUTH 3-EAST	2- DIVID	(<4 FEET) DIVIDED FLUSH MEDIAN (≥4 FEET) DIVIDED, DEPRESSED MEDIAN	
4 - ON ROADSIDE 12-SHARED US 5 - ON GORE TRAILS	E PATHS OR TRA		SWIPE, SAME SWIPE, OPPOS		4-WEST			
6-OUTSIDE TRAFFIC WAY 13-BIKE LANE	3 - HEA		R / UNKNOW				- DIVIDED, RAISED MEDIAN (ANY TYPE)	
7 - ON RAMP 14 - TOLL BOOTE 8 - OFF RAMP 99 - OTHER / UN							VUNKNOWN	
WORK ZONE RELATED	WORK ZONE TYPE	LOCATION OF CR	RASH IN WO	RK ZONE	CONTOUR	CONDITIONS	SURFACE	
THE THE PERSON NAMED IN TH	LANE CLOSURE LANE SHIFT/CROSSOVER		E THE 1ST W ING SIGN	ORK ZONE	_1_	_1_	2	
3-1	WORK ON SHOULDER	1	CE WARNING	GAREA	1 - STRAIGHT LEVEL	1 - DRY	1-CONCRETE	
4-1	INTERMITTENT OR MOVING WOR				2 - STRAIGHT GRADE	2 - WET	2 - BLACKTOP, BITUMINOUS,	
ACTIVE SCHOOL ZONE 5-0	OTHER	5 - TERMII	NATION ARE	A	4 - CURVE GRADE	3 - SNOW 4 - ICE	ASPHALT 3 - BRICK/BLOCK	
LIGHT CONDITION	WEATH				9 - OTHER/UNKNOWN	5 - SAND, MUD, DIRT,		
1 - DAYLIGHT 1 2 - DAWN/DUSK	1-CLEAR 2-CLOUDY	6 - SNOW 7 - SEVERE CROSSV	WINDS			OIL, GRAVEL 6 - WATER (STANDIN	STONE IG, 5-DIRT	
3 - DARK – LIGHTED ROADWAY 4 - DARK – ROADWAY NOT LIGHTED	3 - FOG, SMOG, SMOK 4 - RAIN	E B-BLOWING SAND, 9-FREEZING RAIN			:	MOVING)	9 - OTHER/UNKNOWN	
5 - DARK – UNKNOWN ROADWAY LIGHTING	5 - SLEET, HAIL	99 - OTHER / UNKNO		46 DRIZZEE		7 - SLUSH 9 - OTHER/UNKNOWI	v	
9 - OTHER / UNKNOWN								
NARRATIVE						£	Indicate the north direction with	
Unit 1 was stopped at the inter	section of S Water	St					an "N" on the compass diagram.	
and Beryl Dr, traveling from	north to south. Uni	it 2				<u></u>		
was stopped behind Unit 1. T	he driver of Unit 2			1		1		
stated that the light turned gr	een, he accelerated		a	WATER ST			Z	
and struck the rear end of Un				Ī,	201	NOT	TO SCALE	
	117 [
	IIT 1.		BERYL	DR J				
		-	BERYL	DR J				
No injuries were reported. The		as	BERYL					
		as	BERYL					
No injuries were reported. The		as	BERYL					
No injuries were reported. The		as	BERYL					
No injuries were reported. The		as	BERYL					
No injuries were reported. The issued a citation for ACDA.	e driver of Unit 2 w				SCENE CLEADED	DATE / TIME	DEPORT TAKEN BY	
No injuries were reported. The issued a citation for ACDA.	e driver of Unit 2 w	ARRIVAL D	DATE / TIME	2	SCENE CLEARED		REPORT TAKEN BY X POLICE AGENCY	
No injuries were reported. The issued a citation for ACDA. CRASH REPORTED DATE / TIME [0,3,2,2,2,0,2,0,/,1,3,3,1,0,3,2] TOTAL TIME OTHER TOTAL	DISPATCH DATE/TIME	ARRIVAL D	DATE / TIME 2,0, /, 1	3,3,2	0,3,2,2,2,0,2,0		_	
No injuries were reported. The issued a citation for ACDA. CRASH REPORTED DATE / TIME [0,3,2,2,2,0,2,0,/,1,3,3,1] [0,3,2]	DISPATCH DATE / TIME 12,2,0,2,0,/,1,3,3,2 1 OFFICER'S NAME* TES Ellis, Charles	ARRIVAL D	DATE / TIME 2	3,3,2 (ECKED BY OFFI		0,/,1,4,0,2,	POLICE AGENCY	



2,0,2,0,-,0,0,0,5,7,2,6, OWNER PHONE: INCLUDE AREA CODE (X) SAME AS DRIVERS OWNER NAME: LAST, FIRST, MIDDLE (X) SAME AS DRIVER! DAMAGE SITKO, CYNTHIA, A 0 1 DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 5632 POWDER MILL RD , Franklin Twp , OH 44240 ☐ 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME, ADDRESS, CITY, STATE, ZIP COMMERCIAL CARRIER PHONE: INCLUDE AREA CODE 9 - UNKNOWN 1 1 1 1 DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE LICENSE PLATE # VEHICLE IDENTIFICATION # VEHICLE YEAR VEHICLE MAKE 1, F, MCU0, GD2, HUE, 6, 7, 2, 5, 3 2.0.1.7 Ford O H GJY5744 INSURANCE COMPANY
