OHIO DEPARTMENT TRAFFIC CRASH REPORT *DENOTES MANDATORY FIELD FOR SUPPLEMENT REPORT								LOCAL REPORT NUMBER*				
PHOTOS TAKEN OH-2 OH-3 LOCAL INFORMATION								2 0 2 1 - 0 0 0 1 6 7 2 7				
	*		NCIC*	HIT/SKIP	NUMBER OF UNITS	UNIT IN ERROR						
SECONDARY CRASH	PRIVATE PR	OPERTY C	ity of Kent Pol	0	6 7 0 3	1 - SOLVED	0 2	0 2 98 - ANIMAL 99 - UNKNOWN				
COUNTY* LOCALITY*	LAGE, TOWNSHIP*			CRASH DATE / 1	IME*	CRASH SEVERITY						
	VILLAGE Ker	nt				110101812101211	/11,3,4,6, 5	1-FATAL - 2-SERIOUS INJURY				
ROUTETYPE ROUTE NU	CATION ROAD NAME		ROAD TYPE	LATITUDE DE	CIMAL DEGREES	SUSPECTED						
ROUTE TYPE ROUTE NU		EAST M	AIN		ST	4,1,,1,5,1,	7 3 3	3 - MINOR INJURY SUSPECTED				
ROUTE TYPE ROUTE NU		NORTH REI	ERENCE ROAD NAME (R	DUSE #)	ROAD TYPE	LONGITUDE DE	CIMAL DEGREES	4 - INJURY POSSIBLE				
ROUTE TYPE ROUTE NU	E-		.90			ļ. , ,	- _{[8]1]e[3]8[5]}	1 6 3	5-PROPERTY DAMAGE ONLY			
REFERENCE POINT	DIRECTION FROM REFERENCE		ROUTE TYPE		ROAD TYPE		1	INTERSECTION REL	ATED			
1-INTERSECTION 2-MILE POST	N - NORT S - SOUT		ERSTATE ROUTE(TP) DERAL US ROUTE	AL - ALLEY AV - AVENUE		D - ROAD Q - SQUARE	WITHIN INTE	RSECTION OR ON API	PROACH			
3-HOUSE #	E-EAST W-WES	03-721	TE ROUTE	BL - BOULEVARD								
DISTANCE FROM REFERENCE	DISTANCE UNIT OF MEASURE	CR - NUI	MBERED COUNTY ROUTE	CR - CIRCLE CT - COURT		E - TERRACE		ROADWAY				
THOM HET ENERGE	1 - MILE 2 - FEET		MBERED TOWNSHIP	DR - DRIVE		VA - WAY	ROADWAY DIV	TOED				
	3-YARD			HE - HEIGHTS	PL - PLACE		KOADWAI DIV	1000				
LOCATION 1 - ON ROADWA	N OF FIRST HARME	UL EVENT OSSOVER	l l		H COLLISION/IMPA 4 - REAR-TO-REAR	СТ	DIRECTION OF TRAVE		EDIAN TYPE			
0 1 2-ON SHOULD		RIVEWAY/ALL	l .	DETWICEN	5 - BACKING		N - NORTH , , S - SOUTH		/IDED FLUSH MEDIAN 4 FEET) /IDED FLUSH MEDIAN 4 FEET)			
3 - IN MEDIAN 4 - DN ROADSID		AILWAY GRAD HARED USE P		VEHICLES IN	6 - ANGLE 7 - SIDESWIPE, SAM	E DIRECTION	E - EAST					
5 - ON GORE	T	RAILS			B - SIDESWIPE, OPPO		W-WEST	3 - DIVIO	IVIDED, DEPRESSED MEDIAN			
6 - OUTSIDE TR 7 - ON RAMP	RAFFIC WAY 13-B	IKE LANE DLL BOOTH	3 -	HEAD-ON	9 - OTHER / UNKNOV	٧N			DED, RAISED MEDIAN TYPE)			
B-OFF RAMP	99-0	THER/UNKNO	OWN					9 - OTHE	R/UNKNOWN			
WORK ZONE RELAT	TED	w	ORK ZONE TYPE	LOCATIO	IN OF CRASH IN WO	RK ZONE	CONTOUR	CONDITIONS	SURFACE			
WORKERS PRESEN	ıT		E CLOSURE E SHIFT/CROSSOVER	1	- BEFORE THE 1ST V WARNING SIGN	WORK ZONE	_1_	1	2			
LAW ENFORCEMEN	a la	3 - WOF	RK ON SHOULDER	1	- ADVANCE WARNIN		1 - STRAIGHT LEVEL	1 - DRY	1 - CONCRETE			
EAW EIN ONCEME	TENESCHI		MEDIAN ERMITTENT OR MOVING V	- 1	-TRANSITION AREA -ACTIVITY AREA			2-WET	2 - BLACKTOP, BITUMINOUS,			
ACTIVE SCHOOL ZO	ONE	5 - OTH			-TERMINATION AR	EA	3 - CURVE LEVEL 4 - CURVE GRADE	3 - SNOW 4 - ICE	ASPHALT			
LIGHT O	CONDITION		WE	ATHER				5 - SAND, MUD, DIRT	3 - BRICK/BLOCK 4 - SLAG, GRAVEL,			
1 - DAYLIGHT 1 2 - DAWN/DUSK			1-CLEAR 0 1 2-CLOUDY	6 - SNOW	Checoulling			OIL, GRAVEL 6-WATER (STANDII	STONE			
3 - DARK - LIGH		L.	W 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		CROSSWINDS G SAND, SOIL, DIRT	, SNOW		ואוט-כן				
4 - DARK - ROADWAY NOT LIGHTED 4 - RAIN 9 - FREEZ					NG RAIN OR FREEZI / UNKNOWN	NG DRIZZLE		9 - OTHER/UNKNOWN				
9 - OTHER / UNK			J-SEEL, MAIL	77* QTITE!	/ UNKNOWN			9 - OTHER/UNKNOW	N			
NARRATIVE									Indicate the north			
Do4h:4		. E 4	- W4 M-: C	44	-			1	direction with an "N" on the			
Both units wer									compass diagram.			
1190. Unit Tw	vo was trav	eling in	the left lane a	nd				•				
attempted to	change lar	es strik	ing Unit One.									
					1							
					1	Vinesa Filam James (2)	in days		(4.			
			The transfer of the transfer o						Not To Scale			
			THE STATE OF THE S		- 0	100-0			and in many rather or the community and recoverable to each training of the community of th			
				The Dis.								
				1190 WEST MAIN								
				-								
					_							
CRASH REPORTED	DATE / TIME	DIS	PATCH DATE / TIME	RIVAL DATE / TIME		SCENE CLEARED	DATE / TIME	REPORT TAKEN BY				
1 0 0 8 2 0 2 1	1/11346	1 0 0 8	2 0 2 1 / 1 3 4	7 1 0 0 8	2 + 0 + 2 + 1 + / + 1	3,4,7	1,0,0,8,2,0,2,	1 / 1 4 2 4	MOTORIST			
TOTAL TIME ROADWAY CLOSED INV	OTHER ESTIGATION TIME	TOTAL MINUTES	OFFICER'S NAME*	tthew			CER'S NAME*					
			Butcher, Ma	S BADGE NUMBER		elson, J	OSN BY OFFICER'S BADGE ?	IIIMBED*	SUPPLEMENT (CORRECTION OR ADDITION TO ARE EX.STRUCT REPORT SENT TO COPS)			
0,0,0												

