


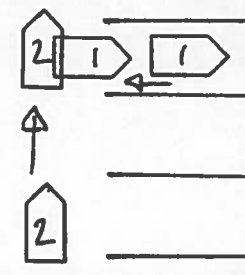
CR NUMBER 20-11795	ACCIDENT DATE 7-28-20	ACCIDENT TIME 1543	DAY OF WEEK TUE	<input checked="" type="checkbox"/> DAYLIGHT <input type="checkbox"/> DAWN OR DUSK <input type="checkbox"/> DARK
LOCATION OF ACCIDENT (STREET NUMBER OR OTHER LOCATION DESCRIPTION) 600 N. MANTUA ST.			WEATHER NO ADVERSE	

VEHICLE NO. 1					VEHICLE NO. 2 (OR PROPERTY DAMAGED)				
DRIVER LAST	FIRST	MIDDLE	DOB		DRIVER LAST	FIRST	MIDDLE	DOB	
BRADY	DAKOTA	K.	5-10-99		OLSEN	MATTHEW	W	1-5-64	
ADDRESS 240 LILAC PL.					ADDRESS 630 VINE ST				
CITY, STATE, ZIP			PHONE NUMBER		CITY, STATE, ZIP			PHONE NUMBER	
BARBERTON, OH, 44203					KENT, OH, 44240				
DRIVER'S LICENSE NUMBER					DRIVER'S LICENSE NUMBER				
					OH				
VEHICLE OWNER'S NAME LAST FIRST MIDDLE					VEHICLE OWNER'S NAME LAST FIRST MIDDLE				
SAME					SAME				
ADDRESS					ADDRESS				
CITY, STATE ZIP					CITY, STATE, ZIP				
PHONE NUMBER					PHONE NUMBER				
VEHICLE YEAR	MAKE	MODEL	COLOR		VEHICLE YEAR	MAKE	MODEL	COLOR	
2014	CHEVY	SONIC	WHIT		2006	CHEVY	TOWN-COUNTY	GRN	
LICENSE PLATE		NUMBER		STATE	LICENSE PLATE		NUMBER		STATE
HTJ2142		OH			K345563		OH		
INSURANCE COMPANY					INSURANCE COMPANY				
GEICO 4507399215					PROGRESSIVE 932412344				
PARTS OF VEHICLE DAMAGED					PARTS OF VEHICLE DAMAGED				
<input type="checkbox"/> FRONT <input checked="" type="checkbox"/> REAR <input type="checkbox"/> LEFT <input type="checkbox"/> RIGHT CENTER					<input type="checkbox"/> FRONT <input type="checkbox"/> REAR <input type="checkbox"/> LEFT <input checked="" type="checkbox"/> RIGHT SIDE				

DESCRIBE HOW ACCIDENT OCCURRED

VEH 1 WAS W/B IN THE PARKING LOT OF 600 N. MANTUA ST.

VEH 2 WAS FACING N/B IN A PARKING SPOT ON THE SOUTH SIDE OF 600 N. MANTUA ST. VEH 2 BACKED OUT OF HER PARKING SPACE AND STRUCK VEH 1. MINOR DAMAGE WAS CAUSED TO BOTH VEHICLES.

OFFICER / SUPERVISOR SIGNATURE [Signature]	SKETCH HOW ACCIDENT OCCURRED	INDICATE NORTH BY ARROW  600 N. MANTUA
	DRAWING APPROX.	
	NOT TO SCALE.	
		
	N. MANTUA ST.	