VERIFIED PROCESSION INSURANCE POLICY # COLOR VEHICLE MODEL **PROGRESSIVE** 40788310 BRZ **ESCAPE** TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT IN EMERGENCY RESPONSE HAZARDOUS MATERIAL VEHICLE WEIGHT GVWR/GCWR #OCCUPANTS MATERIAL CLASS # PLACARD ID # INTERLOCK 1 - <10K LBS HIT/SKIP UNIT DEVICE 2 - 10,001 - 26K LBS 0,1, PLACARD 1 3 - >26K LBS 11 - 11 - PASSENGER CAR 7 - MOTORCYCLE 2-WHEELED 18-LIMO (LIVERY VEHICLE) 23 - PEDESTRIAN / SKATER 12-GOLF CART 2 - PASSENGER VAN (MINIVAN) B - MOTORCYCLE 3-WHEELED 13-SNOWMOBILE 19-BUS (16+ PASSENGERS) 24 - WHEEL CHAIR (ANY TYPE) 0,3 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14 - SINGLE UNITTRUCK 20-OTHER VEHICLE 25 - OTHER NON-MOTORIST UNIT TYPE 4 - PICK UP 10 - MOPED OR MOTORIZED 15-SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26-BICYCLE BICYCLE 5 - CARGOVAN 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 O - NO AUTOMATION 3 - CONDITIONAL AUTOMATION 9 - UNKNOWN MODE WHEN CRASH OCCURRED? 1 - DRIVER ASSISTANCE 4 - HIGH AUTOMATION 0 J 1-YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS 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 14-PUBLIC UTILITY 9 - BUS - OTHER 19-TOWING 5 - BUS - TRANSIT/COMMUTER 10 - AMBULANCE 15-CONSTRUCTION EQUIPMENT 20-SAFETY SERVICE PATROL 12 3 - VEHICLETOWING ANOTHER 5 - INTERMODAL CONTAINER 1 - NO CARGO BODY TYPE 8 - POLF 12 - CONCRETE MIXER 0.1 / NOT APPLICABLE MOTOR VEHICLE CHASSIS 9 - CARGOTANK 13-AUTOTRANSPORTER CARGO 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 14 - GARBAGE/REFUSE BODY 7 - GRAIN/CHIPS/GRAVEL 99-OTHER / UNKNOWN 11-DUMP 0 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICKTIRES 9 - MOTOR TROUBLE 99-OTHER / UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEFRING 8 - TRAILER FOILIPMENT 10-DISABLED FROM PRIOR DEFECTS 3 - TAIL LAMPS 6 - TIRE BLOWOUT DEFECTIVE ACCIDENT -NO DAMAGE [0] -undercarriage [14] 1 - INTERSECTION - MARKED 3 - INTERSECTION - OTHER 6 - BICYCLE LANE 9 - MEDIAN/CROSSING ISLAND 12-FIRST RESPONDER CROSSWALK AT INCIDENT SCENE 4 - MIDBLOCK - MARKED 7 - SHOULDER / ROADSIDE □-TOP [13] □ - ALL AREAS [15] 10 - DRIVEWAY ACCESS NON-MOTORIST 2-INTERSECTION - UNMARKED CROSSWALK 99 - OTHER / UNKNOWN 11 - SHARED USE PATHS OR 8 - SIDEWALK LOCATION CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION - UNIT NOT AT SCENE [16] 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 B - ENTERING TRAFFIC LANE 14-ENTERING OR CROSSING 0 1 3 - CHANGING LANES 0 - NO DAMAGE 4 14 - UNDERCARRIAGE SPECIFIED LOCATION 19-STANDING ☐ 3 - STRIKING 9 - LEAVING TRAFFIC LANE 0 , 6 , 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE 15 - WALKING, RUNNING, 20 - OTHER NON-MOTORIST PRE-CRASH 4 - OVERTAKING/PASSING ACTION 4- STRUCK 10-PARKED DIAGRAM JOGGING, PLAYING 99 - UNKNOWN 5 - BOTH STRIKING ACTIONS 5 - MAKING RIGHT TURN 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 12 - DRIVERLESS 9-OTHER/UNKNOWN 13 - IMPROPER START FROM A 1 - NONE 7 - LEFT OF CENTER 17 - VISION OBSTRUCTION 21 LIVING IN ROADWAY 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 0 1 3-RAN RED LIGHT 14-STOPPED OR PARKED 9-IMPROPER LANE CHANGE EQUIPMENT 23 - OPENING DOOR