OHIO DEPARTMENT
OF PUBLIC SAFETY
HOTEL SHIPLE SHEETHAN **LOCAL REPORT NUMBER** 2 | 0 | 2 | 1 | - | 0 | 0 | 0 | 1 | 6 | 7 | 2 | 7 | OWNER NAME: LAST, FIRST, MIDDLE (X) SAME AS DRIVER) OWNER PHONE: INCLUDE AREA CODE (XI SAME AS DRIVER) DAMAGE 0 | 1 | REED, WILLIAM, R DAMAGE SCALE OWNER ADDRESS: STREET, CITY, STATE, ZIP (X SAME AS DRIVER) 1 - NONE 3 - FUNCTIONAL DAMAGE 57 NORTH RIVER RD , Munroe Falls , OH 44262 □ 2 - MINOR DAMAGE 4 - DISABLING DAMAGE COMMERCIAL CARRIER: NAME ADDRESS CITY STATE ZIP 9 - UNKNOWN COMMERCIAL CARRIER PHONE: INC. UDF AREA CODE DAMAGED AREA(S) INDICATE ALL THAT APPLY LP STATE | LICENSE PLATE # **VEHICLE IDENTIFICATION #** VEHICLE YEAR **VEHICLE MAKE** $[5_{1}T_{1}D_{1}B_{1}K_{1}3_{1}E_{1}H_{1}4_{1}B_{1}S_{1}0_{1}5_{1}8_{1}7_{1}3_{1}1]$ FIU3542 OH 2 | 0 | 1 | 1 | Tovota **INSURANCE COMPANY INSURANCE POLICY #** INSURANCE VERIFIED COLOR VEHICLE MODEL **USAA** 034344155G GRN HIGHLANDER TYPE OF USE US DOT # TOWED BY: COMPANY NAME COMMERCIAL GOVERNMENT RESPONSE HAZARDOUS MATERIAL **VEHICLE WEIGHT GVWR/GCWR** #DCCUPANTS MATERIAL CLASS # PLACARD ID # 1 - ≤10K LBS 2 - 10,001 - 26K LBS HIT/SKIP UNIT DEVICE RELEASED PLACARD 0 2 3 - >26K LBS للا ل 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-BUS (16+ PASSENGERS) 24-WHEELCHAIR (ANY TYPE) 0 3 3 - SPORT UTILITY VEHICLE 9 - AUTOCYCLE 14-SINGLE UNIT TRUCK 20 - OTHER VEHICLE 25 - OTHER NON-MOTORIST UNIT TYPE 4 - PICK UP 10 - MOPED OR MOTORIZED 15-SEMI-TRACTOR 21 - HEAVY EQUIPMENT 26 - BICYCLE 5 - CARGO VAN BICYCLE 16-FARM EQUIPMENT 22 - ANIMAL WITH RIDER OF 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? 1 - DRIVER ASSISTANCE 0 A - HIGH AUTOMATION 2 1-YES 2-NO 9-OTHER/UNKNOWN 2 - PARTIAL AUTOMATION 5 - FULL AUTOMATION AUTONOMOUS MODE LEVEL 1 - NONE 6 - BUS - CHARTER/TOUR 1) - FIRE 16 - FARM 21 - MAIL CARRIER 0 1 2 - TAX! 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 12 1 - NO CARGO BODY TYPE 3 - VEHICLE TOWING ANOTHER 5 - INTERMODAL CONTAINER 8 - POLE 12 - CONCRETE MIXER CARGO / NOT APPLICABLE MOTOR VEHICLE 9 - CARGOTANK 13-AUTOTRANSPORTER 2 - BUS 4 - LOGGING 6 - CARGO VAN/ENCLOSED BOX 10-FLAT BED 14-GARBAGE/REFUSE BODY * 7 - GRAIN/CHIPS/GRAVEL TYPE 11 - DUMP 99-OTHER/UNKNOWN 00 1 - TURN SIGNALS 4 - BRAKES 7 - WORN OR SLICKTIRES 9 - MOTOR TROUBLE 99-OTHER/UNKNOWN VEHICLE 2 - HEAD LAMPS 5 - STEERING 8 - TRAILER FOULPMENT 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 10 - DRIVEWAY ACCESS **□-TOP** [13] - ALL AREAS [15] NON-MOTORIST 2-INTERSECTION - UNMARKED CROSSWALK 99-OTHER/UNKNOWN 8 - SIDEWALK 11 - SHARED USE PATHS OR LOCATION AT IMPACT CROSSWALK 5 - TRAVEL LANE - OTHER LOCATION - UNIT NOT AT SCENE [16] TRAILS. 