INTO 2 - TWO-WAY ILLEGALLY 2 - SIGNAL 5 - YIELD SIGN 2 3-FLASHER 19-LOAD SHIFTING/FALLING/ ROADWAY 4 - RAN STOP SIGN 10-IMPROPER PASSING 15 - SWERVING TO AVOID 6 - NO CONTROL CONTRIBUTING 5 - UNSAFE SPEED SPILLING 99 - OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IM PROPER CROSSING # OF THROUGH LANES RAIL GRADE CROSSING 6 - IMPROPER TURN 12 - IMPROPER BACKING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS 4 2 - INVOLVED-ACTIVE CROSSING **EVENTS** 1 2 0 1 - OVERTURN/ROLLOVER 3 - INVOLVED-PASSIVE CROSSING 6 - EQUIPMENT FAILURE 13 - CROSS CENTERLINE -16 - RAIL WAY VEHICLE 22 - WORK ZONE MAINTENANCE OPPOSITE DIRECTION OF **EQUIPMENT** 2 - FIRE/EXPLOSION 7 - SEPARATION OF UNITS 17 - AHIMAL -- FARM TRAVEL 23 - STRUCK BY FALLING, UNIT / NON-MOTORIST DIRECTION 18-ANIMAL - DEER 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 12 - DOWNHILL RUNAWAY SHIFTING CARGO OR 1 - NORTH 5 - NORTHEAST 19 - ANIMAL - OTHER 1 4 - JACKKNIFF 9 - RAN OFF ROAD LEFT 13-OTHER NON-COLLISION ANYTHING SET IN MOTION 2 - SOUTH 6 - NORTHWEST 20 - MOTOR VEHICLE IN 5 - CARGO / EQUIPMENT 10 - CROSS MEDIAN BY A MOTOR VEHICLE 14-PEDESTRIAN TRANSPORT FROM 1 TO 2 3 - EAST 7 - SOUTHEAST LOSS OR SHIFT 24 - OTHER MOVABLE CBJECT 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE 4 - WEST 8 - SOUTHWEST COLLISION WITH FIXED OBJECT - STRUCK 9 - OTHER / UNKNOWN 25 - IMPACT ATTENUATOR 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 43 - CURB 50 - WORK ZONE MAINTENANCE / CRASH CUSHION EQUIPMENT 32 - PORTABLE BARRIER 38-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 52 - BUILDING 34-MEDIAN GUARDRAIL SUPPORT 46-FENCE , 0 , 0 , 0 , 27 - BRIDGE PIER OR ABUTMENT → 2 - CALCULATED / EDR BARRIER 40-UTILITY POLE 59.TUNNEL 47 - MAILBOX 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54-OTHER FIXED OBJECT 48-TREE 3 - UNDETERMINED POSTED SPEED 29-BRIDGE RAIL OR SUPPORT 99-OTHER / UNKNOWN 49 - FIRE HYDRANT 30-GUARDRAIL FACE 36 - MEDIAN OTHER BARRIER 42-CULVERT , 2 , 5 , _ FIRST HARMFUL EVENT 1 MOST HARMFUL EVENT

LOCAL REPORT NUMBER

2,0,2,0,-,0,0,0,5,7,2,6,

	OWNER NAME: LAST, FIRS			Owned BRUNE . It.	OC ASSES MOS (TO SAME AS DRIVER)	DAMAGE				
	HUBIN, AND			f		DAMAGE SCALE				
	DRESS: STREET, CITY, STATE		C OIT 440.40			1 - NONE 3 - FUNCTIONAL DAMAGE				
-			Wp ,OH 44240			2 - MINOR DAMAGE 4 - DISABLING DAMAGE				
COMMERC	IAL CARRIER: NAME, ADDR	RESS, CITY, STATE, ZIP		COMMERCIAL CARRIER	PHONE: INCLUDE AREA CODE	9 - UNKNOWN				
		,				DAMAGED AREA(S)				
	LICENSE PLATE #	VEHICLE	IDENTIFICATION #	VEHICLE YE		INDICATE ALL THAT APPLY				
OH	HWC5583		12,0,AB0,6,9,	1,3,4,2,0,1,0	Honda	12	12			
INSURAN VERIFIE	INSURANCE COMP		SURANCE POLICY #	COLOR	VEHICLE MODEL	10	11 12			
IN VERIFIE		RS 61	00279551 2031	SIL	ODYSSEY	10 O O 2	10 11 1 2			
	TYPE OF USE	IN EMEDICANCY	US DOT #	TOWED BY: COMPANY	/ NAME	10 2	10,000 2			
COMME	RCIAL GOVERNMENT	IN EMERGENCY RESPONSE				9 9 3	9 9 3			
INTERL	OCK	#OCCUPANTS VEI	HICLE WEIGHT GVWR/GCWR		US MATERIAL CLASS # PLACARD ID #					
DEVICE	: HIT/SKIP UNI	1 0 3	1 - ≤10K LBS 2 - 10,001 - 26K LBS	RELEASED	TENERING IS II	8 4	8 4			
EQUIPE	ED	0.2	3 - >26K L8S	PLACARD L		5	12 7 5			
	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	12 - GOLF CART	18-LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	6 1	12			
	2 - PASSENGER VAN (MINIVAN)	8 - MOTORCYCLE 3-WHEELED	13-SNOWMOBILE	19-BUS (16+ PASSENGERS)	24 - WHEELCHAIR (ANY TYPE)	10 /	11 1 2			
UNIT TYPE	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE		20-OTHER VEHICLE	25 - OTHER NON-MOTORIST	<i>–</i>	10 2			
OMITTE		10 - MOPED OR MOTORIZED BICYCLE		21 - HEAVY EQUIPMENT	26-BICYCLE	9	9 😭 🤰 3			
	5 - CARGO VAN	11 - ALL TERRAIN VEHICLE		22 - ANIMAL WITH RIDER OR ANIMAL-DRAWN VEHICLE	27 - TRAIN	7				
0	6 - VAN (9-15 SEATS)	(ATV / UTV)	17 - MOTORHOME	ATTITUDE DISTRICT VEHICLE	99 - UNKNOWN OR HIT/SKIP	8	7 1 5 4			
	# OFTRAILING UNITS					12	5 12			
C P	WAS VEHICLE OPERATING IN AU	TONOMOUS	0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	C - HNANUMN	11 12	6 11 12			
>	MODE WHEN CRASH OCCURRED			4 - HIGH AUTOMATION	י - הוויטוחאווו	10 11 2	10 11 2			
2	1-YES 2-NO 9-OTHER/UNK	NOWN AUTONOMOUS		5 - FULL AUTOMATION		10 2	10 2			
		MODE LEVEL				9 9 3	9 0 3 3			
	1 - NONE	6 - BUS - CHARTER/TOUR	11-FIRE	16 - FARM	21 - MAIL CARRIER	8 4				
[0,1]	2 - TAXI	7 - EUS - INTERCITY	12 - MILITARY	17 - MOWING	99-OTHER/UNKNOWN	8 7 5 4	8 7 5 4			
	3 - ELECTRONIC RIDE SHARING	B - BUS - SHUTTLE	13 - POLICE	18 - SNOW REMOVAL		7 5	7 6			
FUNCTION	4 - SCHOOL TRANSPORT	9 - BUS - OTHER		19-TOWING		6	6			
	5 - BUS - TRANSIT/COMMUTER	10-AMBULANCE	15 - CONSTRUCTION EQUIPMENT	23-SAFETY SERVICE PATROL			12 12 12			
0.1	1 - NO CARGO BODYTYPE	3 - VEHICLETOWING ANOTHER	5 - INTERMODAL CONTAINER	8 - POLE	12 - CONCRETE MIXER					
O, 1,	/ NOT APPLICABLE	MOTOR VEHICLE		9 - CARGOTANK	13 - AUTOTRANSPORTER	12				
BODY	2 - BUS	4 - LOGGING		10-FLAT BEO	14-GARBAGE/REFUSE	A A R				
TYPE			7 - GRAIN/CHIPS/GRAVEL	11-DUMP	99-OTHER/UNKNOWN	,600,				
	1 - TURN SIGNALS	4 - BRAKES	7 - WORN OR SLICK TIRES	9 - MOTOR TROUBLE	99 - OTHER / UNKNOWN	0				
VEHICLE	2 - HEAD LAMPS	5 - STEERING		10-DISABLED FROM PRIOR	77 OTTERT OTTRION	6				
	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT			6 6 6			
						- NO DAMAGE (0] - UNDERCARRIAGE [14]			
	1 - INTERSECTION - MARKED CROSSWALK	3 - INTERSECTION - OTHER		9 - MEDIAN/CROSSING ISLAND	12-FIRST RESPONDER AT INCIDENT SCENE		_			
NON-MOTORIST	2 - INTERSECTION - UNMARKED	4 - MIDBLOCK - MARKED CROSSWALK		10 - DRIVEWAY ACCESS	99 - OTHER / UNKNOWN	□-TOP [13]	-ALL AREAS [15]			
LOCATION	CROSSWALK	5 -TRAVEL LANE - OTHER LOCATION		11 - SHARED USE PATHS OR TRAILS	77-0111ERT ORANGIA	∏-UND	NOT AT SCENE [16]			
AT IMPACT	3 HOW DON'T CT						TO J			
	1 - NON-CONTACT	1 - STRAIGHT AHEAD		13 - NEGOTIATING A CURVE	18 - APPROACHING OR LEAVING VEHICLE	INITIA	L POINT OF CONTACT			
3	2-NON-COLLISION 3-STRIKING 0,1	2 - BACKING 3 - CHANGING LANES	8 - ENTERING TRAFFIC LANE 9 - LEAVING TRAFFIC LANE	14 - ENTERING OR CROSSING SPECIFIED LOCATION	19-STANDING	0 - NO DAMAG				
ACTION	4. STRUCK PRE-CRASH	4 - OVERTAKING/PASSING		15 - WALKING, RUNNING,	20 - OTHER NON-MOTORIST 21 - Standing Outside		TO UNIT 15 - VEHICLE NOT AT SCENE			
	5 - BOTH STRIKING ACTIONS	5 - MAKING RIGHT TURN	11-SLOWING OR STOPPED	JOGGING, PLAYING		DIAGRA	M 99 - UNKNOWN			
	& STRUCK	6 - MAKING LEFT TURN	IN TRAFFIC	16-WORKING	DISABLED VEHICLE	13 - TOP				
	9-OTHER/UNKNOWN		12 - DRIVERLESS	17 - PUSHING VEHICLE	99 - OTHER / UNKNOWN		TRAFFIC			