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 4 0 - NO DAMAGE 14 - UNDERCARRIAGE 0 1 3 - CHANGING LANES SPECIFIED LOCATION 19-STANDING ☐ 3-STRIKING 9 - LEAVING TRAFFIC LANE 1-12 - REFER TO UNIT 15 - VEHICLE NOT AT SCENE ACTION 4- STRUCK 15 - WALKING, RUNNING, PRE-CRASH 4 - OVERTAKING/PASSING 20 - OTHER NON-MOTORIST $\lfloor 1 \rfloor 1_L$ 10-PARKED DIAGRAM JOGGING, PLAYING 99 - IINKNOWN 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 9-OTHER/UNKNOWN 12 - DRIVERLESS TRAFFIC 1 - NONE 13-IMPROPER START FROM A 7-LEFT OF CENTER 17 - VISION OBSTRUCTION 21 - LYING IN ROADWAY TRAFFICWAY FLOW TRAFFIC CONTROL PARKED POSITION 2 - FAILURE TO YIELD B-FOLLOWING TOO CLOSE / ACDA 18-OPERATING DEFECTIVE 22 - NOT DISCERNIBLE 1 - ONE-WAY 1 - ROUNDABOUT 4 - STOP SIGN 14 - STOPPED OR PARKED 3 - RAN RED LIGHT 9 - IMPROPER LANE CHANGE **EQUIPMENT** 23 - OPENING DOOR INTO $\lfloor 0 \rfloor 1 \rfloor$ ILLEGALLY 2 - TW0-WAY 2 SIGNAL 5 - YIELD SIGN 19-LOAD SHIFTING/FALLING/ ROADWAY 4 - RAN STOP SIGN 10-IMPROPER PASSING 15 - SWERVING TO AVOID 3 - FLASHER 6 - NO CONTROL CONTRIBUTING 5 - UNSAFE SPEED **SPILLING** 99 - OTHER IMPROPER ACTION 11 - DROVE OFF ROAD 16 - WRONG WAY 20 - IMPROPER CROSSING # OF THROUGH LANES 6 - IMPROPERTURN 12-IMPROPER BACKING RAIL GRADE CROSSING ON ROAD 1 - NOT INVOLVED SEQUENCE OF EVENTS 2 - INVOLVED-ACTIVE CROSSING 4 NON-COLLISION 1 2 0 1 - OVERTURN/ROLLGVER 3 - INVOLVED-PASSIVE CROSSING 6 - EQUIPMENT FAILURE 11 - CROSS CENTER! INF -16 - RAILWAY VEHICLE 22 - WORK ZONE MAINTENANCE OPPOSITE DIRECTION OF 2 - FIRE/EXP_OSION 7 - SEPARATION OF UNITS 17 - ANIMAL - FARM **EQUIPMENT** TRAVEL 23 - STRUCK BY FALLING. UNIT / NON-MOTORIST DIRECTION 3 - IMMERSION 8 - RAN OFF ROAD RIGHT 15-ANIMAL - DEER 12-DOWNHILL RUNAWAY SHIFTING CARGO OR 1 - NORTH 5 - NORTHEAST 19-ANIMAL - OTHER J 4 - JACKKNIFE 9 - RAN OFF ROAD LEFT 13-OTHER NON-COLLISION ANYTHING SET IN MOTION 20 - MOTOR VEHICLE IN 2 - SOUTH 6 - NORTHWEST 5 - CARGO / EQUIPMENT 10 - CROSS MEDIAN BY A MOTOR VEHICLE 14-PEDESTRIAN TRANSPORT FROM 4 TO 3 3 - FAST 7 - SOUTHEAST LOSS OR SHIFT 24-OTHER MOVABLE OBJECT 15-PEDALCYCLE 21 - PARKED MOTOR VEHICLE 8 - SOUTHWEST 4 - WEST COLLISION WITH FIXED OBJECT - STRUCK 25-IMPACT ATTENUATOR 9 - OTHER / UNKNOWN 31 - GUARDRAIL END 37 - TRAFFIC SIGN POST 50 - WORK ZONE MAINTENANCE 43 - CURB / CRASH CUSHION 32 - PORTABLE BARRIER 38-OVERHEAD SIGN POST 44 - DITCH **EQUIPMENT** UNIT SPEED DETECTED SPEED 26 - BRIDGE OVERHEAD 51-WALL 33 - MEDIAN CABLE BARRIER 39-LIGHT/LUMINARIES 45 - EMBANKMENT 1 - STATED / ESTIMATED SPEED STRUCTURE SUPPORT 34 - MEDIAN GUARDRAIL 46-FENCE 52 - BUILDING [0, 2, 5]27 - BRIDGE PIER OR ABUTMENT BARRIER 40 - UTILITY POLE ☐ 2 - CALCULATED / EDR 53-TUNNEL 47 - MAILBOX 28 - BRIDGE PARAPET 35 - MEDIAN CONCRETE 41 - OTHER POST, POLE 54-OTHER FIXED OBJECT