	1-NONE	7-LEFT OF CENTER	13-IMPROPER START FROM A	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICULAY C. C				
	2 - FAILURE TO YIELD	8 - FOLLOWING TOO CLOSE / ACD	A PARKED POSITION	18 - OPERATING DEFECTIVE	22 - NOT DISCERNIBLE	TRAFFICWAY FLOW 1 - ONE-WAY	TRAFFIC CONTROL			
LO, 8,	3 - RAN RED LIGHT	9-IMPROPER LANE CHANGE	14-STOPPED OR PARKED	EQUIPMENT	23 - OPENING DOOR INTO		1 - ROUNDABOUT 4 - STOP SIGN 2 - SIGNAL 5 - YIELD SIGN			
	4 - RAN STOP SIGN	10-IMPROPER PASSING	ILLEGALLY 15 - SWERVING TO AVOID	19 - LOAD SHIFTING/FALLING/	ROADWAY	2 2 - TWO-WAY	2 2 - SIGNAL 5 - YIELD SIGN 3 - FLASHER 6 - NO CONTROL			
CIRCUMSTANCES	5 - UNSAFE SPEED	11 - DROVE OFF ROAD	16 - WRONG WAY	SPILLING	99-OTHER IMPROPER ACTION		2 - Addition 0 - NO CONTINUE			
5	6 - IMPROPER TURN	12 - IMPROPER BACKING		20 - IN PROPER CROSSING		# OF THROUGH LANES	RAIL GRADE CROSSING			
	OF EVENTS					ON ROAD	1 - NOT INVOLVED			
M C			EVENTS			4	1 2 - INVOLVED-ACTIVE CROSSING			
1 2 0	1 - OVERTURN/ROLLOVER	6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE — OPPOSITE DIRECTION OF	16 - RAILWAY VEHICLE	22 - WCRK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING			
	2 - FIRE/EXPLOSION	7 - SEPARATION OF UNITS	TRAVEL	17 - ANIMAL — FARM	EQU'PMENT 23-STRUCK BY FALLING,	UNIT / NO	-MOTORIST DIRECTION			
21 1	3 - IMMERSION	B - RAN OFF ROAD RIGHT	12_DOWNHILL BUNAWAY	18-ANIMAL — DEER 19-ANIMAL — OTHER	SHIFTING CARGO OR		1 - NORTH 5 - NORTHEAST			
	4 - JACKKNIFE 5 - CARGO / EQUIPMENT	9 - RAN OFF ROAD LEFT	13-OTHER NON-COLLISION	20 - MOTOR VEHICLE IN	ANYTHING SET IN MOTION		2 - SOUTH 6 - NORTHWEST			
	LOSS OR SHIFT	10-CROSS MEDIAN	14-PEDESTRIAN	TRANSPORT	BY A MOTOR VEHICLE 24-OTHER MOVABLE OBJECT	FROM 1 TO L				
3			15-PEDALCYCLE	21 - PARKED MOTOR VEHICLE			4 - WEST B - SOUTHWEST			
	25 IMPACT ATTEMIATOR		N WITH FIXED OBJECT		CO INODE SOME MANAGEMENT		9 - OTHER / UNKNOWN			
4	25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END 32 - PORTABLE BARRIER	37 - TRAFFIC SIGN POST 38 - OVERHEAD SIGN POST	43 - CURB 44 - DITCH	50 - WORK ZONE MAINTENANCE EQUIPMENT	HAIT COLOR				
	26 - BRIDGE OVERHEAD	33 - MEDIAN CABLE BARRIER	39-LIGHT/LUMINARIES	45 - EMBANKMENT	51 - WALL	UNIT SPEED	DETECTED SPEED			
5	STRUCTURE	34-MEDIAN GUARDRAIL	SUPPORT	46-FENCE	52 - BUILDING	0,0,5	1 - STATED / ESTIMATED SPEED			
	27 - BRIDGE PIER OR ABUTMENT 28 - BRIDGE PARAPET	DAMMEN	40 - UTILITY POLE	47 - MAILBOX	53-TUNNEL	0,0,0	2 - CALCULATED / EDR			
61	29-BRIDGE RAIL	35 - MEDIAN CONCRETE BARRIER	41 - OTHER POST, POLE OR SUPPORT	48 - TREE	54 - OTHER FIXED OBJECT	POSTED SPEED	3 - UNDETERMINED			
	30-GUARDRAIL FACE	36-MEDIAN OTHER BARRIER	42 - CULVERT	49 - FIRE HYDRANT	99 - OTHER / UNKNOWN					
. 1	FIRST HARMFUL EVEN	1				2 5				
			IARMFUL EVENT							

OHIO DET	PARTNERT A	OTORIST / No	M-M	OTO	DICT	г				LO	CAL REPO	RT NUMB	ER	
SUPER MAIN	SE ACTION TALL	DIOKISI / INO	IM - IM	1010	K12				2,0	2 0 -	0.0	0.0	5.7.2	6
UNIT#	NAME: LAST, F									DATE OF B	BIRTH		AGE	GENDER
0 ₁ SITKO, CYNTHIA, A							0 9 2 9 1 9 5 6 6 3 F							
5632 POWDER MILL RD , Franklin Twp , OH 44240							CONTACT	HONE - INCLU	DE AREA COL	DE				
			nkiin .					· .	L					
INJURIES	INJURED E TAKEN BY	EMS AGENCY (NAME)		INJUREDT	AKEN TO:	MEDICAL FACILITY	NAME, CITY)	SAFETY EQUIPMENT	DOT-Con	(PLIANT	G POSITION	AIR BAG US	AGE EJECTION	1 .