48 - TREE

49-FIRE HYDRANT

99 - OTHER / UNKNOWN

OR SUPPORT

42 - CULVERT

1 MOST HARMFUL EVENT

1 29 - BRIDGE RAIL

30 - GUARDRAIL FACE

→ FIRST HARMFUL EVENT

BARRIER

36 - MEDIAN OTHER BARRIER

3 - UNDETERMINED

POSTED SPEED

_2 , 5 ,

HSY8304 OH1U 1/19 [760-0820]

LOCAL REPORT NUMBER

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

UNIT#	OWNER NAME: LAST, FIR	ST. MIDDLE (TXISAME AS DRIVER)		OWNER PHONE: N	unc sees over . ICH enough		DAMAGE		
0 2	KACZMAREK, LA				DAMAGE SCALE				
<u> </u>	DRESS: STREET, CITY, STATE		1 - NONE 3 - FUNCTIONAL DAMAGE						
4	RRY RD ,Charlestov					2 2-MINOR DA			
	CIAL CARRIER: NAME, ADD					Į			
COMMERC	INC UMRRIER: NAME, AUJ	1235, CITT, STATE, ZIP		COMMERCIAL GARRIE	R PHONE: INCLUDE AREA CODE		9 - UNKNOWN		
							MAGED AREA(S)		
LP STATE	LICENSE PLATE#	VEHICLE	IDENTIFICATION #	VEHICLE YE	AR VEHICLE MAKE	INDIC	ATE ALL THAT APPLY		
O_1H_1	KISINC	$1 G_1 N_1 S_1 K_1 J_1 K_2$	${}^{4}J_{1}7_{1}L_{1}R_{1}1_{1}1_{1}3_{1}$	7 9 0 2 0 2	0 Chevrolet	12 _	12		
INSURA	NCE INSURANCE COMP	PANY	NSURANCE POLICY #	COLOR	VEHICLE MODEL	11 1	11 1		
X INSURA VERIFI	ED ERIE	C	0045117328	WHI	SUBURBAN	10 12	10 12 2		
	TYPE OF USE		US DOT #	TOWED BY: COMPAN			1		
COMME	r—,	IN EMERGENCY RESPONSE		TOWER DI. COMPAN	IT MANE	9 9 3			
			HICLE WEIGHT GVWR/GCWR	HAZARD	DUS MATERIAL				
INTER	LOCK	#UCCUPANIS	nicle weight gvwk/gcwk 1 - ≤10K LBS.	MATERIAL	CLASS # PLACARD ID #	7 7	7		
LUPEVIC	E HIT/SKIP UNI		2 - 10,001 - 26K LBS	RELEASED		1 1			
Legon		0,1	3 - >26K LBS	PLACARD		7 5	12 7 5		
	1 - PASSENGER CAR	7 - MOTORCYCLE 2-WHEELED	12-GOLF CART	18 - LIMO (LIVERY VEHICLE)	23 - PEDESTRIAN / SKATER	1 6	12 6		
0.2	2 - PASSENGER VAN (MINIVAN)	8 - MOTORCYCLE 3-WHEELED	13-SNOWMOBILE	19-BUS (16+ PASSENGERS)	24-WHEELCHAIR (ANY TYPE)	10 /	11 1 2		
0 3	3 - SPORT UTILITY VEHICLE	9 - AUTOCYCLE	14-SINGLE UNITTRUCK	20 - OTHER VEHICLE	25 - OTHER NON-MOTORIST	_	10 2		
UNIT TYPE	4 - PICK UP	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	\	0 11 4		
	6 - VAN (9-15 SEATS)	11 - ALL TERRAIN VEHICLE	17 - MOTORHOME	ANIMAL-DRAWN VEHICLE	99 - UNKNOWN OR HIT/SKIP	.\	7 5		
00	#	(ATV / UTV)			77 3111141114 31111121111	, ×	1 7		
	# OFTRAILING UNITS					12	5 12		
	WAS VEHICLE OPERATING IN AU	TANAMAIIS	0 - NO AUTOMATION	3 - CONDITIONAL AUTOMATION	a . Hinanumin	12	12		
	MODE WHEN CRASH OCCURRED		1 - DRIVER ASSISTANCE	4 - HIGH AUTOMATION	7 - UNICHUMN	10 1 2	10 1 2		
, 2	1-YES 2-NO 9-OTHER/UNK	NOWN LUC	2 - PARTIAL AUTOMATION	5 - FULL AUTOMATION		10 2	10 2		
	- 100 E-110 3-010E03 000	NOWN AUTONOMOUS MODE LEVEL	- COLLEGE OF LABOURAL	5 OLE MOTOMATION		9 9 3	3 9 9 3		
	1 - NONE	6 - BUS - CHARTER/TOUR	11-FIRE	16-FARM	21 - MAIL CARRIER	8 4	8 4		
0 1	2 - TAXI	7 - BUS - INTERCITY	12-MILITARY			7 5 /4	7 5		
$\lfloor 0 \mid 1 \rfloor$	3 - ELECTRONIC RIDE SHARING	P DIE CHITTIE		17 - MOWING	99 - OTHER / UNKNOWN	1 X 1			
SPECIAL	A POLICO TOLLIC STARTING	0 - 003 - 3001111	13-POLICE	18-SNOW REMOVAL			7 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		
	1 - NO CARGO BODY TYPE	3 - VEHICLE TOWING ANOTHER	5 - INTERMODAL CONTAINER	8 - POLE	12 - CONCRETE MIXER				
0 1	/ NOT APPLICABLE	MOTOR VEHICLE	CHASSIS	9 - CARGOTANK	13-AUTO TRANSPORTER	12			
CARGO BODY	2 - BUS	4 - LOGGING	6 - CARGO VAN/ENCLOSED BOX	10-FLAT BED	14-GARBAGE/REFUSE	200			
TYPE			7 - GRAIN/CHIPS/GRAVEL	11-DUMP	99 - OTHER / UNKNOWN	9 () 3 9	6 3 9 1 3 9 8 3		
				11.00(11)	77-01 TEKT OFRIOTH				
1 1 1	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					
DEFECTS	3 - TAIL LAMPS	6 - TIRE BLOWOUT	DEFECTIVE	ACCIDENT			6 6		
		···-				- NO DAMAGE [0] UNDERCARRIAGE [14]		
	1 - INTERSECTION - MARKED	3 - INTERSECTION - OTHER	6 - BICYCLE LANE	9 - MEDIAN/CROSSING ISLAND	12-FIRST RESPONDER				
NAM MATABLET	CROSSWALK	4 - MIDBLOCK - MARKED	7 - SHOULDER / ROADSIDE	10-DRIVEWAY ACCESS	AT INCIDENT SCENE	-TOP [13]	- ALL AREAS [15]		
LOCATION	2 - INTERSECTION - UNMARKED CROSSWALK	CROSSWALK	8 - SIDEWALK	11 - SHARED USE PATHS OR	99-OTHER/UNKNOWN				
AT IMPACT	GHOGSHALA	5 - TRAVEL LANE - OTHER LOCATION		TRAILS		☐ - NNI.	NOT AT SCENE [16]		
	1 - NON-CONTACT	1 - STRAIGHT AHEAD	7 - MAKING U-TURN	13 - NEGOTIATING A CURVE	18 - APPROACHING				
-	2 - NON-COLLISION	2 - BACKING		14 - ENTERING OR CROSSING	OR LEAVING VEHICLE	INITIA	L POINT OF CONTACT		
	3-STRIKING 0 3	3 - CHANGING LANES	9 - LEAVING TRAFFIC LANE	SPECIFIED LOCATION	19-STANDING	0 - NO DAMAC	E 14 - UNDERCARRIAGE		
ACTION	4. STRUCK PRE-CRASH	4 - OVERTAKING/PASSING	10-PARKED	15 - WALKING, RUNNING,	20-OTHER NON-MOTORIST	0 1 1-12-REFER	TO UNIT 15-VEHICLE NOT AT SCENE		
	5 - BOTH STRIKING ACTIONS	E - MAVING DICUTTUDA	11 - SLOWING OR STOPPED	JOGGING, PLAYING	21 - STANDING OUTSIDE	DIAGRA	M 99 - UNKNOWN		
	& STRUCK	6 - MAKING LEFT TURN	IN TRAFFIC	16-WORKING	DISABLED VEHICLE	13 - TOP			
	9 - OTHER / UNKNOWN	0 - MANING CELLIONA	12-DRIVERLESS	17 - PUSHING VEHICLE	99-OTHER/UNKNOWN				
							TRAFFIC		
	1 - NONE	7-LEFT OF CENTER	DADUED DOCUMEN	17 - VISION OBSTRUCTION	21 - LYING IN ROADWAY	TRAFFICWAY FLOW	TRAFFIC CONTROL		
1,000	2 - FAILURE TO YIELD	8 - FOLLOWING TOO CLOSE / ACDA	PARKED POSITION 14-STOPPED OR PARKED	18 - OPERATING DEFECTIVE	22 - NOT DISCERNIBLE	1 - ONE-WAY	1 - ROUNDABOUT 4 - STOP SIGN		
0,9	3 - RAN RED LIGHT	9-IMPROPER LANE CHANGE	ILLEGALLY	EQUIPMENT	23 - OPENING DOOR INTO	2 2 TWO-WAY	6 , 2 - SIGNAL 5 - YIELD SIGN		
	4 - RAN STOP SIGN	10-IMPROPER PASSING	15 - SWERVING TO AVOID	19-LOAD SHIFTING/FALLING/ SPILLING	ROADWAY		3 - FLASHER 6 - NO CONTROL		
CIRCUMSTANCES	5 - UNSAFE SPEED	11 - DROVE OFF ROAD	16 - WRONG WAY	20 - IN PROPER CROSSING	99 - OTHER IMPROPER ACTION				
	6 - IMPROPERTURN	12-IMPROPER BACKING	as milette that	20-IN PROPER GRUSSING		# OF THROUGH LANES	RAIL GRADE CROSSING		
SEQUENCE	OF EVENTS					ON ROAD	1 - NOT INVOLVED		
			NON-COLLISION			, 4	1 2 - INVOLVED-ACTIVE CROSSING		
2 . 0 .	1 - OVERTURN/ROLLGVER	6 - EQUIPMENT FAILURE	11 - CROSS CENTERLINE -	16 - RAILWAY VEHICLE	22 - WORK ZONE MAINTENANCE		3 - INVOLVED-PASSIVE CROSSING		
1 2 0	2 - FIREJEXPLOSION	7 - SEPARATION OF UNITS	OPPOSITE DIRECTION OF	17 - ANIMAL — FARM	EQUIPMENT				
	3 - IMMERSION	8 - RAN OFF ROAD RIGHT	TRAVEL	18-ANIMAL - DEER	23-STRUCK BY FALLING,	UNIT / NO	I-MOTORIST DIRECTION		
2	4 - JACKKNIFE	9 - RAN OFF ROAD LEFT	12 - DOWNHILL RUNAWAY	19-ANIMAL - OTHER	SHIFTING CARGO OR		1 - NORTH 5 - NORTHEAST		
	5 - CARGO / EQUIPMENT	10-CROSS MEDIAN	13-OTHER NON-COLLISION	20 - MOTOR VEHICLE IN	ANYTHING SET IN MOTION BY A MOTOR VEHICLE	_	2 - SOUTH 6 - NORTHWEST		
	LOSS OR SHIFT	viivee distinii	14-PEDESTRIAN	TRANSPORT	24-OTHER MOVABLE OBJECT	FROM 4 TO L	3 - EAST 7 - SOUTHEAST		
3			15-PEDALCYCLE	21 - PARKED MOTOR VEHICLE			4 - WEST 8 - SOUTHWEST		
	N-UUE-ALD ST		WITH FIXED OBJECT				9 - OTHER / UNKNOWN		
41_1_1	25 - IMPACT ATTENUATOR / CRASH CUSHION	31 - GUARDRAIL END	37 - TRAFFIC SIGN POST	43 - CURB	50 - WORK ZONE MAINTENANCE				
	26 - BRIDGE OVERHEAD	32 - PORTABLE BARRIER	38 - OVERHEAD SIGN POST	44 - DITCH	EQUIPMENT	UNIT SPEED	DETECTED SPEED		
	STRUCTURE	33 - MEDIAN CABLE BARRIER	39-LIGHT/LUMINARIES	45 - EMBANKMENT	51 - WALL		1 - STATED / ESTIMATED SPEED		
5	27 - BRIDGE PIER OR ABUTMENT	34 - MEDIAN GUARDRAIL Barrier	SUPPORT 40 LITH ITY POLE	46 - FENCE	52 - BUILDING	10 10 15 1			
	28 - BRIDGE PARAPET	35 - MEDIAN CONCRETE	40 - UTILITY POLE 41 - OTHER POST, POLE	47 - MAILBOX	53 - TUNNEL		2 - CALCULATED / EDR		
61 1 1	29 - BRIDGE RAIL	BARRIER	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		1				2 5			
	FIRST HARMFUL EVEN	T MOST H	ARMFUL EVENT						