DL STATE		ICENSE NUMBER		OFFENS	E CHAR	GED	LOCAL	0 4		MET 0		CITATIO	N NUMBER	1_1_
О. Н.		RG933260					CODE	011 21102 8200				OTIATIO	N NOMBER	
L CLASS	ENDORSEMENT	RESTRICTION SELECT			ALCO	HOL / DRUG SUSPE	CTED	CONDITION		OHOL TEST	and of		RUG TEST(S	
	SELECT UP TO 2		BY	TRACTED	AL	COHOL MAR	RUUANA		STATUS	PE VAL	NE S	TATUS T	YPE RESUL	T SELECT UP TO
4				1	ОТ	HER DRUG		1				1		_!!_
UNIT #	NAME: LAST, F	•	ОТТ						_	DATE OF E			AGE	GENDE
0 2	HUBIN STREET, CITY, ST	, ANTHONY, SC	011							0 8 1			33	<u> </u> M
		AN DR ,Brimfield	d Turn	ОН	14241	n			CONTACT	PHONE - INCLU	IDE AREA CO	DΕ		-
		EMS AGENCY (NAME)	тир			MEDICAL FACILITY	NAME CITY	SAFETY EQUIPMENT	<u> </u> -	SEATIN	G PASITIAN	AID DAG IIG	GAGE EJECTION	al TRADDE
5	TAKEN BY			Insorts	MILLIO TO			USED 0 4	DOT-COM	RPLIANT	. 1	1	1	1
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4 UNIT#	NAME: LAST, F	TIPET MIRDLE				THER DRUG		<u> </u>		DATE OF E		1 1	AGE	GENDE
01411 #	MAMIE: LASI, P	TRST, MIDDLE								DATE OF E	ork i ti		MAE	GENDE
ADDRESS:	STREET, CITY, ST	ATE, ZIP							CONTACT	PHONE - INCLU	DE AREA CO	DE .	1	1
NJURIES		EMS AGENCY (NAME)		INJURED T	TAKEN TO:	MEDICAL FACILITY	(NAME, CITY)		DOT-Cor	SEATIN	IG POSITION	AIR BAG US	SAGE EJECTION	TRAPPE
	TAKEN BY							USEO	MC HE	MET				الـ
L STATE	OPERATOR L	ICENSE NUMBER		OFFENS	SE CHAR	RGED	LOCAL	OFFENSE DESC	RIPTION	·····		CITATIO	N NUMBER	
				L,										
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					=	THER DRUG							di-n-	
11 C 11 J. 181	JRIES	SEATING POSITION		AIR BAG	Was.	OL CLASS	5	OL RESTRIC	The Land Control of the Control	DRIVER D	ISTRACT	Land Control Agency	TEST ST	ATUS
FATAL SUSPECTED	SERIQUS INJURY	1 FRONT-LEFT SIDE (MOTORCYCLE DRIVER)	1 - NOT DEP 2 - DEPLOY			1 - CLASS A 2 - CLASS B		1 - ALCOHOL INTER 2 - CDL INTRASTAT		1 - NOT DISTRA 2 - MANUALLY	MINESS 145		- NONE GIVEN TEST REFUSED	
SUSPECTED	MINOR INJURY	2 FRONT - MIDDLE	3 - DEPLOY	ED SIDE		3 - CLASS C	-102-1	3 - CORRECTIVE LE		ELECTRON	C COMMUNK	CATION 3	-TEST GIVEN, COI	
POSSIBLE IN No apparen		3 - FRONT - RIGHT SIDE 4 - SECOND - LEFT SIDE	4 - DEPLOY 5 - NOT APP	ED BOTH FRO	NT / SIDE	4 - REGULAR CLASS (OHIO = D)		4 - FARM WAIVER 5 - EXCEPT CLASS	A DUC	DIALING)			SAMPLE / UNUS. -TEST GIVEN, RE	
5 (1-7)		(MOTORCYCLE PASSENGER) 5 - SECOND - MIDDLE		MENT UNKNO)WN	5 - MJC MOPED ONLY		6 - EXCEPT CLASS		3 -TALKING ON COMMUNIC	ATION DEVIC		-TEST GIVEN, RE	SULTS
NJURED Nottransp	TAKEN BY PORTED	6 SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTO	R-TRAILER	4 - TALKING ON COMMUNIC	HAND-HELD ATION DEVICE	F		CTIVE
/TREATED A		7-THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	E. 1'- NOT EJE	JECTION	6.55668	OL ENDORSE!	MENT	8 - INTERMEDIATE RESTRICTIONS		5 - OTHER ACT		AN .	ALCOHOLTE -NONE	STITPE
POLICE		8 THIRD-MIDDLE		LY EJECTED		M - MOTORCYCLE		9-LEARNER'S PER	RMIT	6 - PASSENGER			-BLOOD	
OTHER / UNI	KNO₩N	9-THIRD - RIGHT SIDE. 10-SLEEPER SECTION	3-TOTALLY			P - PASSENGER		RESTRICTIONS 10 - LIMITED TO DAY	(LIGHT ONLY	7 - OTHER DIST		AND INDEPON	- URINE - BREATH	
AFETY E	QUIPMENT	OF TRUCK CAB	4 - NOT APP	LICABLE		N - TANKER Q - MOTOR SCOOTER		11 - LIMITED TO EM		8 - OTHER DIST	TRACTION OU		-OTHER	
NONE USED	BELT ONLY USED	11 - PASSENGER IN OTHER ENCLOSED CARGO AREA	1 - NOTTRA	RAPPED	等地表別	R-THREE-WHEEL MO	TORCYCLE	12 - LIMITED - OTHI 13 - MECHANICAL D		9-OTHER/UN	-Tel:090250		DRUG TEST	TTYPE
LAP BELT OF		(NON-TRAILING UNIT, BUS, PICK-UP WITH CAP)	2 - EXTRICA	ATED BY		S - SCHOOL BUS T - DOUBLE & TRIPLE	TRAILERS	(SPECIAL BRAK	ES, HAND	CUM	DITION	100	- NONE	
4 - SHOULDER & LAP BELT USED 12 - PASSENGER IN UNENCLOSED		12 - PASSENGER IN UNENCLOSED CARGO AREA	MECHANICAL MEANS 3 - FREED BY		X-TANKER/HAZMAT		ADAPTIVE DEVI	ICES)	ES) 1 - APPARENTLY NORMAL		VOMES DU	2 - 8L00D 3 - URINE		
FORWARD FA	About the light to the second	13-TRAILING UNIT		CHANICAL M	EANS	GENDER		14 - MILITARY VEHI 15 - MOTOR VEHICLI	DATE OF THE PARTY	2 - PHYSICAL II	THE STATE OF		-OTHER	
CHILD REST REAR FACIN	RAINT SYSTEM – Ig	14 - RIDING ON VEHICLE EXTERIOR (NON-TRAILING UNIT)				F-FEMALE		AIR BRAKES 16 - OUTSIDE MIRRO		AM RY, DISTURBED)		D	RUG TEST R	at the second second second
BOOSTER SE		15 - NON-MOTORIST				M - MALE U - OTHER / UNKNOWN		17 - PROSTHETIC AT		4 - ILLNESS 5 - FELL ASLEE	P. FAINTED.	PERCHASIN	-AMPHETAMINES -BARBITURATES	
- HELMET US - Protective		99 - OTHER / UNKNOWN						18-OTHER	1 100 00	FATIGUED, E	ETC.	3	-BENZODIAZEPIN	Section 1997
(ELBOW, KN	EES, ETC.)		7.1								INFLUENCE FIONS / DRUG	S	- CANNABINOIDS - COCAINE	
	PEDESTRIAN									/ALCOHOL 9-OTHER / UNI	KNOWN	CONTRACTOR OF THE	-OPIATES/OPIOI	IOS
/ BICYCLE O OTHER / UNI	White was a letter of							30.00					-OTHER	III TP
ALLIEUT DIRE	PLAN LEIS IN LAND	THE RESERVE OF STREET, SHE SHE SHE WAS A STREET, SHE			STATE OF STREET	AN PERSONAL PROPERTY.		PERSONAL PROPERTY AND ADDRESS OF THE		A PARTY OF THE PARTY IN		8	- NEGATIVE RESI	JLI3

Ū	OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER						
_								2,0,2,0	,-,0,0	0,05	7 2	6		
	UNIT # NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER					
Ļ	DO HUBIN, CLAY								[0,7,0,2,2,0,1,3]					
OCCUPANT	ADDRESS: STREET, CITY, STATE, ZIP 4168 CHAPMAN DR ,Brimfield Twp ,OH 44240								CONTACT PHONE - INCLUDE AREA CODE					
220		INJURED		Hield Iwp										
	_	TAKEN	EMS AGENCY (NAME)		DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED									
_	_5_						0,7	MC HELMET	0,6	1	1 1	_1		
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
Ä	ADDRESS:	STREET, CITY,	STATE 710											
OCCUPAN			<u></u>	CONTACT PHONE	- INCLUDE AREA CO	DE								
00	INJURIES	INJURED	EMS AGENCY (NAME)			SEATING POSITION	ATO PAC USAGO	FIEGUN	TRAPPED					
		TAKEN By			INJURED TAKEN TO: MEDICAL FACILI	, , , , , , , , , , , , , , , , , , , ,	SAFETY EQUIPMENT USED	DOT-COMPLIANT	ocarino i comina	AIR BAG USAGE	EVECTION	IKAPPEU		
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