CONTRACTOR DEPORTMENT MOTORIST / NON-MOTORIST							LOCAL REPORT NUMBER							
								2,0,2,1,-,0,0,0,1,6,7,2,7,						
UNIT#		NAME: LAST, FIRST, MIDDLE REED, WILLIAM, R							DATE OF BIRTH AGE GENDER					
0,1		STREET, CITY, STATE, ZIP							1 0 / 1 4 / 1 9 6 0 6 0 M					
		H RIVER RD ,Munroe Falls ,OH 44262							CONTACT PHONE - INCLUDE AREA CODE					
INJURIE	S INJURED	EMS AGENCY (NAME)				: MEDICAL FACILITY	(NAME, CITY)	SAFETY EQUIPMENT	15	SEATING POSITIO	N AID DAG I	JSAGE EJECTION	N TRAPPED	
5	TAKEN BY							USED 0 4	DOT-C	DMPLIANT	1	1 1 1 1		
	OPERATOR LICENSE NUMBER OFF			OFFENSI	E CHAR	RGED	LOCAL	OFFENSE DESC	<u> </u>				11	
OL STAT	-				CODE									
OL CLAS	S ENDORSEMENT SELECT UP TO 2							CONDITION	ALC STATUS T	COHOL TEST		DRUG TEST(S) TYPE RESULT SELECT UP TO 4		
4								1 .	1	1	1			
UNIT #	NAME: LAST, F	FIRST, MIDDLE			2 OTREK DRUG			DATE OF BIRTH AGE GENDER						
0,2	KACZI	MAREK, LAWR	ENCE	ı					1 2	/ 3, 1, / ,1	9 5 0		M	
ADDRES	S: STREET, CITY, ST.	ATE, ZIP			-				CONTACT PHONE - INCLUDE AREA CODE					
ADDRES 6711 INJURIE 5	BERRY I	RD ,Charlestown	,OH 4	4266					ł					
INJURIE	S INJURED TAKEN	EMS AGENCY (NAME)		INJUREDTA	KEN TO:	: MEDICAL FACILITY	(NAME_CITY)	SAFETY EQUIPMENT	DOT-C:	SEATING POSITIO	N AIR BAG U	ISAGE EJECTION	TRAPPED	
	_	VOCALGE AUTO-					-	0,4	MC HE	LMET 0 1	1	1	_1_	
OL STAT		ICENSE NUMBER		OFFENSE		RGED	LOCAL CODE	OFFENSE DESC				ON NUMBER		
OL STAT	S ENDORSEMENT	RESTRICTION SELECT	UPTO3 DRF	331.0		HOL / DDITE EUEDI	X	Driving i		ked La	1641	.5 DRUG TEST(S	5)	
	SELECT UP TO 2			TRACTED ALCOHOL / DRUG SUSPECTED ALCOHOL MARIJUANA			CONDITION					T SELECT UPTO 4		
4_	<u></u>				1 OTHER DRUG			1						
UNIT#	NAME: LAST, FIRST, MIDDLE								DATE OF BIRTH AGE GENDER					
L ADDDES														
S ADDRES	ADDRESS: STREET, CITY, STATE, ZIP							CONTACT PHONE - INCLUDE AREA CODE						
INJURIE	S INJURED	EMS AGENCY (NAME)		INJURED TA	KEN IO:	: MEDICAL FACILITY	ONABLE CITY	SAFETY EQUIPMENT		SEATING DAGITION	N 410 040 H	ICADE FIEDERAL	1 7949959	
ADDRES	TAKEN BY				USED			DOT-COMPLIANT SEATING POSITION AIR BAG USAGE EJECTION TRAPPED MC HELIMET						
OL STAT	E OPERATOR L	ICENSE NUMBER	_	OFFENSE				OFFENSE DESC	CRIPTION CITATION NUMBER			ON NUMBER	11	
OL STAT							CODE							
≥ OL CLAS	S ENDORSEMENT SELECT UP 102	RESTRICTION SELECT	DIST	IVER ALCOHOL / DRUG SUSPEC			CONDITION	ALCOHOL TEST STATUS TYPE VALUE ST			DRUG TEST(S) TATUS TYPE RESULT SELECT			
			BY		= -	THER DRUG	RIJUANA			_				
Company of the last	JURIES	SEATING POSITION	A	IR BAG		OL CLASS	S	OL RESTRIC	TION(S)	DRIVER DISTRAC		TEST ST		
1 - FATAL 2 - SUSPECTI	ED 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 DISTRACTED 2 - MANUALLY OPERATING		- NONE GIVEN		