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ANT	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE				
OCCUPAN									1 1					
0	INJURIES	INJURED TAKEN	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACILI	TY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
		ВҮ						MC HELMET						
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DAT	E OF BIRTH		AGE	GENDER		
Ļ.		L												
OCCUPAN	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE - INCLUDE AREA CODE						
220	INJURIES	TALLIDED	FMC 4							11				
	IMJUKIES	INJURIES INJURED EMS AGENCY (NAME) INJURED TAK				ED TAKEN TO. MEDICAL FACILITY (NAME, CITY) SAFETY EQUIPMENT USED			SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
۳		ILUI	IRIES	SAFETY	EQUIPMENT USED		SEATING POS	L.JMC HELMET] []			
	1 - FATA			1 - NONE US			T - LEFT SIDE	TITUK	F CO VOTE TO STATE	AIR BAG U	SAGE			
	2 - SUSI	PECTED SE	RIOUS INJURY	VEHICLE	OCCUPANT	(MOT	ORCYCLE DRIV	1 - NOT DEPLOYED 2 - DEPLOYED FRONT						
	3 - SUSI	PECTED MI	NOR INJURY		R BELT ONLY USED	3 - FRONT DICHT SINE			2 DEDLOVED CIDE					
		SIBLE INJU		3 - LAP BELT	ER & LAP BELT USED	4 - SECO	ND - LEFT SIDE	E 4 - DEPLOYED BOTH						
	5 - NO A	PPARENT	INJURY		STRAINT SYSTEM -		ORCYCLE PASS ND – MIDDLE	ENGER)		FRONT/SIDE				
i			TAKEN BY	FORWARI	FACING	No. of the last	ND – RIGHT SIC	Œ	5 - NOT APPLICABLE 9 - DEPLOYMENT UNKNOWN					
		TRANSPOR		6 - CHILD RE	STRAINT SYSTEM -		D – LEFT SIDE ORCYCLE SIDE	CAR)		EJECTION				
	2 - EMS			7 - BOOSTER		8 - THIR	D - MIDDLE		1 - NOT EJECTED 2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED 4 - NOT APPLICABLE					
	3 - POLI	CE	A Part of the Part	8 - HELMET	USED	the live of the care	D – RIGHT SIDE PER SECTION (
	9 - OTHI	ER / UNKNO)WN	the second second	IVE PADS USED	The state of the s	ENGER IN OTH							
		GEI	IDER		KNEES, ETC.) IVE CLOTHING		O AREA (NON-TE							
	F-FEMA				G – PEDESTRIAN	12 - PASS	ENGER IN UNE							
	M - MALI	R / UNKNO	WN*	/ BICYCL		1 100	O AREA LING UNIT		1 - NOTTRAPPED					
	99 - OTHER /				UNKNOWN	14 - RIDING ON VEHICLE		EXTERIOR	2 - EXTRICATED BY MECHANICAL MEANS					
						A SUPPLEMENTAL SETS OF STREET	TRAILING UNIT) MOTORIST		F-1 (F) (T) (S)	BY NON-ME	CHANIC/	NL.		
							R/UNKNOWN		MEANS					
S	NAME: LAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER		
WITNESS	Annpree.	CTDEFT CITY	PTATE 710					<u></u>			لبلبا	بيا		
WI	ADDRESS:	STREET, CITY,	JIAI E, ZIP					CONTACT PHONE	- INCLUDE AREA CO	DE				
	NAME: LAS	ST, FIRST, MIDD	LE					DAY	E OF BIRTH		ACE	OF NOTE:		
ESS								JAI	- OI DIN IN		AGE	GENDER		
WITNESS	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
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SS	NAME: LAS	ST, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER		
WITNESS	ADDRESS: STREET, CITY, STATE, ZIP													
W								CONTACT PHONE - INCLUDE AREA CODE						
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