3 - SUSPECTI	ED MINOR INJURY	2 - FRONT - MIDDLE	3 - DEPLOYE			3 - CLASS C		3 - CORRECTIVE LE		ELECTRONIC COMMUN DEVICE (TEXTING, TYP	ICATION 3	-TEST REFUSED -TEST GIVEN, COI		
4 - POSSIBLE 5 - NO APPAR		3 - FRONT - RIGHT SIDE , 4 - SECOND - LEFT SIDE		ED BOTH FRONT Licable	OTH FRONT / SIDE 4 - REGULAR CLASS OHIO = D)			4 - FARM WAIVER 5 - EXCEPT CLASS A		DIALING)	ING, SAMPLE/UNUSABLE		STATE OF STREET	
WE EAR	D TAKEN BY	(MOTORCYCLE PASSENGER) 5 - SECOND – MIDDLE		MENT UNKNOW	IN	5 - M/C MOPED ONLY		6 - EXCEPT CLASS		3 -TALKING ON HANDS-FR COMMUNICATION DEVI	Et _	-TEST GIVEN, RE	500mm出版の2	
1 - NOT TRAN	SPORTED	6 - SECOND - RIGHT SIDE				6 - NO VALID OL		& CLASS B BUS 7 - EXCEPT TRACTO	R-TRAILER	4 -TALKING ON HAND-HEL COMMUNICATION DEVI	CF	ALCOHOL TE	CT TVDE	
2 - EMS	AT SCENE	7 - THIRD - LEFT SIDE (MOTORCYCLE SIDE CAR)	1 - NOT EJE	CTED		OL ENDORSEN H-HAZMAT	MENT	8 - INTERMEDIATE RESTRICTIONS	LICENSE	5 - OTHER ACTIVITY WITH ELECTRONIC DEVICE	AN	-NONE	ST TIPE	
3 - POLICE		8 - THIRD - MIDDLE 9 - THIRD - RIGHT SIDE		LY EJECTED		M - MOTORCYCLE		9 - LEARNER'S PER RESTRICTIONS	MIT	6 - PASSENGER		-BLOOD -URINE		
9-OTHER/U	NKNUWN	10 - SLEEPER SECTION	3 - TOTALLY 4 - NOT APP			P - PASSENGER N -TANKER		10 - LIMITED TO DAY	LIGHT ONLY	7 - OTHER DISTRACTION INSIDE THE VEHICLE		-BREATH		
1-NONE USE	EQUIPMENT	OF TRUCK CAB 11 - Passenger in Other	TI	RAPPEN		Q - MOTOR SCOOTER		11 - LIMITED TO EMP		8 - OTHER DISTRACTION O THE VEHICLE	UTSIDE 5	-OTHER		
2 - SHOULDE	2 - SHOULDER BELT ONLY USED ENCLOSED CARGO AREA (NON-TRAILING UNIT, BUS,		1 MOTTDADDED			S - SCHOOL BUS 13 - MECHANICA		13 - MECHANICAL DE	DEVICES 9-OTHER/UNKNOWN		DRUG TEST TYPE			
3 - LAP BELT 4 - SHOULDE	ONLY USED R & LAP BELT USED	PICK-UP WITH CAP) 12 - PASSENGER IN UNENCLOSED	2 - EXTRICATED BY MECHANICAL MEANS			T - DOUBLE & TRIPLE TRAILERS		CONTROLS, OR O	THER CONDITION		1,00	I - NONE 2 - BLOOD		
5 - CHILD RE	STRAINT SYSTEM -	CARGO AREA 3 - FREED BY		Y X-TANKER/HAZMAT				ADAPTIVE DEVI		T - M I MICHIEL HOMBAL		3 - URINE		
6- CHILD RE	RD FACING 13-TRAILING UNIT RESTRAINT SYSTEM 14-RIDING ON VEHICLE EXTERIOR		NON-MECHANICAL MEANS			GENDER F-FEMALE		15 - MOTOR VEHICLE AIR BRAKES	S WITHOUT	3 - EMOTIONAL (E.G., DEPRE AHCRY DISTURBED)	SSED	-OTHER	ESIII T(C)	
REAR FAC 7 - 800STER		(NON-TRAILING UNIT) 15 - NON-MOTORIST				M - MALE		16-OUTSIDE MIRRO		4 - ILLNESS	SCHOOL STATE	RUG TEST RI -AMPHETAMINES	decamenda en	
8 - HELMET	USED	99 - OTHER / UNKNOWN				U - OTHER / UNKNOWN		17 - PROSTHETIC AID 18 - OTHER		5 - FELL ASLEEP, FAINTED, FATIGUED, ETC.		- BARBITURATES		
	(NEES, ETC.)									6 - UNDER THE INFLUENCE OF MEDICATIONS / DRUG		- BENZODIAZEPIN - CANNABINOIDS	IE2	
10 - REFLECTI	VE CLOTHING PEDESTRIAN								/ALCOHOL		5	5 - COCAINE		
/ BICYCLE	ONLY									9-OTHER/UNKNOWN		- OPIATES / OPIOII - OTHER	η2	
99-OTHER/U	NKNOWN											- NEGATIVE RESU	ILTS	

OCCUPANT / WITNESS ADDENDUM							LOCAL REPORT NUMBER							
								2,0,2,1,-,0,0,0,1,6,7,2,7						
	UNIT # NAME: LAST, FIRST, MIDDLE							DATE OF BIRTH AGE GEN						
Ļ.	01	01 REED, ANDREW, J ADDRESS: STREET, CITY, STATE, ZIP							0 6 / 0 8 / 2 0 0 9 1 2 M					
OCCUPAN		7 NORTH RIVER RD, Munroe Falls, OH 44262							CONTACT PHONE - INCLUDE AREA CODE					
000		INJURED	EMS Agency (NAME)	unitue Fain	INJURED TAKEN TO: MEDICAL FACE	HITY (HAME SOTAL)	SAFETY EQUIPMENT	١	SEATING POSITION	LAIR BAO UCAOR	LEICATION	TRANSPORT.		
	, 5	TAKEN BY	and rivers from Co		MOUNTED TAKEN TO, MEDICAL TAL	EST THAME, GETT	USED 0,4	DOT-COMPLIANT	. 0 . 6 .	5 5	1	1 1		
2	UNIT #	NAME: LAS	T, FIRST, MIDDLE				0 7	DAT	E OF BIRTH		AGE	GENDER		
				/	. /		AGE	GENDER						
PANT	ADDRESS:	STREET, CITY,	STATE, ZIP		·	-		CONTACT PHONE - INCLUDE AREA CODE						
OCCUPAN								<u> </u>						
٥	INJURIES	INJURED TAKEN	EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACE	LITY (NAME, CITY)	SAFETY EQUIPMENT	DOT-COMPLIANT	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
3		J BY						MC HELMET				لـــــا		
	UNIT#	NAME: LAS	T, FIRST, MIDDLE					DATE OF BIRTH AGE GENDER						
ż	ADDRESS:	STREET, CITY,	STATE 71D											
CCUPAN	712011200.	JACES, GITT,	JIAIL, LII					CONTACT PHONE - INCLUDE AREA CODE						
_	INJURIES		EMS AGENCY (NAME)		INJURED TAKEN TO: MEDICAL FACI	LITY (NAME, CITY)	SAFETY EQUIPMENT		SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
		TAKEN BY				332 177551	USED	DOT-COMPLIANT MC HELMET						
î	UNIT#	NAME: LAS	T, FIRST, MIDDLE		DAT	E OF BIRTH		AGE	GENDER					
Ŀ.									1/,					
CCUPAN	ADDRESS:	STREET, CITY,	STATE, ZIP		CONTACT PHONE - INCLUDE AREA CODE									
	INJURIES	INJURED	EMS Agency (NAME)		INJURED TAKEN TO: MEDICAL FACE		CAPETY FAIRBURIE							
	INSURIES	TAKEN BY	EMS ABERCY (NAME)		INJURED TAKEN TO: MEDICAL PACE	LITY (NAME, CITY)	SAFETY EQUIPMENT USED	DOT-COMPLIANT MC HELMET	SEATING POSITION	AIR BAG USAGE	EJECTION	TRAPPED		
		INJL	JRIES	SAFETY	EQUIPMENT USED		SEATING POS			AIR BAG US	AGE			
	1 - FATAL 1 - NONE USED - 1 - FRONT - LEFT SIDE						1 - NOT DEPLOYED							
			RIOUS INJURY	A SHEET SHEET			ORCYCLE DRIV T – MIDDLE	ER)	2 - DEPLOY	YED FRONT				
		3 - SUSPECTED MINOR INJURY 2 - SHOULDER BELT ONLY USED 3 - LAP BELT ONLY USED					T - RIGHT SIDE		3 - DEPLOY					
		4 - POSSIBLE INJURY 5 - NO APPARENT INJURY 4 - SHOULDER & LAP BELT USED					ND – LEFT SIDE ORCYCLE PASS		4 - DEPLOYED BOTH FRONT/SIDE					
ı	B IS WAS	5 - CHILD RESTRAINT SYSTEM - 5							PLICABLE					
	1 - NOT	TRANSPOR			STRAINT SYSTEM - 7 - THIRD - LEFT SI				9 - DEPLOYMENT UNKNOWN					
	/TREATED AT SCENE REAR FACING						ORCYCLE SIDE D – MIDDLE	CAR)		EJECTIO	N			
	2 - EMS 7 - BOOSTER 3 - POLICE 8 - HELMET						D - RIGHT SIDE		1 - NOT EJECTED					
	3 - POLICE 8 - HELMET USED 9 - OTHER / UNKNOWN 9 - PROTECTIVE PADS USED						PER SECTION (ENGER IN OTH	AT CALL DE LA PROPERTY DE LA PROPERT	2 - PARTIALLY EJECTED 3 - TOTALLY EJECTED					
1		GEN	IDER		(NEES, ETC.)	CARG	O AREA (NON-TE	AILING UNIT,	4 - NOT APPLICABLE					
	F-FEMA				IVE CLOTHING PEDESTRIAN		ICK-UP WITH CAP ENGER IN UNE		TRAPPED					
	M - MALE	E R/UNKNO	WN	/ BICYCLE		CARG 13 - TRAIL	O AREA		I - NOTTRAPPED					
				99 - OTHER / L	INKNOWN	14 - RIDIN	IG ON VEHICLE	EXTERIOR	2 - EXTRICATED BY MECHANICA MEANS			AL		
						(NON-1 15 - NON-1	TRAILING UNIT) MOTORIST			BY NON-ME	CHANICA	(L		
						99 - OTHE	R / UNKNOWN		MEANS					
25	NAME: LAS	IT, FIRST, MIDD	LE				•	DAT	E OF BIRTH		AGE	GENDER		
WITNESS	ADDRESS:	STREET, CITY,	STATE, ZIP				<u> </u>	CONTACT PHONE	- INCLUDE AREA COL	<u> </u>				
ß			50.							~	1			
S	NAME: LAS	T, FIRST, MIDD	l E					DAT	E OF BIRTH	T	AGE	GENDER		
WITNESS	ADDRESS: STREET, CITY, STATE, ZIP													
IM	AUDRESS:	STREET, CITY,	STALE, ZIP					CONTACT PHONE	- INCLUDE AREA COL	DE				
3	NAME: LAS	T, FIRST, MIDD	LE					DAT	E OF BIRTH		AGE	GENDER		
IESS														
WITNESS	ADDRESS:	STREET, CITY,	STATE, ZIP					CONTACT PHONE	- INCLUDE AREA COL	DE		-		
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